Image# 201812069134449761					PAGE 1 / 323
FEC AN	EPORT OF R ND DISBURS Other Than An Autho	EMENT	S		Office Use Only
1. NAME OF TYP COMMITTEE (in full)	e or print ▼	Example: If typin over the lines.	ng, type	12FE4M5	
UnitedHealth Group Incor	porated PAC (Unite	dHealth Grou	p PAC)		
ADDRESS (number and street)	01 Pennsylvania Ave, NW				
Check if different	uite 200				
than previously v reported. (ACC)	Vashington				20004
2. FEC IDENTIFICATION NUMB	ER V CITY		S		ZIP CODE
C C00274431	3. IS 1 REF		NEW N) OR	AME (A)	NDED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) 	b) Monthly Report Due On: Apr 20 (c) 12-Day	(M3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 Sep 20 Oct 20 General (1)	0 (M9) Dec 20 (M12) (Non-Election Year Only) 0 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	PRE -Election Report for the:	Convention (12C)	Special (12	
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (300]	Runoff (30	State of
Termination Report (TER)	Election	on 11	06 / Y	2018	in the State of
5. Covering Period	18 / Y Y Y Y 18 2018	through	M M 11	/ D D / 26	Y Y Y Y 2018
I certify that I have examined this Res S Type or Print Name of Treasurer	eport and to the best of m herwood, Susan, , ,	y knowledge and I	belief it is true	e, correct and	complete.
Signature of Treasurer	Susan, , ,	[Electronicall	y Filed] Da	ate	/ D D / Y Y Y Y 06 2018
NOTE: Submission of false, erroneous,	, or incomplete information r	nay subject the per-	son signing this	s Report to the	penalties of 52 U.S.C. § 3010
Office Use Only					FEC FORM 3X Rev. 05/2016

12/06/2018 12 : 25

X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

F	Report Covering the Period: From:		o: 11 / 26 / Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		621080.35
	(b) Cash on Hand at Beginning of Reporting Period	442512.96	
	(c) Total Receipts (from Line 19)	237633.19	1739400.78
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	680146.15	2360481.13
7.	Total Disbursements (from Line 31)	29250.00	1709584.98
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	650896.15	650896.15
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:	/ D D / Y Y Y Y 18 2018 To	: 11 / 26 / Y Y Y Y 2018
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)	234544.65	1586759.47
(ii) Unitemized (iii) TOTAL (add	3088.54	147010.48
Lines 11(a)(i) and (ii)	237633.19	1733769.95
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	0.00	2080.83
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	237633.19	1735850.78
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
 (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made 	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	2500.00
(Dividends, Interest, etc.)	0.00	1050.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))►	237633.19	1739400.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	237633.19	1739400.78

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4	
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar fear-to-Date	
(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	
Transfers to Affiliated/Other Party Committees	0.00	0.00	
Contributions to Federal Candidates/Committees	17000.00	856000.00	
and Other Political Committees Independent Expenditures	17000.00		
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00	
(use Schedule F)	0.00	0.00	
Loan Repayments Made	0.00	0.00	
Loans Made Refunds of Contributions To:	0.00	0.00	
(a) Individuals/Persons Other Than Political Committees	0.00	549.98	
(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	549.98	
Other Disbursements (Including			
Non-Federal Donations)	12250.00	853035.00	
Federal Election Activity (52 U.S.C. § 30101((a) Allocated Federal Election Activity (from Schedule H6)	(20))		
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00	
Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	29250.00	1709584.98	
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	29250.00	1709584.98	

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC	Form	3X	(Rev.	05/2016)
1 20		0/	(110 .	00/2010)

III. Net Contributions/ Operating Expenditures

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

	-					
(subtract	Line	37	from	Line	36)	

	-			7	237633.19
					0.00
	-			-7	0.00
					237633.19
	-			7	257055.19
1					0.00
	7			7	
					0.00
	-7			-7	
					0.00
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						1725950 70
		-7		-	7	1735850.78
						549.98
		-7			-1	1 1 285
						1735300.80
the second se	1.	-	1.	1.	- 7	
_						0.00
		-1			-7	0.00
F	-	4		-	-	1 1 1 1
		-7-			-7-	
	+	-7-	-	+		0.00

COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

		Detailed Summary Page				
			13 14 15 16 17			
Any information copied from such Reports and Si or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	NC)			
Full Name of Individual (Last, First, Middle Init A. STREB, DEBORAH, , ,	Date of Receipt					
Mailing Address 2201 NORTH STAR ROAD			11 26 / Y Y Y Y 2018			
	State OH	Zip Code	Transaction ID : PR1159794152617			
UPPER ARLINGTON		43221-3810	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		42.00			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼		322.00	P/R Deduction (\$14.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle Init B. CLARKE, ERIC, , ,	tial) or Full C	rganization Name	Date of Receipt			
Mailing Address 20 MCNULTY DRIVE			11 26 2018			
City	State	Zip Code	Transaction ID : PR1159802252617			
EAST HARTFORD	СТ	06118-2413	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	28.86				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 221.26	P/R Deduction (\$9.62 Bi-Weekly)			
Full Name of Individual (Last, First, Middle Init C. SWAN, SHARON, , ,	tial) or Full C	rganization Name	Date of Receipt			
Mailing Address 395 STEAMBOAT CROSSING	3		M M / D D / Y Y Y Y 11 26 2018			
City	State	Zip Code	Transaction ID : PR1159803252617			
DRIPPING SPRINGS	TX	78620-4342	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ů l					
Name of Employer (for Individual)	Memo Item					
United HealthCare Services Inc	PSS	Strat Acct Exec				
Receipt For:	Aggregate	Year-to-Date 🔻				
Other (specify)		230.00	P/R Deduction (\$10.00 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			100.86			
TOTAL This Period (last page this line number of	only)	·····				

FOR LINE NUMBER:

PAGE

7 OF

		Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)			
Full Name of Individual (Last, First, Middle I ELLISTON, JAMES, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 302 S 52ND ST			11 26 / Y Y Y Y 2018			
City OMAHA	State NE	Zip Code 68132-3544	Transaction ID : PR1159805952617 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		30.00			
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$10.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I GAUDIO, JOSEPH, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 4842 E MOUNTAIN VIEW R	D		11 26 / Y Y Y Y 2018			
City PARADISE VALLEY	State AZ	Zip Code 85253-1539	Transaction ID : PR1159811852617 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		576.90			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify) ▼	, 4422.90	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I WICHMANN, DAVID, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 7000 ANTRIM ROAD			11 / D D / Y Y Y Y 11 26 2018			
City EDINA	State MN	Zip Code 55439-1708	Transaction ID : PR1159814752617 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		576.90			
Name of Employer (for Individual) United HealthCare Services Inc	Occ	upation (for Individual))	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			1183.80			
TOTAL This Period (last page this line numbe	er only)					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

	ž	Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
			person for the purpose of soliciting contributions te to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
> UnitedHealth Group Incor	porated PAC (L	JnitedHealth Group P	AC)			
Full Name of Individual (Last, First, M MEAD, BRUCE, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 1232 GRAY BRANCH	IRD		M M / D D / Y Y Y Y 11 26 2018			
City MCKINNEY	State TX	Zip Code 75071-6495	Transaction ID : PR1159816152617 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		576.90			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item			
Receipt For: Primary General Other (specify) ▼	Receipt For: Aggregate Year-to-Date ▼ Primary General					
Full Name of Individual (Last, First, M B. PENSHORN, JOHN, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 120 BLACK OAKS LA	11 26 2018					
City WAYZATA	State MN	Zip Code 55391-1363	Transaction ID : PR1159816952617			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 2 UnitedHIth Group	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 4422.90	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, M KALLMEYER, PAUL, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 468 HERALD DR			11 / 26 / Y Y Y Y 11 26 2018			
City AMBLER	State PA	Zip Code 19002-1530	Transaction ID : PR1159817452617 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		392.85			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2607.10	P/R Deduction (\$130.95 Bi-Weekly)			
SUBTOTAL of Receipts This Page (opti	onal)		1546.65			
TOTAL This Period (last page this line i	number only)					

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. QUIRK, THOMAS, , ,	e Initial) or Full C	Prganization Name	Data of Dessist						
A. QUIRK, THOMAS, , , Mailing Address 6458 ORCHID LANE			Date of Receipt						
City	State	Zip Code	11 26 2018 Transaction ID : PR1159819152617						
DALLAS	ТХ	75230-4121	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		48.45						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Care Initiv	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 451.45	P/R Deduction (\$16.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BARATZ, MEREDITH, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1850 SOLEDAD AVENUE			11 26 / Y Y Y Y Y 2018						
City LA JOLLA	State CA	Zip Code 92037-3820	Transaction ID : PR1159820052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) V		322.92	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. FALK, DAVID, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 323 LAWRENCE AVE			11 / D D / Y Y Y Y 26 2018						
City HIGHLAND PARK	State NJ	Zip Code 08904-1851	Transaction ID : PR1159820252617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer (for Individual) Optum Services, Inc	Occ Mec	upation (for Individual) I Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		132.57						
TOTAL This Period (last page this line num	ber only)								

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address PO BOX 72			11 26 2018							
City	State	Zip Code	Transaction ID : PR1159827452617							
WAYZATA	MN	55391-0072	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, UHG Chief Medical Officer	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I BUENEMANN, BARBARA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 128 ROSEBROOK DR	1		11 26 / Y Y Y Y Y 11 26							
City	State MO	Zip Code	Transaction ID : PR1159828752617							
FLORISSANT		63031-8633	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.62							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Service	Memo Item							
Receipt For:	Aggregate	Year-to-Date V	1							
Primary General Other (specify) ▼		265.42	P/R Deduction (\$11.54 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. HOCK, CHRISTOPHER, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 215 WINDMILL HILL			M M / D D / Y Y Y Y 11 26 2018							
City WETHERSFIELD	State CT	Zip Code 06109-2746	Transaction ID : PR1551128952617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.62							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 265.42	P/R Deduction (\$11.54 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			646.14							
TOTAL This Period (last page this line numbe	r only)									

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 11 OF

	ECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c	2 12						
				13 14 15							
or for commercial	purposes, other than using		ay not be sold or used by any p ddress of any political committee								
	MMITTEE (In Full) alth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Ir MATTEO, M	ndividual (Last, First, Middle IICHAEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt	Date of Beceint						
	^S 25 JEREMIAHS WAY			M M / D D / Y Y Y Y 11 26 2018							
City		State	Zip Code	Transaction ID : PR15	51133452617						
SOUTH GLAS	TONBURY	СТ	06073-3621	Amount of Each Receipt	this Period						
FEC ID numbe federal political	r of contributing committee.	C			346.14						
Name of Emplo	oyer (for Individual) s, Inc		upation (for Individual) ef Client Officer	Memo Item	Memo Item						
Receipt For: Primary Other (sp	General General	Aggregate	Year-to-Date ▼ 2653.74	P/R Deduction (\$115.38 Bi-Weekly)							
Full Name of Ir B. CARR, AN	ndividual (Last, First, Middle THONY, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address	^S 5400 THOROUGHBRED I	M M / D D / 11 26	2018								
City		State	Zip Code	Transaction ID : PR15	54323452617						
SOUTHWEST	RANCHES	FL	33330-2411	Amount of Each Receipt	this Period						
FEC ID numbe federal political	or of contributing committee.		576.90								
	oyer (for Individual) are Services Inc		upation (for Individual) S Natl VP SIs & Acct Mgmt	Memo Item							
Receipt For: Primary Other (sp	General becify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 B	i-Weekly)						
	ndividual (Last, First, Middle CHRISTINE, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address	^S 25 JUSTIN LANE			M M / D D / 11 26	Y Y Y Y 2018						
City		State	Zip Code	Transaction ID : PR15	54323652617						
WETHERSFIE	LU	СТ	06109-2542	Amount of Each Receipt	this Period						
FEC ID numbe federal political	er of contributing committee.	С			30.00						
United HealthC	oyer (for Individual) are Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary Other (sp	General General	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-	Weekly)						
SUBTOTAL of R	eceipts This Page (optional			-	953.04						

FOR LINE NUMBER:

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			Use separate schedule(s)	(check on	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12	<u> </u>				
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
$\overline{)}$	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia MILLER, KATHERINE, , ,	l) or Full O	organization Name	Date o	of Re	ceipt							
	Mailing Address 2321 HARBOR LAKE DRIVE			M M M	11 26 2018								
	City ORANGE PARK	State FL	Zip Code 32003-7799					32435261 is Period	7				
FEC ID number of contributing federal political committee.						-		576.	90				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt		lemo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Dec	Juctio	on (\$192	.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Initia ANDERSON, CRAIG, , ,	l) or Full O	organization Name	Date o	of Re	ceipt							
	Mailing Address 47 AMATO CIRCLE	1-		11 M	/	D D D 26	/ Y	2018	Y				
	City WETHERSFIELD	State CT	Zip Code 06109-3971			-		5735261 is Period	7				
	FEC ID number of contributing federal political committee.	С		576.90									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn Pres Ntwk Mgmt		lemo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia ERICKSON, KAREN, , ,	l) or Full O	organization Name	Date o	of Re	ceipt							
	Mailing Address 15348 RED OAKS ROAD SE			11		26		2018					
	City PRIOR LAKE	State MN	Zip Code 55372-1834					95765261 is Period					
	FEC ID number of contributing federal political committee.	С				y :	,	576.	90				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) um Exec		1emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Dec	ductio	on (\$192	.30 Bi-V	/eekly)					
s	UBTOTAL of Receipts This Page (optional)					,	,	1730.	70				
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SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

PAGE 13 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I A. MONFILETTO, ERNEST, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3062 COMFORT ROAD			M = M / D = D / Y = Y = Y = Y Y 11 26 2018							
City NEW HOPE	State PA	Zip Code 18938-5622	Transaction ID : PR1575958152617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		230.76							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1769.16	P/R Deduction (\$76.92 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I 3. VALENTA, LEE, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5033 PARK TERRACE			11 26 / Y Y Y Y 2018							
City EDINA	State MN	Zip Code 55436-1098	Transaction ID : PR1575958552617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I KELLY, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 341 PLEASANT AVENUE	Otata	Zin Oode	11 / D D / Y Y Y Y Y 2018							
City SAINT PAUL	State MN	Zip Code 55102-2333	Transaction ID : PR1575959752617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ' Tax	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1384.56							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

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			Use separate schedule(s)	(check on	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 13	11b 14	11c 15	12	Г	17				
	ny information copied from such Reports and St for commercial purposes, other than using the			erson for the	purpose of	soliciting	g contril	butio	ns				
\setminus	NAME OF COMMITTEE (In Full)	//		•									
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)									
<u> </u>	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name										
Α.	COHEN, ADAM, , , Mailing Address 18515 24TH AVE N				f Receipt	_							
	Maining Address 16515 241H AVE N			M M	26	/ Y	2018						
	City	State	Zip Code	Trans	Transaction ID : PR1580863152617								
	PLYMOUTH	MN	55447-2010	Amoun	t of Each R	eceipt th	nis Perie	od					
	FEC ID number of contributing federal political committee.	C					36	3.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	M	lemo Item								
	Optum Services, Inc	VP	CInt Svc Acct Mgt										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		463.00	P/R Dec	duction (\$179	9.00 Bi-V	√eekly)						
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name		(D · · ·								
в.	CAHILL, LAURA, , , Mailing Address 119 SILVER BEECH ROAD				f Receipt	1 1		()) (
	Maining Address 119 SIEVER BEECH ROAD			M M	26	/ Y	2018						
	City	State	Zip Code	Trans	saction ID :	PR15808	<u>863652</u>	617					
	SOUTHBURY	СТ	06488-2786	Amoun	t of Each R	eceipt th	nis Perie	od					
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Solution Sales Executive	M	lemo Item								
	Receipt For:	Aggregate	Year-to-Date ▼	7									
	Primary General		222.02	P/R Ded	luction (\$14.	04 Bi-We	ekly)						
	Other (specify) v		, 322.92										
C.	Full Name of Individual (Last, First, Middle Init WEBB, ROBERT, , ,	ial) or Full O	rganization Name	Date o	f Receipt								
	Mailing Address 4516 DREXEL AVENUE			M M	/ D D 26	/ Y	2018		1				
	City	State	Zip Code	Trans	saction ID :	PR1580	865352	617					
	EDINA	MN	55424-1130	Amoun	t of Each R	eceipt th	nis Perie	od					
	FEC ID number of contributing federal political committee.	C				. ,	57	76.90					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UnitedHIth Grp	N	lemo Item								
	Receipt For:	I	Year-to-Date ▼										
	Primary General	33 - 3	4422.90	P/R Dec	duction (\$192	2.30 Bi-V	Veekly)						
	Other (specify)		4422.90										
⊢	UBTOTAL of Receipts This Page (optional)				s s s	5	98	32.02	-				
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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. HUGHES, RICHARD, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3905 COUNTY ROAD 44			11 26 2018						
City	State	Zip Code	Transaction ID : PR1596304152617						
MINNETRISTA	MN	55364-9572	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		678.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	SVF	P COO of Human Capital							
Receipt For:	Aggregate	Year-to-Date 🔻							
Primary General		4316.00	P/R Deduction (\$226.00 Bi-Weekly)						
Other (specify) v			1						
Full Name of Individual (Last, First, Middle B. JOHNSON, THAD, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9741 GLACIER BAY			11 26 2018						
City	State	Zip Code	Transaction ID : PR1596304352617						
EDEN PRAIRIE	MN	55347-2615	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Primary General			P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify) v		4422.90	1						
Full Name of Individual (Last, First, Middle C. SCHUMACHER, DANIEL, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5401 LARADA LANE			11 26 2018						
City	State	Zip Code	Transaction ID : PR1596305452617						
EDINA	MN	55436-1024	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Mkt	Grp Pres & COO							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify)		4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1831.80						
TOTAL This Period (last page this line number	er only)								

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PAGE 16 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12									
٨٣	y information copied from such Reports and State	mente ma	, ,	13 14 15 16 17									
	for commercial purposes, other than using the nar												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (L	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) THEISEN, SCOTT, , ,	or Full Or	rganization Name	Date of Receipt									
	Mailing Address 1950 MEADOWWOODS TRAIL			11 26 / Y Y Y Y Y 2018									
		State MN	Zip Code	Transaction ID : PR1596305652617									
	LONG LAKE		55356-9312	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		576.90									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Ops	Memo Item									
	Receipt For: A	ggregate '	Year-to-Date V	—									
	Primary General Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initial) ANDERSON, MICHAEL, , ,	or Full Or	rganization Name	Date of Receipt									
	Mailing Address 17907 INVERNESS CURVE	M M / D D / Y Y Y Y 11 26 2018											
	City	State	Zip Code	Transaction ID : PR1596309352617									
	EDEN PRAIRIE	MN	55347-2155	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	188.76											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Pharmacy Programs	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate `	Year-to-Date ▼ , 811.20	P/R Deduction (\$62.92 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	Date of Receipt									
	Mailing Address 3318 FOXRIDGE CIRCLE			M M / D D / Y Y Y Y 11 26 2018									
	5	State	Zip Code	Transaction ID : PR1596309752617									
	ТАМРА	FL	33618-2149	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		117.00									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) n Exec Dir	Memo Item									
		ggregate `	Year-to-Date V	_									
	Other (specify)		897.00	P/R Deduction (\$39.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		>	882.66									
т	OTAL This Period (last page this line number only)	•										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 17 OF

	EMIZED RECEIPTS			Detailed Summary Page	×	-		111	5 _	11c	12				
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	y information copied from such Reports and State for commercial purposes, other than using the na														
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) DAVIDSON, TRACY, , ,) or Full O	rgar	nization Name	[Date of Receipt									
	Mailing Address 6058 HARBOUR TOWN CIR					M M / D D / Y Y Y Y 11 26 2018									
	City	State		Zip Code		Trans	acti	ion	ID : F	PR1596	3116526	17			
	WESTERVILLE	ОН		43082-8144	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo) Ite	m						
	Receipt For:	Aggregate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼	P/	P/R Deduction (\$192.30 Bi-Weekly)												
В.	Full Name of Individual (Last, First, Middle Initial) DUNLOP, RICHARD, , ,) or Full O	rgar	nization Name	Date of Receipt										
	Mailing Address 2964 WYSE COURT							11 / D D / Y Y Y Y 2018							
	City	State		Zip Code		Transa	actio	on	ID : F	R1596	31235261	7			
	LEWIS CENTER	OH		43035-8253	/	Amount	of	Eac	ch Re	eceipt th	nis Perioo	1			
	FEC ID number of contributing federal political committee.	G								- 7	300	.00			
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Memo Item									
	Receipt For:	Aggregate	Yea	r-to-Date ▼ 2300.00	P/	P/R Deduction (\$100.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) GARCIA, STEVAN, , ,) or Full O	Orgar	nization Name		Date of	Re	eceip	ot						
	Mailing Address 1375 GRAYHAWK PLACE					M M 11	/	D	26	/ Y	2018	Y			
	City	State		Zip Code		Trans	acti	ion	ID : F	PR1596	3129526	17			
	LARKSPUR	CO		80118-8623	/	Amount	of	Eac	ch Re	eceipt th	nis Perioo	1			
	FEC ID number of contributing federal political committee.	С						,		y	0	.10			
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)		Me	emo	b Ite	m						
	United HealthCare Services Inc	SVP	P Op	S											
		Aggregate	Yea	r-to-Date ▼											
	Other (specify)		-	5000.00	P/R Deduction (\$0.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•				,		,	877.	00			
т	OTAL This Period (last page this line number onl	y)		•				- -							

SCHEDULE A (FEC Form 3X) _____ ___

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ITEMIZED RECEIPTS			Use separate schedule(s)	(cł	(check only one)							
11			for each category of the Detailed Summary Page		× 11a]11b	11c	12			
	y information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)	e name and a	address of any political committee	9 10 5			outions i	TOTT SUCT	1 commu	ee.		
	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	۹C)								
Α.	Full Name of Individual (Last, First, Middle Ini HEUMANN, KURT, , ,	tial) or Full O	Organization Name		Date of Receipt							
	Mailing Address 9825 GERALD DR				11 26 / Y Y Y Y 11 26							
	City SAINT LOUIS	State MO	Zip Code 63128-1767						31375261 is Period	7		
	FEC ID number of contributing federal political committee.	C							115.:	38		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO		M	emo	tem Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58]	P/R Ded	ucti	on (\$38	.46 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Ini MALLATT, KATHLEEN, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt					
	Mailing Address 4304 SOUTH 167 AVENUE			11 / D D / Y Y Y Y 26 2018								
	City	State NE	Zip Code						1545261	7		
	OMAHA		68135-1353	-	Amount	t of	Each H	leceipt th	is Period	_		
	FEC ID number of contributing federal political committee.	С		576.90						90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO		M	emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Ini ROSENTHAL, DANIEL, , ,	tial) or Full O	Organization Name		Date of	f Re	eceipt					
	Mailing Address 8 VIA HERMOSA				м м 11	/	26		2018	Y		
	City ORINDA	State CA	Zip Code 94563-1828						31735261 is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1		576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Ntwk		М	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90]	P/R Ded	lucti	on (\$19	2.30 Bi-W	/eekly)			
s	UBTOTAL of Receipts This Page (optional)			•			y	. ,	1269. <i>*</i>	18		
т	OTAL This Period (last page this line number	only)		•								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EMIZED RECEIPTS			Detailed Summary Page	×	-		111		11c	12			
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	y information copied from such Reports and State for commercial purposes, other than using the na													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated													
Α.	Full Name of Individual (Last, First, Middle Initial, RUTH, KEVIN, , ,) or Full O	Orgar	nization Name		Date of	Re	eceip	pt					
	Mailing Address 16621 ALEXANDER MANOR DF	RIVE				11 26 2018								
		State		Zip Code				-			31745261			
	SILVER SPRING	MD	_	20905-5028	_ /	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			576.90							90		
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) th Advancement		Me	emo) Ite	em					
	Receipt For: Primary General Other (specify) ▼	P/	/R Dedi	uctio	on ((\$192.	30 Bi-V	√eekly)						
B.	Full Name of Individual (Last, First, Middle Initial) STURKEY, DAVID, , ,) or Full O	Drgar	nization Name	Date of Receipt									
	Mailing Address 1941 MARINA ROAD							11 / D D / Y Y Y Y 11 26 2018						
	City IRMO	State SC		Zip Code 29063-8579				-			31845261			
	FEC ID number of contributing federal political committee.	number of contributing									nis Period 117.	_		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Acct Mgmt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 897.00						P/R Deduction (\$39.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial) or Full O	Orgar	nization Name		Date of	Re	eceip	pt					
	Mailing Address 467 PRAIRIE WAY SOUTH					^M ^M	1	D	26	/ Y	2018	Y		
	City BAYPORT	State MN		Zip Code 55003-1607							3 190526 1			
	FEC ID number of contributing federal political committee.	C				Amount	10	⊨ac	ch He	ceipt th	iis Period 75.	_		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) erwriting		Me	emo) Ite	əm					
	Dessint Fam			r-to-Date ▼ 575.00	P.	/R Ded	uctio	on ((\$25.0	00 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)							,			768.	90		
т	OTAL This Period (last page this line number onl	y)		•				,						

Use separate schedule(s)

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ידו			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a 11b 11c 12						
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
<u>.</u>	NAME OF COMMITTEE (In Full)		see any pointed committee							
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)						
Α.	Full Name of Individual (Last, First, Middle Initia DODDY, JOHN, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 50 WALSINGHAM ROAD			M M / D D / Y Y Y Y 11 26 2018						
	City MENDHAM	State NJ	Zip Code 07945-1827	Transaction ID : PR1600597352617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		117.00						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Info Tech	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia MICHAUX, MICHAEL, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 742 GOODRICH AVE	11 26 / Y Y Y Y 11 26 2018								
	City	State MN	Zip Code	Transaction ID : PR1600598552617						
	SAINT PAUL		55105-3343	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.		300.00							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM PCM	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2300.00	P/R Deduction (\$100.00 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 4800 SUNNYSLOPE ROAD E			11 / D D / Y Y Y Y Y 2018						
	City EDINA	State MN	Zip Code 55424-1163	Transaction ID : PR1600598752617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		576.90						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Advancement	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			993.90						
т	OTAL This Period (last page this line number or	וy)								

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Use separate schedule(s)	(check only one)											
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Midd PETERSON, MATTHEW, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2260 FOX STREET			11 26 2018									
City ORONO	State MN	Zip Code 55356-8316	Transaction ID : PR1602669952617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		576.90									
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	CEC	upation (for Individual) D Ancillary & Ind/Sgt CAO	Memo Item									
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. MALONEY , JEFFREY, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 6327 PASADENA POIN	T BLVD S		11 26 / Y Y Y Y 2018									
City GULFPORT	State FL	Zip Code 33707-3867	Transaction ID : PR1613243552617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		288.45									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. CELLI, PAT, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1210 COUNTRY CLUB			11 / D D / Y Y Y Y 2018									
City CUTCHOGUE	State NY	Zip Code 11935-1728	Transaction ID : PR1613243752617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)		1442.25									
TOTAL This Period (last page this line nur	nber only)											

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ITEMIZED RECEIPTS		Use separate schedule(s)	(che	(check only one)									
			for each category of the Detailed Summary Page	×	11a 13		11b	11c		2 6	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	g conti	ributio	ons		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia KENNEDY, WILLIAM, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt						
	Mailing Address 14 MYRA LN				M M 11	/	D D 26	/ Y	ү 201	8 8	Ý		
	City BURLINGTON	State CT	Zip Code 06013-1327					PR16534 eceipt th					
	FEC ID number of contributing federal political committee.	С					-			60.0	0		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Software Engineering		M	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00] P	P/R Ded	uctio	on (\$20.	00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia BELLAMY, THOMAS, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt						
	Mailing Address 2743 THOMAS AVENUE SOUT				11 26 2018 Transaction ID : PR1653444352617								
	City MINNEAPOLIS	State MN	Zip Code 55416-4346										
	FEC ID number of contributing federal political committee.	Occupation (for Individual) VP SIs Ops			Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item								
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 4422.90	P	/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly))			
С.	Full Name of Individual (Last, First, Middle Initia HOLMAN, ROBERT, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt						
	Mailing Address N12464 HORSESHOE BEND R				M M 11	1	D D D 26		ү 201	8			
	City MINONG	State WI	Zip Code 54859-8026					PR1653					
	FEC ID number of contributing federal political committee.	С					,	9		30.00	0		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) twk Prgms		M	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.00]	P/R Ded	ucti	on (\$10.	00 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•			, .		6	66.90)		
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SCHEDULE A (FEC Form 3X) _____ _

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	EMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		(check only one)
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			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle SEVIGNY, BRIAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 137 CREEKVIEW LANE			11 26 / Y Y Y Y
City LORETTO	State MN	Zip Code 55357-2111	Transaction ID : PR1653445752617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ector Tech Support	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle SULLIVAN, DANIEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 57 QUORN HUNT ROAD			11 / D D / Y Y Y Y 11 26 2018
	State CT	Zip Code	Transaction ID : PR1653445852617
WEST SIMSBURY		06092-2524	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.38
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj-Prgm Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Other (specify) ▼		884.58	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle ARCHER, LORI, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 2781 SADDLE CLUB RO			11 D D / Y Y Y Y 26 2018
City GREENWOOD	State IN	Zip Code 46143-9211	Transaction ID : PR1806750152617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		34.62
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prov Svc	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 265.42	P/R Deduction (\$11.54 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		192.12
TOTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	EMIZED RECEIPTS			Detailed Summary Page	×	-		111	- H	11c		12	_		
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	y information copied from such Reports and State for commercial purposes, other than using the na														
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
Α.	Full Name of Individual (Last, First, Middle Initial EMERSON, PAUL, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	pt						
	Mailing Address 18855 MEADOW VIEW BLVD				M M / D D / Y Y Y Y 11 26 2018										
	City	State		Zip Code		Trans	acti	ion	ID : I	PR180	675	035261	7		
	PRIOR LAKE	MN		55372-3133	_ /	Amount	of	Ead	ch Re	eceipt	this	Period			
	FEC ID number of contributing federal political committee.	С						-7-		- 7		576.	90		
	Name of Employer (for Individual) Optum360 Services Inc	Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 4422.90	P	/R Dedi	uctic	on ((\$192	.30 Bi	Wee	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial ULLOA, SHAUNA, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	pt						
	Mailing Address 9 STRATFORD ROAD	1-				м м 11	/		26	1		y y 2018	Y		
	City FARMINGTON	State CT		Zip Code 06032-1444		Trans: Amount		-				9 15261 Period	7		
	FEC ID number of contributing federal political committee.									42.	12				
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Clnt Relationship		Me	emo	b Ite	əm						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 322,92	P/	ſR Dedu	uctic	on ((\$14.0)4 Bi-V	Veek	(ly)			
C.	Full Name of Individual (Last, First, Middle Initial ANDERSON, CATHERINE, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	pt						
	Mailing Address 57 SIMMONS LANE	1 -				м м 11	1	L	26	1	2	y 2018			
	City SEVERNA PARK	State MD		Zip Code 21146-1921								075261	7		
				21140-1321	- /	Amount	of	Ead	ch Re	eceipt	this	Period	_		
	FEC ID number of contributing federal political committee.	C					_	y				576.	90		
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) at Initiv		Me	emo	o Ite	əm						
	Poppint For:			r-to-Date ▼ 4422.90	P	/R Ded	uctio	on ((\$192	.30 Bi	-We	ekly)			
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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		Detailed Summary Page	×	11a		11b		11c	12											
Any information conied from such D	d Statemart	w not be cold or word has		13 or tho		14		15	16	17										
Any information copied from such Reports an or for commercial purposes, other than using																				
NAME OF COMMITTEE (In Full)																				
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	+C)	_	_	_	_	_	_	_										
Full Name of Individual (Last, First, Middle DUFEK, ROBERT, , ,	nitial) or Full O	rganization Name	C	Date of Receipt																
Mailing Address 816 PROMONTORY PLAC	CE			M M / D D / Y Y Y Y 11 26 2018																
City	State	Zip Code		Trans	acti	ion II) : P	R19035	57715261	7										
EAGAN	MN	55123-2297	A	Amount	of	Each	ו Re	ceipt th	is Period											
FEC ID number of contributing federal political committee.		75.00																		
Name of Employer (for Individual)		upation (for Individual)		Me	əmo	b Item	n													
Optum Services, Inc	Sr D	Dir Info Security																		
Receipt For:	Aggregate	Year-to-Date ▼				_	05	0.5												
Other (specify) ▼		575.00	1 P/	K Ded	uctic	on (\$	25.0	0 Bi-We	екіу)											
Full Name of Individual (Last, First, Middle B. JOHNSON, CHRISTOPHER, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt														
	Mailing Address 12880 53RD STREET NORTH								M M / D D / Y Y Y Y 11 26 2018											
City	State	Zip Code							591152617	7										
STILLWATER	MN	55082-1063	A	\mount	of	Each	n Re	ceipt th	is Period											
FEC ID number of contributing federal political committee.	С			Memo Item																
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt																		
Receipt For:	Aggregate	Year-to-Date ▼																		
Primary General Other (specify) ▼		897.00	P/	R Dedu	uctic	on (\$:	39.0	0 Bi-We	ekly)											
Full Name of Individual (Last, First, Middle PENN, STEVEN, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt	, ,													
Mailing Address 6766 IDLEWOOD WAY				M M 11	/		26		2018											
City EDEN PRAIRIE	State MN	Zip Code 55346-3506				-			61295261	7										
		000-00	#	Amount	t of	Each	n Re	ceipt th	is Period											
FEC ID number of contributing federal political committee.	С					y		9	42.(00										
Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T		M	emc	o Iten	n													
Receipt For:	Aggregate	Year-to-Date 🔻																		
Other (specify)		322.00	P/	/R Ded	ucti	on (\$	14.0	0 Bi-We	ekly)											
SUBTOTAL of Receipts This Page (optional))		·		-	1			234.0	10										
TOTAL This Period (last page this line numb	per only)	·····		_		,														

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle SANTELLI, JOHN, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 25510 BIRCH BLUFF ROA	۵. ا		11 26 2018									
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622052617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? CIO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. STEERUP, LORI, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7019 DONLEA LANE			11 / 26 / Y Y Y Y Y 2018									
City EDEN PRAIRIE	State MN	Zip Code 55346-3164	Transaction ID : PR1903628652617									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 42.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. WEYMOUTH, PAUL, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 317 WRIGHTS MILL RD			11 / D D / Y Y Y Y Y 26 / 2018									
City COVENTRY	State CT	Zip Code 06238-1559	Transaction ID : PR1903636952617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		807.00									
Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4188.84	P/R Deduction (\$269.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			1425.90									
TOTAL This Period (last page this line numb	er only)											

SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page			(check or									
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	y information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Gr	oup PAC	C)							
Α.	Full Name of Individual (Last, First, Middle Init BEATY, JON, , ,	ial) or Full O	Organization Name		Date of Receipt							
	Mailing Address 32860 SE DIVERS RD				11 26 / Y Y Y Y Y 11 26 2018							
	City ESTACADA	State OR	Zip Code 97023-7507						6785261 is Period	7		
	FEC ID number of contributing federal political committee.	С							30.0	00		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clin Qlty			Vemo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2:	30.00	P/R De	ducti	on (\$10.	00 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Init BRYAN, KATHIE, , ,	organization Name		Date	of Re	eceipt						
	Mailing Address 912 JOSHUA PLACE			11 26 2018 Transaction ID : PR2119469452617								
	City SAN DIEGO	State CA	Zip Code 92154-2537						7			
	FEC ID number of contributing federal political committee.	C		nt of	Each R	eceipt th	is Period 75.0	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) g Cnslt			Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	75.00	P/R De	ducti	on (\$25.)	00 Bi-We	ekly)			
С.	Full Name of Individual (Last, First, Middle Init CADRIEL, DANIEL, , ,	ial) or Full O	organization Name		Date	of Re	eceipt					
	Mailing Address 26023 NORTH 53RD DRIVE				M 11		D D D 26		2018 Y			
	City PHOENIX	State AZ	Zip Code 85083-6349						16985261 is Period	7		
	FEC ID number of contributing federal political committee.	С					,	. ,	30.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	upation (for Individual) S Manager Client Manag	gement		Mem	o Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2	30.00	P/R De	ducti	ion (\$10.	00 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)						y	9	135.0	00		
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 1 verson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. CAMPBELL, COLLEEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4936 LONGMEADOW PA	RK ST		M M / D D / Y Y Y Y 11 26 2018						
City ORLANDO	State FL	Zip Code 32811-7485	Transaction ID : PR2119469952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		45.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. DEMBROSKI, TODD, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1390 FINCH LN			11 / 26 / Y Y Y Y 2018						
City GREEN BAY	State WI	Zip Code 54313-6400	Transaction ID : PR2119472852617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		45.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Svs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle DUNGAN, TARA, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 619 HIGH COUNTRY RIE	·		11 / 26 / Y Y Y Y 11 26						
City SAN ANTONIO	State TX	Zip Code 78260-1829	Transaction ID : PR2119473252617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) : Dir, Clin Appeals	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		120.00						
TOTAL This Period (last page this line num	ber only)								

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	or commercial purposes, other than using the n AME OF COMMITTEE (In Full)	ame and a	ddress of any political committee	to s	olicit con	itrid	utions	from suci		.ee.	
	JnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
	ull Name of Individual (Last, First, Middle Initial GILDERNICK, AMY, , ,) or Full O	rganization Name		Date of	Re	ceipt				
M	lailing Address 2709 WILLIAMS GRANT				M M 11	/	D 26	D / Y	Y Y 2018	Ŷ	
	ity DE PERE	State WI	Zip Code 54115-9456	_					47525261 iis Period		
	EC ID number of contributing deral political committee.	С			<u> </u>		- 1		60.	00	
U	ame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Clms		Me	emo	ltem				
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00		P/R Dedu	uctio	on (\$20	.00 Bi-We	eekly)		
	ull Name of Individual (Last, First, Middle Initial HANSEN, DAVID, , ,) or Full O	rganization Name		Date of	Re	ceipt				
_	lailing Address 33 VIA CONOCIDO				M M	/	26		2018	Y	
	ity SAN CLEMENTE	State CA	Zip Code 92673-7044	-			-		17675261		
F	EC ID number of contributing ederal political committee.	C	32013-1044		Amount	OT	Each F	receipt tr	iis Period 405.		
	lame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	_	Me	emo	Item	,			
	coopint For:		Year-to-Date V	_							
	Other (specify) V		, 3105.00	P/R Deduction (\$135.00 Bi-Weekly)							
	ull Name of Individual (Last, First, Middle Initial HARLAN, MADELINE, , ,) or Full O	rganization Name		Date of	Re	ceipt				
M	lailing Address 3444 CORTES PLACE				M M 11	/	26		ү ү 2018	Y	
	ity ROUND ROCK	State TX	Zip Code 78665-5666						47695261 iis Period		
	EC ID number of contributing deral political committee.	С			<u> </u>		, .	, ,	42.	12	
U	ame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Regl Affs		Me	emo	tem				
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92		P/R Ded	uctio	on (\$14	.04 Bi-We	eekly)		
SUI	BTOTAL of Receipts This Page (optional)		•••••				, .	. ,	507.	12	
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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1									
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I HARVEY, ANNE, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4916 THOR WAY			11 26 2018									
City CARMICHAEL	State CA	Zip Code 95608-5650	Transaction ID : PR2119477252617									
		3000-3030	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual)		upation (for Individual)	Memo Item									
United HealthCare Services Inc Receipt For:		Ntwk Contrctng	_									
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$10.00 Bi-Weekly)									
Other (specify) V		230.00										
Full Name of Individual (Last, First, Middle I B. HAYES, PAULINE, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7651 YORKTOWN AVENUE	-		11 26 / Y Y Y Y									
City	State	Zip Code	Transaction ID : PR2119477452617									
	CA	92648-7803	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		230.00	P/R Deduction (\$10.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. HO, SAMUEL, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4220 OCEAN DR			11 26 2018									
City	State	Zip Code	Transaction ID : PR2119477952617									
MANHATTAN BEACH	CA	90266-3059	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual)		upation (for Individual)	Memo Item									
United HealthCare Services Inc Receipt For:		dvsr	_									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			636.90									
TOTAL This Period (last page this line numbe	r only)	······										

FOR LINE NUMBER:

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			Use separate schedule(s)		(check only one)							
11	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b	11c	12	17			
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committed	erson for th	ne pu contri	rpose of	soliciting	g contribu	tions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Ini HUSER, DONNA L, , ,	tial) or Full C	rganization Name	Date of Receipt								
	Mailing Address 406 SKYTRAIL DR				M M / D D / Y Y Y Y 11 26 2018							
	City NEW BRAUNFELS	State TX	Zip Code 78130-9010					47865261 his Period				
	FEC ID number of contributing federal political committee.	С						30.				
	Name of Employer (for Individual) OPTUM TECHNOLOGY, INC. Receipt For:		upation (for Individual) s Bus Proc Anlyst		Mem	o Item						
	Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 230.00	P/R D	educt	tion (\$10.	.00 Bi-We	eekly)				
B.	Full Name of Individual (Last, First, Middle Ini KANNE, KATHLEEN, , ,	rganization Name	Date	of R	eceipt							
	Mailing Address 4826 PALOMINO COURT			1 ·		/ D D D 26	/ Y	2018	Y			
	City ERIE	State PA	Zip Code 16506-6624					47965261 nis Period				
	FEC ID number of contributing federal political committee.	С		1666.65								
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3333.30	P/R D	P/R Deduction (\$555.55 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Ini KNUTSON, MARK, , ,	tial) or Full C	rganization Name	Date	of R	eceipt						
	Mailing Address 19312 FAIRHAVEN EXT	State	Zip Code	1 Tra	1	26	JL	2018 48025261				
	SANTA ANA FEC ID number of contributing	СА	92705-6310	Amo	unt o	f Each R	leceipt th	nis Period 45.	_			
	federal political committee. Name of Employer (for Individual) Optum Services, Inc	bloyer (for Individual) Occupation (for Individual)		- 6	Merr	io Item	y					
	Receipt For: Primary General Other (specify)	1	Year-to-Date ▼ 345.00	P/R D	educ	tion (\$15	.00 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)					,	9	1741.	65			
Т	OTAL This Period (last page this line number	only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12									
	y information copied from such Reports and St for commercial purposes, other than using the												
<u></u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate												
A.	Full Name of Individual (Last, First, Middle Initi MACEMEADOR, HEATHER, , ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 13531 CARLTON OAKS			11 26 2018									
	City	State	Zip Code	Transaction ID : PR2119482552617									
	SAN ANTONIO	TX	78232-4902	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		60.00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initi MURRAY, CAROLYN, , ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 834 WOODTACK COVE WAY			11 26 2018									
	City	State NV	Zip Code	Transaction ID : PR2119484852617									
	HENDERSON	INV	89002-8294	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		30.00									
	Name of Employer (for Individual) Health Plan of Nevada		cupation (for Individual) VP SIs Acct Mgmt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initi NYGARD, KEITH, , ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 9620 W RUSSELL ROAD #1063			M M / D D / Y Y Y Y 11 26 2018									
	City	State	Zip Code	Transaction ID : PR2119485052617									
	LAS VEGAS	NV	89148-4505	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		60.00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Reg Adhr	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)									
S	UBTOTAL of Receipts This Page (optional)			150.00									
	OTAL This Period (last page this line number of												

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				or each category of the Detailed Summary Page	×	11			11 14	1b 4		11c 15	12	17
or	v information copied from such Reports and Stater for commercial purposes, other than using the nar					or t	he		pos	se of		oliciting	contribu	tions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	Uni	tedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) OLLMANNWAGNER, TRACY, , ,	nitial) or Full Organization Name					Date of Receipt							
	Mailing Address 2839 TIMBER LANE						11 / 26 / Y Y Y Y 11 26							
	City GREEN BAY	State Zip Code WI 54313-5841						Transaction ID : PR2119485252617						
	FEC ID number of contributing		-	34313-3641	_ /	Amo	ount	of	Ea	ach F	Rec	ceipt thi	s Perioo 45	00
1	federal political committee.													
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Assc Dir SIs Ops						Memo Item						
	Receipt For:	Yea	r-to-Date 🔻		1									
	Primary General Other (specify) ▼	-	345.00	P/	P/R Deduction (\$15.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) PAXSON, LYNDA A, , ,	or Full C	Drgar	nization Name		Date	ə of	Re	ece	eipt				
	Mailing Address 3924 E GARNET PL						™ 1	/	ľ	D 1	- 1	/ Y	y y 2018	Y
	City HIGHLANDS RANCH	State CO		Zip Code 80126-5044	Transaction ID : PR2119485852617 Amount of Each Receipt this Period									
	FEC ID number of contributing rederal political committee.	C							-			Ţ	75	00
	Name of Employer (for Individual) JNITED HEALTHCARE SVS INC	Occupation (for Individual) Sr Field Acct Mgr						emo	b lt	em				
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 575.00	P/	/R E	Dedu	uctic	on	(\$25	.00) Bi-We	ekly)	
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PETE, DIANA, , ,					Date	e of	Re	ece	eipt				
	Mailing Address 9010 MORNINGSTAR DRIVE						™ 1	/	ľ	26		/ Y	2018 Y	Y
	City SUGAR LAND	State TX		Zip Code 77479-3316									863526 s Perioc	
	FEC ID number of contributing	C				-	Jun	U	Ļ		160	Jeipt till		00
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Assc Dir Clin Qlty						emo	o It	tem				
	Poppint For:	1		r-to-Date ▼ 276.00	P.	/R [Ded	uctio	on	(\$12	2.00) Bi-We	ekly)	
รเ	JBTOTAL of Receipts This Page (optional)												156	00
тс	TAL This Period (last page this line number only)		·····					-			-		

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t	Statements mathematic he name and a	L ay not be sold or used by any p address of any political committe	person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. PETERS, MICHELLE, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 1128 COUNTRYSIDE DR	Mailing Address 1128 COUNTRYSIDE DR										
City DE PERE	State WI	Zip Code 54115-1040	Transaction ID : PR2119486452617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	ů l										
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. PITTMAN, AUSTIN, , ,	Date of Receipt										
Mailing Address 4621 EDINA BLVD	Mailing Address 4621 EDINA BLVD										
City EDINA	State MN	Zip Code 55424-1154	Transaction ID : PR2119486752617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	ů – Elektrik										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Segment CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle POLICH, CYNTHIA, , ,	Date of Receipt										
Mailing Address 3401 E VIA PALOMITA	11 26 2018 Transaction ID : PR2119486852617										
TUCSON	State AZ	Zip Code 85718-3371	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	200.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Strat Initiv	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			821.90								
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Stateme for commercial purposes, other than using the name							
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (U	nitedHealth Group PA	.C)				
Α.	Full Name of Individual (Last, First, Middle Initial) or PROCHNOW, JAMES, , ,	ne of Individual (Last, First, Middle Initial) or Full Organization Name HNOW, JAMES, , ,						
	Mailing Address 143 RUSTIC OAK DRIVE	11 26 / Y Y Y Y 11 26 2018						
	City St LUXEMBURG W	ate /I	Zip Code 54217-7320	Transaction ID : PR2119487252617				
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period				
	Name of Employer (for Individual) United HealthCare Services Inc	Occup Dir Fi	pation (for Individual) n	Memo Item				
	Receipt For: Agg Primary General Other (specify) ▼	regate Y	ear-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)				
В.	Full Name of Individual (Last, First, Middle Initial) or RICCIUTI, SHARON, , ,	Name of Individual (Last, First, Middle Initial) or Full Organization Name CIUTI, SHARON, , ,						
	Mailing Address 55 PERENNIAL	M M / D D / Y Y Y Y 11 26 2018						
	5	ate A	Zip Code 92603-0621	Transaction ID : PR2119487952617 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Iin Qlty	Memo Item				
	Receipt For: Agg Primary General Other (specify) ▼	regate Y	ear-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)				
с.	Full Name of Individual (Last, First, Middle Initial) or ROGERS, DEBBIE E, , ,	Date of Receipt						
	Mailing Address 413 DOE RUN RD	11 26 / Y Y Y Y 2018						
	5	ate VA	Zip Code 98382-4704	Transaction ID : PR2119488652617 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			30.00				
	Name of Employer (for Individual) UNITED HEALTHCARE SVS INC	· · ·	pation (for Individual) nj Mgr I	Memo Item				
	Receipt For: Agg Primary General Other (specify)	regate Y	ear-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)		••••••	114.12				
т	OTAL This Period (last page this line number only)		•••••	· · · · · · · · · · · ·				

SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I A. SING, MARTIN, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9407 LLANO VERDE	M M / D D / Y Y Y Y 11 26 2018										
City HELOTES	State TX	Zip Code 78023-4156	Transaction ID : PR2119490152617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I STETTLER, RONALD, , ,	Date of Receipt										
Mailing Address 11527 TRAILS END RD	11 / D D / Y Y Y Y Y 26 2018										
City	State	Zip Code	Transaction ID : PR2119490452617								
LEANDER	ТХ	78641-5813	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIthcare Econ	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C. TUCKER, STEVEN, , ,	Date of Receipt										
Mailing Address 3784 8TH AVENUE	11 / 26 / Y Y Y Y 11 26										
City SAN DIEGO	State CA	Zip Code 92103-4305	Transaction ID : PR2119492052617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		288.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2208.00	P/R Deduction (\$96.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			348.00								
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) _____ _

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	neck onl	y o	ne)							
11			for each category of the Detailed Summary Page		× 11a		11b	11c	12	_				
	y information copied from such Reports and S for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full)	name and a	duress of any political committee	, 10 3			Julions	nom suci	T COMMIN					
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	λC)										
Α.	Full Name of Individual (Last, First, Middle Init VANASTEN, SUSAN, , ,	tial) or Full O	rganization Name		Date of Receipt									
	Mailing Address N2249 NICOLE COURT				11 26 2018									
	City KAUKAUNA	State WI	Zip Code 54130-9462		Transaction ID : PR2119492652617 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			<u> </u>		-		120.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Telesls Dir		М	emo	ttem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 920.00		P/R Ded	lucti	on (\$40	.00 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Init WESTPHAL, SCOTT, , ,	tial) or Full O	rganization Name		Date o	f Re	eceipt							
	Mailing Address 4536 ROCKY RUN LN				11 26 2018 Transaction ID : PR2119493252617									
	City OCONTO	State Zip Code WI 54153-9268												
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 34.62										
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir J		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 265.42	F	P/R Ded	ucti	on (\$11	.54 Bi-We	ekly)					
С.	Full Name of Individual (Last, First, Middle Init WRIGHT, GREGORY, , ,	tial) or Full O	rganization Name		Date o	f Re	eceipt							
	Mailing Address 10471 STRAND TERRACE				M M		26		ү ү 2018					
	City SANTA ANA	State CA	Zip Code 92705-1495	_					49415261 iis Period					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y		1938.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		M	lem	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3059.00		P/R Dec	lucti	on (\$64	6.00 Bi-V	Veekly)					
⊢	UBTOTAL of Receipts This Page (optional)		· ·	• -		-	9 i	, , , , , , , , , , , , , , , , , , ,	2092.	62				

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle Ir A. YOUNG, GEORGE, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 36296 N 98TH WAY			Minimum / Display / Yin									
City SCOTTSDALE	State AZ	Zip Code 85262-3138										
FEC ID number of contributing federal political committee.	С		45.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. YOUNG, STEVEN C, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 10765 QUAIL CREEK DRIVE			11 / D D / Y Y Y Y 26 2018									
City	State CO	Zip Code	Transaction ID : PR2119494552617									
PARKER		80138-3064	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual) UNITED HEALTHCARE SVS INC		upation (for Individual) Acct Exec	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		230.00	P/R Deduction (\$10.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir c. MASON, JOHN, J, ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 524 N CRESCENT HEIGHT	S BLVD		M M / D D / Y Y Y Y 11 26 2018									
City LOS ANGELES	State CA	Zip Code 90048-2208	Transaction ID : PR2126373852617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4230.60	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			651.90									
TOTAL This Period (last page this line number	r only)											

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177		Use separate schedule(s)	(check d	only o	ne)	L						
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	ı 🗌	11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full)											
$\left \right $	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	.C)								
	Full Name of Individual (Last, First, Middle Initia BURKE, FORREST, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 380 LEAF STREET			M M / D D / Y Y Y Y 11 26 2018								
	City ORONO	State MN	Zip Code		13245261	7						
			55356-9733	Amo	unt of	Each R	eceipt th	is Period				
	FEC ID number of contributing federal political committee.	С		ΙĽ			-	576.9	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO		Memo	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R D	educti	ion (\$192	2.30 Bi-W	/eekly)				
B.	Full Name of Individual (Last, First, Middle Initia COLEMAN, WILLIAM, , ,	l) or Full O	rganization Name	Date	of Re	eceipt						
	Mailing Address 831 RATLEY ROAD	Ohata	75. 0.4	M 1		26	/ Y	2018	Y			
	City WEST SUFFIELD	State CT	Zip Code 06093-2400					3255261	7			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clms	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V	_								
	Other (specify) ▼		, 276.00	P/R D	educti	ion (\$12.0	00 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initia CUMMINGS, DANIEL, , ,	l) or Full O	rganization Name	Date	of Re	eceipt						
	Mailing Address 1929 FAIRMOUNT AVE			1		D D D 26	/ Y	2018	Y			
	City SAINT PAUL	State MN	Zip Code 55105-1539					13265261 is Period	7			
	FEC ID number of contributing federal political committee.	С			_	y		45.0	00			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	upation (for Individual) Fin		Mem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)								
s	JBTOTAL of Receipts This Page (optional)		•••••			,	. ,	657.9	90			
т	OTAL This Period (last page this line number on	ly)	••••••									

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	<u> </u>												
VinitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P/	4C)										
Full Name of Individual (Last, First, Mic A. HULTGREN, BROR, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 408 22ND ST			11 26 / Y Y Y Y Y 11 26 2018										
City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133252617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Mic B. MORISATO, SUSAN, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 238 ARDMORE ROAD			11 / 26 / 2018										
City DES PLAINES	State	Zip Code 60016-2119	Transaction ID : PR2133133852617										
		00010-2119	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Insurance Sols	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Mic NETTLETON, KIMBERLY, ,		rganization Name	Date of Receipt										
Mailing Address 5003 DARNELL			11 / 26 / Y Y Y Y Y 2018										
City HOUSTON	State TX	Zip Code 77096-1510	Transaction ID : PR2133133952617										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 315.00	P/R Deduction (\$15.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optio	nal)		1168.80										
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	for commercial purposes, other than using the															
\setminus	NAME OF COMMITTEE (In Full)				_											
	UnitedHealth Group Incorporate			•	AC)											
Α.	Full Name of Individual (Last, First, Middle Init PUTNAM, T JEFFREY, , ,	ial) or Full (Orga	nization Name		Date of Receipt										
А.	Mailing Address 303 ELMWOOD PLACE WES	т								YY	Y					
						11	ĺ	26		2018						
	City MINNEAPOLIS	State MN		Zip Code 55419-1349	Transaction ID : PR2133134252617											
			_	55419-1349	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С	_		576.90											
	Name of Employer (for Individual)		•	tion (for Individual)		Μ	emo	o Item								
	United HealthCare Services Inc			oup CFO												
	Receipt For: Primary General	Aggregate	e Yea	ar-to-Date 🔻		P/R Ded	ucti	on (\$10)	2.30 Bi-W	(ookly)						
	Other (specify) ▼		-	4422.90	II.	/it Deu	ucu	ωπ (φ132	2.50 DI-11	CCRIy)						
в.	Full Name of Individual (Last, First, Middle Init SHIELS, ANITA, , ,	ial) or Full C	Orga	nization Name		Date of	f Re	eceipt								
	Mailing Address 473 WOOD WILLOW POINT				11 26 2018											
	City	State		Zip Code		Trans	act	ion ID :	PR21331	3475261	7					
	CHAPIN	SC		29036-9585		Amoun	t of	Each R	eceipt thi	is Period						
	FEC ID number of contributing federal political committee.	С			30.00											
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) n Mgmt	Memo Item											
	Receipt For:	Aggregate	e Yea	ar-to-Date 🔻	P/R Deduction (\$10.00 Bi-Weekly)											
	Primary General Other (specify) ▼		,	230.00												
<u> </u>	Full Name of Individual (Last, First, Middle Init FALKENBERG, ROBERT, , ,	ial) or Full C	Orga	nization Name		Date of	f Re	eceint								
•.	Mailing Address 6 LANTANA					M M 11		26	/ Y	2018	Y					
	City	State		Zip Code		Trans	sact	tion ID :	PR21457	72845261	7					
	NEWPORT COAST	CA		92657-1646	_	Amoun	t of	Each R	eceipt thi	is Period						
	FEC ID number of contributing federal political committee.	С	_			<u> </u>		,	y	350.	76					
	Name of Employer (for Individual)		•	tion (for Individual)		М	em	o Item								
	United HealthCare Services Inc Receipt For:			n CEO												
	Primary General	Aggregate	e Yea	ar-to-Date 🔻		P/R Ded	lucti	ion (\$11)	6.92 Bi-W	(eekly)						
	Other (specify)		-	2649.16		in Dea			5.52 Di W	cony)						
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group F	PAC)										
Α.	Full Name of Individual (Last, First, Middle Initial) RUMMEL, LEAH, , ,	or Full C	Drganization Name		Date of Receipt									
	Mailing Address 12100 TRAUTWEIN ROAD				11 26 / Y Y Y Y 2018									
	City AUSTIN	State TX	Zip Code 78737-9358							295526				
	FEC ID number of contributing federal political committee.	C	10131-9330	ch Receipt this Period 273.90										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Govt Affs		Me	emo	ltem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 726.50		P/R Ded	uctic	on (\$9	1.30) Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initial) SMITH, DANNETTE, , ,	or Full C	Drganization Name		Date of	Re	ceipt							
	Mailing Address 4200 ALDEN DRIVE				M M 11	1	20		/ Y	2018	Y			
	City EDINA	State MN	Zip Code 55416-5010		Transaction ID : PR21457299526 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			576.90									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Deputy Gen Counsel		Memo Item									
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4422.90		P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) BENSON, MARYNELL, , ,	or Full C	Drganization Name		Date of	Re	ceipt							
	Mailing Address 222 IRON WORKS WAY	I			M M 11	1	D 2	6		y y 2018	_			
	City WAYNE	State PA	Zip Code 19087-4213		Trans Amount					669526				
	FEC ID number of contributing federal political committee.	С				. 01	Lach	nec	eipt till	30	.00			
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) gn Exec Dir		Me	emo	Item							
	Receipt For: // Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 230.00		P/R Ded	uctio	on (\$1	0.00) Bi-We	ekly)				
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	y information copied from such Reports and State for commercial purposes, other than using the na															
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	(C)											
Α.	Full Name of Individual (Last, First, Middle Initial) LEWIS, KURT, , ,	or Full O	rgar	nization Name		Date of Receipt										
	Mailing Address 961 RIVER FOREST DRIVE														1	
	City	State		Zip Code		Tran	sacti	io	n IC) : F	'R22	0396	675526	617		
	MAINEVILLE	OH		45039-7720		Amour	t of	Ea	ach	Re	ceip	t this	s Perio	d		
	FEC ID number of contributing federal political committee.	С						,					864	4.00		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		N	lemc	o l'	tem	۱						
	Receipt For:	Aggregate	Yea	r-to-Date ▼												
	Primary General Other (specify) ▼		-	4135.86	P	/R Deo	ductio	ion	ı (\$2	288.	.00 B	i-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial) BEAULE, JEAN-FRANCOIS, , ,	or Full O	rgar	nization Name		Date c	of Re	ece	eipt							
	Mailing Address 7 STRATFORD RD					11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
	City	State		Zip Code		Transaction ID : PR2225813652617										
	FARMINGTON	СТ		06032-1444	Amount of Each Receipt this Period									d		
	FEC ID number of contributing federal political committee.	С				346.14 Memo Item P/R Deduction (\$115.38 Bi-Weekly)										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) h Advancement												
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2653.74	P											
с.	Full Name of Individual (Last, First, Middle Initial) CARRUTH, NANCY, , ,	or Full O	rgar	nization Name		Date c	of Re	ece	eipt							
	Mailing Address 753 WOOD HILL DRIVE					^M 11	/	l		26	1		2018	Y		
	CITANITASSEN	State MN		Zip Code									184526			
	CHANHASSEN			55317-9561	- :	Amour	t of	Ea	ach	Re	ceip	t this	s Perio	d		
	FEC ID number of contributing federal political committee.	С						y					4	5.00		
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)		N	lemo	o I	lterr	۱						
	Optum Services, Inc	Prin	cipal	Software Engineer												
		ggregate	Yea	r-to-Date 🔻												
	Other (specify)		-	345.00		P/R Deo	ducti	ion	ו (\$´	15.0)0 Bi-	-Wee	∍kly)			
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle MCGUIRE, MICHAEL, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 437 DRURY LANE			11 26 Y Y Y Y Y 11 26 2018								
City WYCKOFF	State NJ	Zip Code 07481-2204	Transaction ID : PR2225818852617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		288.45								
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Hlth	upation (for Individual) Plan CEO	Memo Item								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4711.45	P/R Deduction (\$96.15 Bi-Weekly)								
B. Full Name of Individual (Last, First, Middle RYAN, JOHN, , , Mailing Address 45 WESTMORELAND LN	Initial) or Full O	rganization Name	Date of Receipt								
City	State	Zip Code	11 26 2018								
NAPERVILLE	IL	60540-5817	Transaction ID : PR2225819652617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. SAILOR, ROY, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 276 COYOTE WILLOW D	1		11 / D D / Y Y Y Y Y 26 2018								
City COLORADO SPRINGS	State CO	Zip Code 80921-7631	Transaction ID : PR2225819752617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		230.76								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1769.16	P/R Deduction (\$76.92 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			1096.11								

SCHEDULE A (FEC Form 3X) DEOFIDTO

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	- H	11b	11c	12	<u> </u>					
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NAME OF COMMITTEE (In Full)		duress of any political commute		COIL	ibutions	ITOITI SUCI	1 commu						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle I GREENMAN, DEE, , ,	nitial) or Full C	rganization Name	Dat	e of F	Receipt								
Mailing Address 536 HIGH DR				11 226 / Y Y Y Y Y 2018									
City CARMEL	State IN	Zip Code 46033-2338	Transaction ID : PR2231350252617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С						41.9	97					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs		Men	no Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98	P/R	Deduc	tion (\$1	3.99 Bi-We	eekly)						
Full Name of Individual (Last, First, Middle I CONNLY, MICHAEL, , ,	nitial) or Full C	rganization Name	Dat	e of F	Receipt								
Mailing Address 570 MONTCALM PL				11 26 2018 Transaction ID : PR2247625852617									
	State MN	Zip Code						7					
SAINT PAUL	IVIIN	55116-1730	Am	ount c	of Each	Receipt th	iis Period						
FEC ID number of contributing federal political committee.	С			576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off		Memo Item									
Receipt For:	Aggregate	Year-to-Date V											
Other (specify) ▼		4422.90	P/R I	Deduc	tion (\$19	92.30 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle I CARCIONE, JOSEPH, , ,	nitial) or Full C	rganization Name	Dat	e of F	Receipt								
Mailing Address 11 CARRIAGE WAY			_ L	11 [™]	/ D	6	2018						
City WHITE PLAINS	State NY	Zip Code 10605-5424				: PR2247 Receipt th		7					
FEC ID number of contributing federal political committee.	С				y	, y	173.2	10					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir		Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1327.10	P/R	Deduc	tion (\$5	7.70 Bi-We	eekly)						
SUBTOTAL of Receipts This Page (optional)					, .		791.9)7					
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page			11b	11c	12				
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NAME OF COMMITTEE (In Full)						5001					
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle In KANTOLA, KEVIN, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 7031 HALSTEAD DRIVE			M 11								
City MINNETRISTA	State MN	Zip Code 55364-3201	Transaction ID : PR2247627052617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С					-	117.(0			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	י 🗖	Memc	tem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 897.00	P/R De	ductio	on (\$39.	00 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle II OBRIEN, DENNIS, , ,	nitial) or Full C	organization Name	Date	of Re	eceipt						
Mailing Address 61 LOUGHLIN AVE			M 11	M /	26	/ Y	y y 2018	Ŷ			
City COS COB	State CT	Zip Code 06807-2621			-		27352617	,			
FEC ID number of contributing	C	00007-2021	Amou	IIL OF	Each R	eceipt th	is Period 576.9	0			
federal political committee.							010.2				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO		Memc	ltem						
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		4422.90	P/R De	ductio	on (\$192	2.30 Bi-W	eekly)				
Full Name of Individual (Last, First, Middle In VERNEY, JEFFERY, , ,	nitial) or Full C	organization Name	Date	of Re	eceipt						
Mailing Address 266 WESTLEDGE ROAD	01-1	Zin Onde	11		26		2018				
City WEST SIMSBURY	State CT	Zip Code 06092-2017				PR22476	52745261 is Period	(
FEC ID number of contributing federal political committee.	C				y :	y	576.9	0			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo	tem						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R De	educti	on (\$192	2.30 Bi-W	/eekly)				
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$\left \right\rangle$	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	4C)											
Α.	Full Name of Individual (Last, First, Middle In GARODIA, SANJAY, , ,	itial) or Full O	rganization Name		Date of Receipt										
	Mailing Address 110 COVINGTON COURT				11 / D D / Y Y Y Y 26 / 2018										
	City OAK BROOK	State IL	Zip Code 60523-2574		Transaction ID : PR2247627852617 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			<u> </u>		-		38.4	16					
	Name of Employer (for Individual) Optum Services, Inc	Occi COC	upation (for Individual) D		M	emo	tem Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$38.46 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle In PRINCE, JOHN, , ,	itial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 546 HARRINGTON ROAD			11 / 26 / 2018 Transaction ID : PR2259738452617											
	City	State Zip Code MN 55391-1550								7					
	WAYZATA	MIN	55391-1550	_	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		576.90											
	Name of Employer (for Individual) Optum Services, Inc	Occi Bus	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	1	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle In CRONN, CHRISTOPHER, , ,	itial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 1122 COLORADO STREET SUITE 2399				11 ^M	/	26		2018	Y					
	City AUSTIN	State TX	Zip Code 78701-2132					PR2270	52295261 is Period	7					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	, ,	173.()7					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		M	emo	o Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1326.87	1	P/R Deduction (\$57.69 Bi-Weekly)										
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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group	PAC)									
A.	Full Name of Individual (Last, First, Middle Initia CURRY, CAROLE, , ,	l) or Full Oi	rganization Name		Date of Receipt								
	Mailing Address 411 FLEECE FLOWER DRIVE				11 26 / Y Y Y Y Y 11 26								
	City GAITHERSBURG	State MD	Zip Code 20878-2646		Transaction ID : PR2402315752617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С								42.0	0		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgr II		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00		P/R Ded	uctio	on (\$14.	00 Bi-We	eekly))			
в.	Full Name of Individual (Last, First, Middle Initia FRASCINO, MJ, , ,	l) or Full Oi	rganization Name		Date of	f Re	ceipt						
	Mailing Address 4575 SOUTH ATLANTIC AVEN # 6311		Zin Oode		11	/	D D 26	/ Y	y 201	ү 8	Y		
	City PONCE INLET	State FL	Zip Code 32127-7096	-				PR24023					
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 42.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Comm		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322,00		P/R Ded	uctic	on (\$14.0	00 Bi-We	eekly)				
с.	Full Name of Individual (Last, First, Middle Initia JACOBS, DONALD, , ,	l) or Full Oi	rganization Name		Date of	f Re	ceipt						
	Mailing Address 19495 VINE RIDGE ROAD				M M 11	/	D D D 26	/ Y	201	8	Y		
	City EXCELSIOR	State MN	Zip Code 55331-9173					PR2402 eceipt th			,		
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	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgr II		М	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.00		P/R Deduction (\$10.00 Bi-Weekly)								
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SCHEDULE A (FEC Form 3X) DEOFIDTO

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12			
Any information copied from such Reports and										
or for commercial purposes, other than using th	ie name and a	duress of any political committee		Contril	JULIONS	nom such	i committe	ee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I A. KEPLEYCARRIER, ANGELA, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 3219 PENINSULA DRIVE			M 11		26	D / Y	ү ү 2018	Ŷ		
City JAMESTOWN	State NC	Zip Code 27282-8717				PR24023 Receipt th	31775261 is Period	7		
FEC ID number of contributing federal political committee.	C					т. Т. Т.	60.0	00		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops		Mem	o Item					
Receipt For: Primary General Other (specify) ▼	P/R D	educt	ion (\$20	.00 Bi-We	eekly)					
Full Name of Individual (Last, First, Middle I LEVIBAUMGARTEN, MARILYN, ,		rganization Name	Date	of Re	eceipt					
Mailing Address 4800 W 27TH ST			1 ⁻		26) / Y	2018	Y		
City SAINT LOUIS PARK	State MN	Zip Code					17952617	7		
		55416-1933	Amou	unt of	⊢ach F	Receipt th	is Period	_		
FEC ID number of contributing federal political committee.	С		ΙĽ		-	-	60.0	00		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Mem	o Item					
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		460.00	P/R De	educti	on (\$20	.00 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle I MCGRATH, STACY, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 5801 CHOWEN AVE S	01-1		1 ¹	1	26		2018			
City EDINA	State MN	Zip Code 55410-2759				PR24023 Receipt th	31855261 is Period	(
FEC ID number of contributing federal political committee.	С				y .	,	51.3	36		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt		Mem	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 393.76	P/R D	educt	ion (\$17	.12 Bi-We	eekly)			
SUBTOTAL of Receipts This Page (optional)		•••••			,	.,	171.3	6		
TOTAL This Period (last page this line numbe	r only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	-							
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middl A. MOCKLER, RICHARD, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 373 SW 176TH PL			M M / D D / Y Y Y Y Y 11 26 2018					
City NORMANDY PARK	State WA	Zip Code 98166-3761	Transaction ID : PR2402318752617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prod	Memo Item					
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$10.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. MORRISONDAVIS, ANDREA, ,		rganization Name	Date of Receipt					
Mailing Address 2 LAKESHIRE COURT	1		11 / D D / Y Y Y Y 26 2018					
City OWINGS MILLS	State MD	Zip Code 21117-1246	Transaction ID : PR2402318952617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Mgt Cons CInt Svc	Memo Item					
Receipt For: Primary General	Aggregate	Year-to-Date ▼						
Other (specify) ▼		230.00	P/R Deduction (\$10.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middl c. ROSSI, DAVID, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 510 BUFFALO TOM DRI			11 26 / Y Y Y Y Y 2018					
City GREENSBORO	State NC	Zip Code 27455-8344	Transaction ID : PR2402319652617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		41.61					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.39	P/R Deduction (\$13.87 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	l)		101.61					
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	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		pose of	soliciting	g contril	butio	ns	
$\overline{\langle}$	NAME OF COMMITTEE (In Full)									intee		
	UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Initia BARRINGER, PAUL, , ,	al) or Full C	Organization Name		Date of	f Re	eceipt					
	Mailing Address 3709 WILLIAMS LANE				M M 11	1	26) / Y	2018]	
	City CHEVY CHASE	State MD	Zip Code 20815-4951					PR2402 Receipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		- 7 -	-	13	8.45		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt		M	emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1061.45	P/R Deduction (\$46.15 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial CRANLEY, SHELLEY, , ,	al) or Full C	Organization Name		Date of	f Re	eceipt					
	Mailing Address 3801 MAURICE COURT				M M 11	/	26		2018	Y		
	City LAS VEGAS	State NV	Zip Code 89108-5245					PR24024 Receipt th		-		
	FEC ID number of contributing federal political committee.	С								′5.00		
	Name of Employer (for Individual) United HealthCare Services Inc		supation (for Individual) Regl Affs		M	emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 575.00	F	P/R Ded	ucti	on (\$25.	.00 Bi-We	eekly)			
С.	Full Name of Individual (Last, First, Middle Initia BECKER, JAMES, , ,	al) or Full C	Organization Name		Date of	f Re	eceipt					
	Mailing Address 378 FERNDALE ROAD WEST		Zin Onde	_	11 ^M		26	JL	2018			
	City WAYZATA	State MN	Zip Code 55391-1559	_				PR2402 Receipt th				
	FEC ID number of contributing federal political committee.	С			Ľ.		y	9	57	6.90		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90		P/R Ded	lucti	ion (\$19	2.30 Bi-V	Veekly)			
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An	y information copied from such Reports and Stat	ements ma	av no	t be sold or used by any pe	erson fo	13 or the		14		15 solici		16 contribu	17 tions
	for commercial purposes, other than using the na												
\backslash	NAME OF COMMITTEE (In Full)		,		\sim								
/	UnitedHealth Group Incorporated	•		•	(C)								
Α.	Full Name of Individual (Last, First, Middle Initial COLEMAN, JAMES, , ,) or Full O	Organi	ization Name		ate of	Re	ceip	pt				
	Mailing Address 4720 WEST 66TH STREET					M M 11	1	D	26	/	Y	Y Y 2018	Y
	City EDINA	State MN		Zip Code 55435-1506								4525261	
			_	35435-1300	_ A	mount	of	Ead	ch Re	eceip	t this	s Period	_
	FEC ID number of contributing federal political committee.	С			576.90								90
	Name of Employer (for Individual)		•	on (for Individual)	Memo Item								
	United HealthCare Services Inc Receipt For:			SVP, Human Capital	_								
	Primary General	Aggregate	rear		P/	R Dedu	uctio	on (\$192	.30 E	i-W€	ekly)	
	Other (specify) v	4422.90											
в.	Full Name of Individual (Last, First, Middle Initial HIGA, JOY, , ,) or Full O	Drgani	ization Name	C	ate of	Re	ceip	pt				
	Mailing Address 2208 ELM AVENUE	1	™ 11	1		26	/	Y	y y 2018	Y			
	City	State Zip Code							ID : F	PR24	0244	1625261	7
	MANHATTAN BEACH	CA		90266-2809	A	mount	of	Ead	ch Re	eceip	t this	s Period	
	FEC ID number of contributing federal political committee.	С				_		,				90.	00
	Name of Employer (for Individual) United HealthCare Services Inc		cupati Regl	on (for Individual) Affs	Memo Item								
		Aggregate	Year	-to-Date ▼									
	Primary General Other (specify)		P/I	R Dedu	uctio	on (S	\$30.0	00 Bi-	Wee	ekly)			
			y	690.00									
C.	Full Name of Individual (Last, First, Middle Initial ALEXANDER, CORY, , ,) or Full O	Organi	ization Name	C	ate of	Re	ceip	pt				
	Mailing Address 4203 BRADLEY LANE					^M 11	/	D	26	/	Y	2018	Y
	City	State MD		Zip Code				-				2885261	
	CHEVY CHASE			20815-5234	A	mount	of	Ead	ch Re	eceip	t this	s Period	
	FEC ID number of contributing federal political committee.	С					_	,				576.	90
	Name of Employer (for Individual) Occupation (for Individual)							lte	em				
	United HealthCare Services Inc EVP Corp Affairs												
	Receipt For:	Aggregate	Year	-to-Date ▼		D Dod	ti	on ((\$400	20 5): \A/.		
	Other (specify)		-9-	4422.90		R Ded	ucuc	on (, Φ19 2	30 E	91-VVE	екку)	
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SCHEDULE A (FEC Form 3X) _ _ _ .

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	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora								
Full Name of Individual (Last, First, Middle A. SAELENS, KAREN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 105 N FLORENCE AVE			M M / D D / Y Y Y Y 11 26 2018					
City LITCHFIELD PARK	State AZ	Zip Code 85340-4424	Transaction ID : PR2408544852617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		60.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. WEE, KATHLYN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2225 46TH ST NW			11 / D D / Y Y Y Y Y 11 26 2018					
City WASHINGTON	State DC	Zip Code 20007-1032	Transaction ID : PR2408545052617					
FEC ID number of contributing		20007-1032	Amount of Each Receipt this Period					
federal political committee.	C		576.90					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P State SIs OptumI	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle CORZINE, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9350 TRACEYTON DRIVE			11 / D D / Y Y Y Y Y 26 / 2018					
City DUBLIN	State OH	Zip Code 43017-9689	Transaction ID : PR2437119752617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		116.52					
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 883.33	P/R Deduction (\$38.84 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			753.42					
TOTAL This Period (last page this line number	er only)							

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			Detailed Summary Page	×	-		11b		11c	12	<u> </u>	
An	y information copied from such Reports and State	ments ma	y not be sold or used by any pe	erson fo	13 or the	pur	14 pose	of s	15 oliciting	contribut	l 17 tions	
or	for commercial purposes, other than using the na											
\setminus	NAME OF COMMITTEE (In Full)											
/	UnitedHealth Group Incorporated	``	•	AC)								
۹.	Full Name of Individual (Last, First, Middle Initial) FUENTEVILLA, ANA, , ,) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 5110 N CALLE COLMADO				M M	1		26	/ Y	2018	Y	
	City	State	Zip Code	۹ ۱	Trans	acti		_	R24371	1985261	7	
	TUCSON	AZ	85718-5002	A	\mount	of	Each	1 Red	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С			576.90							
	Name of Employer (for Individual)		upation (for Individual) Seg Chief Med Off		Memo Item							
	Optum Services, Inc Receipt For:		-	_								
	Primary General Other (specify) ▼	-sygregate	Year-to-Date ▼ 4422.90	P/	/R Dedi	uctio	on (\$	192.:	30 Bi-W	/eekly)		
	Full Name of Individual (Last, First, Middle Initial) HAGAN, WILLIAM, , ,) or Full Or	rganization Name	Date of Receipt								
	Mailing Address 6536 E GREYTHORN DRIVE		м м 11	1		26	/ Y	2018	Y			
	City	State	Zip Code		Transa	acti	ion IE) : P	R24371	2005261	7	
	SCOTTSDALE	AZ	85266-6761	A	۱mount	of	Each	1 Red	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С				_	7		-7-	576.9	90	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO		Memo Item							
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 4422.90	P/	'R Dedu	uctic	on (\$′	192.3	30 Bi-W	'eekly)		
с.	Full Name of Individual (Last, First, Middle Initial) THOMAS, DAVID, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 841 LAKE ROAD				^M ^M 11	1	2	26		2018 Y		
	City BRADFORDWOODS	State PA	Zip Code 15015-1331							12045261	7	
	FEC ID number of contributing		10010-1001	- <i> </i>	Amount	t of	Each	n Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С					y		y	30.0	00	
	Name of Employer (for Individual) Optum Services, Inc											
	Respiret For:	1 -	Year-to-Date V									
	Primary General Other (specify)	J.J. Jyulo	230.00	P/R Deduction (\$10.00 Bi-Weekly)						ekly)		
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т	OTAL This Period (last page this line number only	y)		. [7					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1			
			erson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)			
Full Name of Individual (Last, First, Middle WEISS, JACK, , ,	e Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 6245 NORTH 75 STREET	-		11 26 / Y Y Y Y 2018			
City SCOTTSDALE	State AZ	Zip Code 85250-4621	Transaction ID : PR2437120552617 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		75.00			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) red Svs Regn CMO	Memo Item			
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. BALTHAZOR, PAUL, , ,	e Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 9013 FARNSWORTH AVE	1		11 / D D / Y Y Y Y Y 2018			
	State MN	Zip Code	Transaction ID : PR2437120752617			
BROOKLYN PARK	IVIN	55443-1754	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		576.90			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment COO	Memo Item			
Receipt For:	Aggregate	Year-to-Date 🔻				
Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. NESS, LAURA, , ,	e Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 10550 PINNACLE WAY			11 / D D / Y Y Y Y 11 26 2018			
City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121552617 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		576.90			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)		1228.80			
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	<u> </u>	
Any information copied from such Reports and or for commercial purposes, other than using									
	me name and a	duress of any political committe	e lo solicit c	ontrib	outions f	IUTII SUCI	Committ	ee.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle COSGRIFF, JOHN, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 1837 SUMMIT LANE			M 11	M /	D D D 26	/ Y	2018	Y	
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137					2165261 is Period	7	
FEC ID number of contributing federal political committee.					-	576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Dev		Memo	tem				
Receipt For: Primary General Other (specify) ▼	P/R De	educti	on (\$192	2.30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Middle EDELSON, BRETT, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 4600 DREXEL AVENUE	Oteta	Zin Ood-	11	M /	26	/ Y	2018	Y	
City EDINA	State MN	Zip Code 55424-1132			-		2715261	7	
FEC ID number of contributing federal political committee.	С						600.0	00	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy	- D'	Memo	tem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4400.00	P/R De	ductio	on (\$200).00 Bi-W	'eekly)		
Full Name of Individual (Last, First, Middle RAINEY, PETER , , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 3115 WEST 47 STREET			M 11		26	JL	2018		
City MINNEAPOLIS	State MN	Zip Code 55410-1857			-	-	12755261 is Period	7	
FEC ID number of contributing federal political committee.	С				y .	y	576.9	90	
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	SVF	upation (for Individual) Corp Controller	_ U'	Memo	tem Item				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R De	educti	on (\$192	2.30 Bi-W	/eekly)		
SUBTOTAL of Receipts This Page (optional)					, .	,	1753.8	80	
TOTAL This Period (last page this line numb	er only)								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle Ir A. LIPPERT, ROBIN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 404 A ST SE			11 26 / Y Y Y Y Y							
City WASHINGTON	State DC	Zip Code 20003-3807	Transaction ID : PR2439928052617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir B. HEYMAN, STEPHEN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5300 SHERRILL AVENUE			11 26 / Y Y Y Y Y							
City	State	Zip Code	Transaction ID : PR2444265752617							
CHEVY CHASE	MD	20815-3720	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Govt Affs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	-							
Primary General Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir C. LANGER, DONALD, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5110 OAK RAMBLING DRIV	/E		M M / D D / Y Y Y Y 11 26 2018							
City KATY	State TX	Zip Code 77494-1971	Transaction ID : PR2445015452617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		588.45							
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4411.46	P/R Deduction (\$196.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1742.25							
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NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle LIND, NANCY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2703 NORTHVIEW LANE			11 26 / Y Y Y Y						
City CEDAR FALLS	State IA	Zip Code 50613-1655	Transaction ID : PR2445016252617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		42.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item						
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle ADLINGTONSHKABERIN, AMY,		rganization Name	Date of Receipt						
Mailing Address 3890 SUNSET DRIVE			11 / D D / Y Y Y Y Y 26 2018						
City SPRING PARK	State MN	Zip Code 55384-9634	Transaction ID : PR2445016452617						
FEC ID number of contributing federal political committee.	С	33304-3034	Amount of Each Receipt this Period 576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 4422,90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. ALCOREZA, LENYS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 675 THALIA POINT RD	1		11 / D D / Y Y Y Y 11 26 2018						
City VIRGINIA BEACH	State VA	Zip Code 23452-1815	Transaction ID : PR2445016852617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sales	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			648.90						
TOTAL This Period (last page this line numb	er only)								

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	TEMIZED RECEIPTS Use separate schedule(s) for each category of the	(check only	(check only one)						
	JEIF 13		for each category of the Detailed Summary Page	× 11a 13	11b	11c	12	47	
			y not be sold or used by any poldress of any political committee	erson for the	purpose of				
/ UnitedHealth	n Group Incorporated	PAC (L	JnitedHealth Group PA	AC)					
Full Name of Indiv A. SIEGEL, DAVID	idual (Last, First, Middle Initia D, , ,	l) or Full Or	rganization Name	Date of	f Receipt				
Mailing Address 2	64 LAKEWOOD DRIVE			M M 11	/ D D 26	/ Y	2018	Y	
City BLOOMFIELD HIL	LS	State MI	Zip Code 48304-3531		action ID : t of Each R			7	
FEC ID number of contributing federal political committee.					· · ·	-	42.1	2	
Name of Employer United HealthCare	,	Occu Med	ipation (for Individual) Dir		emo Item				
Receipt For: Primary Other (specif	General fy) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Ded	uction (\$14.	04 Bi-We	ekly)		
Full Name of Indiv B. KRAJNOVICH	idual (Last, First, Middle Initia I. DANIEL	l) or Full Or	rganization Name	Date of	f Receipt				
	958 BUTTONDOWN LANE			11		/ Y	y 2018	Ŷ	
City ZIONSVILLE		State IN	Zip Code 46077-8135		action ID :			,	
FEC ID number of federal political cor	0	С			t of Each R		60.0	0	
Name of Employer United HealthCare			upation (for Individual) Plan CEO	M	emo Item				
Receipt For: Primary Other (specif	General fy) ▼	Aggregate Y	Year-to-Date ▼ 460.00	P/R Ded	uction (\$20.	00 Bi-We	ekly)		
Full Name of Indiv C. RENFRO, LA	idual (Last, First, Middle Initia	l) or Full Or	ganization Name	Date of	f Receipt				
Mailing Address 5	DOVE LANE			M M 11	26		у у 2018		
City ANDOVER		State MA	Zip Code 01810-2845		saction ID : t of Each R			7	
FEC ID number of federal political cor	0	С			, , ,	,	576.9	90	
Name of Employer Optum Services, In	, ,		ipation (for Individual) Chairman UHG	м	emo Item				
Receipt For: Primary Other (specif	General (y)	Aggregate	Year-to-Date ▼ 4422.90	P/R Ded	luction (\$192	2.30 Bi-W	/eekly)		
SUBTOTAL of Rece	ipts This Page (optional)		•				679.0	12	
TOTAL This Period	(last page this line number or	nly)	•						

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using th										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ted PAC (I	UnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle Ir ORBUCH, DAVID, , ,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 2220 CEDAR LAKE PKWY			11 26 / Y Y Y Y 2018							
City MINNEAPOLIS	State MN	Zip Code 55416-3644	Transaction ID : PR2460168252617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		683.10							
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) um Exec	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$227.70 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Ir B. WEXLER, ERIC, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 7220 WILLOW OAK DR			11 26 / Y Y Y Y 2018							
City WEST BLOOMFIELD	State MI	Zip Code 48324-3081	Transaction ID : PR2463723152617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir C. WALKOWSKI, KAREN, , ,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 6359 COUNTRY ROAD	1		11 / D D / Y Y Y Y Y 2018							
City EDEN PRAIRIE	State MN	Zip Code 55346-1342	Transaction ID : PR2463723452617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1302.12							
TOTAL This Period (last page this line number	r only)									

Use separate schedule(s)

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17			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12	1 7			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				he pu							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia GILL, PETER, , ,	l) or Full O	rganization Name	Date	e of R	eceipt						
	Mailing Address 8673 SHERWOOD BLUFF				м 1	/ D D 26	/ Y	y y 2018	Y			
	City EDEN PRAIRIE	State MN	Zip Code 55347-3433					72465261 is Period	7			
	FEC ID number of contributing federal political committee.	С							10			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Treas & Chief Invstmnt Off		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	P/R I)educt	ion (\$0.0	0 Bi-Wee	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia SCHICK, SUSAN, , ,	l) or Full O	rganization Name	Date	e of R	eceipt						
	Mailing Address 1220 DENBIGH LANE	Otata	Zin Oode		1	26	/ Y	2018	Y			
	City WAYNE	State PA	Zip Code 19087-4644					2055261	7			
	FEC ID number of contributing federal political committee.	С						576.9	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Exec Sponsor		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R D	educt	ion (\$192	2.30 Bi-W	/eekly)				
с.	Full Name of Individual (Last, First, Middle Initia ABBOTT, CHRISTOPHER, , ,	l) or Full O	rganization Name	Date	e of R	eceipt						
	Mailing Address 12700 MUNDOMAR DR				м 1	26 D	/ Y	2018	Y			
	City AUSTIN	State TX	Zip Code 78739-1542				-	5 4155261 is Period	7			
	FEC ID number of contributing federal political committee.	С				y	, , , , , , , , , , , , , , , , , , ,	375.0	00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2528.84	P/R [Deduct	tion (\$128	5.00 Bi-V	/eekly)				
s	UBTOTAL of Receipts This Page (optional)		•••••			,	,	952.0	00			
т	OTAL This Period (last page this line number or	ıly)	••••••			-ge 1	- 41-					

SCHEDULE A (FEC Form 3X) DEAEIDTA

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		Use separate schedule(s)	(check or	nly on	ne)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12	<u> </u>		
Any information copied from such Reports and										
or for commercial purposes, other than using t	me name and a	duress of any political committee		Untrib	utions t	rom such	committe	ee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle BURNS, MATTHEW, , ,	Initial) or Full C	rganization Name	Date o	of Re	ceipt					
Mailing Address 2724 BISON DRIVE	,		M 11	VI /	26	/ Y	ү ү 2018	Ŷ		
City EDMOND	State OK	Zip Code 73034-3475				PR24845 eceipt thi	4175261	7		
FEC ID number of contributing federal political committee.	С						576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm		/lemo	tem					
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 4422.90	P/R De	ductio	on (\$192	2.30 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle KNARR, KEVIN, , ,	Initial) or Full C	rganization Name	Date o	of Re	ceipt					
Mailing Address 4806 HUTCHINS PLACE N			M 11	VI /	D D D 26	/ Y	y y 2018	Ŷ		
City WASHINGTON	State DC	Zip Code 20007-1528			-		42352617	7		
FEC ID number of contributing federal political committee.	C		Amour			eceipt thi	576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO		/lemo	Item					
Receipt For:		Year-to-Date ▼								
Other (specify) V		4422.90	P/R Dec	ductic	on (\$192	2.30 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle TROPEANO, DANIEL, , ,	Initial) or Full C	rganization Name	Date o	of Re	ceipt					
Mailing Address 606 BROOKSIDE AVE			11		26	L	2018			
City WAYNE	State PA	Zip Code 19087-4826				PR24845 eceipt thi	54285261 is Period	7		
FEC ID number of contributing federal political committee.	С				,	,	340.8	39		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Nemo	tem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2406.36	P/R De	ductio	on (\$113	3.63 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional).					, ,	,	1494.6	9		
TOTAL This Period (last page this line number	er only)									

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)
Α.	Full Name of Individual (Last, First, Middle Initial) MANDERFELD, THOMAS, , , Mailing Address 3760 WEST CALHOUN PARKWA		Organization Name	Date of Receipt
	City	State	Zip Code	11 26 2018 Transaction ID : PR2486697952617
	MINNEAPOLIS	MN	55410-1118	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		120.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Capital Mkt Comm	Memo Item
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi-Weekly)
B.	Full Name of Individual (Last, First, Middle Initial) MCMAHON, DIRK, , ,	or Full O	Organization Name	Date of Receipt
	Mailing Address 60 WILDHURST ROAD			11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City EXCELSIOR	State MN	Zip Code 55331-8461	Transaction ID : PR2491457052617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		576.90
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) t Grp Pres & COO	Memo Item
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
C.	Full Name of Individual (Last, First, Middle Initial) NATHAN, DONALD, , ,	or Full O	Organization Name	Date of Receipt
	Mailing Address 275 GREENWICH STREET #30			11 / 26 / Y Y Y Y Y 11 26
	City NEW YORK	State NY	Zip Code 10007-2150	Transaction ID : PR2491457352617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		576.90
	Name of Employer (for Individual) United HealthCare Services Inc	Chie	upation (for Individual) ef of Staff - UHG CEO	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		····· •	1273.80
Т	OTAL This Period (last page this line number only	/)	•	

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17			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
$\overline{)}$	NAME OF COMMITTEE (In Full)	//									
/	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia HARTLEY, MICHAEL, , ,	l) or Full O	organization Name	Date	of Re	eceipt					
	Mailing Address 5601 SMETANA DRIVE UNIT 213			11	M /	26	/ Y	2018	Y		
	City	State	Zip Code		isact		PR2538	64135261	7		
	HOPKINS	MN	55343-9011	Amou	nt of	Each Re	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С					-	0.	10		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (upation (for Individual) Ops	N	vlemc	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	P/R De	ductio	on (\$0.10) Bi-Wee	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia SMITH, KARA, , ,	l) or Full O	organization Name	Date	of Re	eceipt					
	Mailing Address 610 CRESTWOOD DRIVE			11		26	/ Y	2018	Y		
	City ALEXANDRIA	State VA	Zip Code 22302-2533					is Period	7		
	FEC ID number of contributing federal political committee.	С						576.	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Vemo	tem					
	Receipt For:	Aggregate	Year-to-Date V	\neg							
	Other (specify) ▼		4422.90	P/R De	ductio	on (\$192	.30 Bi-W	/eekly)			
С.	Full Name of Individual (Last, First, Middle Initia PURDY, PATRICIA, , ,	l) or Full O	organization Name	Date	of Re	eceipt					
	Mailing Address 7417 LYNNHURST STREET	1-		M 11		D D 26		2018			
	City CHEVY CHASE	State MD	Zip Code 20815-3101					30065261 is Period	7		
	FEC ID number of contributing federal political committee.	С			_	, .	,	576.	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affairs		Vemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R De	ducti	on (\$192	2.30 Bi-W	/eekly)			
s	UBTOTAL of Receipts This Page (optional)		•			9	9	1153.	90		
т	OTAL This Period (last page this line number or	ıly)	••••••			-					

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ידו			Use separate schedule(s)	(check only one)							
11	EIVILLED RECEIPIS		for each category of the Detailed Summary Page								
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	Itements ma	A not be sold or used by any period of a sold or used by any period of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.							
$\overline{\langle}$	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initia TIERNEY, JOELLE, , ,	al) or Full O	organization Name	Date of Receipt							
	Mailing Address 5710 TAYCHOPERA RD			11 26 Y Y Y Y Y 11 26 2018							
	City MADISON	State WI	Zip Code 53705-1020	Transaction ID : PR2541300752617 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia VERSAGGI, JOHN, , ,	al) or Full O	organization Name	Date of Receipt							
	Mailing Address 800 ALBANY AVENUE			11 26 Y Y Y Y Y 2018							
	City ALEXANDRIA	State VA	Zip Code 22302-3501	Transaction ID : PR2541300852617 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		96.16							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2019.36	P/R Deduction (\$96.16 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia HOSTETLER, BRENDAN, , ,	al) or Full O	organization Name	Date of Receipt							
	Mailing Address 2309 W WINNEMAC AVE			11 26 Y Y Y Y Y 2018							
	City CHICAGO	State IL	Zip Code 60625-1817	Transaction ID : PR2542541952617 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		1923.00							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3076.80	P/R Deduction (\$641.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		••••••	2596.06							
т	OTAL This Period (last page this line number or	וy)	••••••								

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 erson for the purpose of soliciting contributions a to called contributions from such committee								
NAME OF COMMITTEE (In Full)	ing the name and a	ddress of any political committe	e to solicit contributions from such committee.								
UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Mic A. RAMSAY, RICHARD, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 543 E LURAY AVE			11 26 Y Y Y Y Y 11 26 2018								
City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542252617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		150.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1150.00	P/R Deduction (\$50.00 Bi-Weekly)								
Full Name of Individual (Last, First, Mic B. SPENCER, IPYANA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4226 40TH STREET No			11 26 Y Y Y Y Y 2018								
City ARLINGTON	State VA	Zip Code 22207-4610	Transaction ID : PR2542542352617								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 690.00	P/R Deduction (\$30.00 Bi-Weekly)								
Full Name of Individual (Last, First, Mic C. YAU, ANNE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9905 WOODLAND DR			11 / D D / Y Y Y Y Y 26 2018								
City SILVER SPRING	State MD	Zip Code 20902-4047	Transaction ID : PR2543582552617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		173.07								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1326.87	P/R Deduction (\$57.69 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	nal)		413.07								
TOTAL This Period (last page this line nu	Imber only)										

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for comm	ercial purposes, other than using the na			rson for the purpose of soliciting contributions to solicit contributions from such committee.
\	- COMMITTEE (In Full) Health Group Incorporated	PAC (l	JnitedHealth Group PA	C)
Full Name A. DAVEN	e of Individual (Last, First, Middle Initial PORT, ALLISON, , ,) or Full O	organization Name	Date of Receipt
	ddress 141 PELHAM ROAD	1		11 226 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PHILADE		State PA	Zip Code 19119-2661	Transaction ID : PR2552313652617
		1 4	19119-2001	Amount of Each Receipt this Period
	umber of contributing plitical committee.	С		576.90
	Employer (for Individual) althCare Services Inc		upation (for Individual) I Plan CEO	Memo Item
Receipt F	or:	Aggregate	Year-to-Date V	-
	nary General er (specify) v		4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name	e of Individual (Last, First, Middle Initial HER, THOMAS, , ,) or Full O	organization Name	Date of Receipt
Mailing A	ddress 78 PATTI LYNN LANE			11 26 Y Y Y Y Y
City		State	Zip Code	Transaction ID : PR2552960752617
HOUSTO	N	ТХ	77024-7120	Amount of Each Receipt this Period
	umber of contributing litical committee.	С		30.00
	Employer (for Individual) rvices, Inc		upation (for Individual) nvrl Med Dir	Memo Item
	or: nary General er (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
	e of Individual (Last, First, Middle Initial ELL, MARK, , ,) or Full O	Prganization Name	Date of Receipt
-	ddress 20 VERMILION CLIFFS			11 26 2018
City		State	Zip Code	Transaction ID : PR2552961252617
ALISO V	IEJO	CA	92656-8096	Amount of Each Receipt this Period
	umber of contributing litical committee.	С		42.00
Name of	Employer (for Individual)	Осси	upation (for Individual)	Memo Item
	ealthCare Services Inc	MGF	R URS SAE	
Receipt F		Aggregate	Year-to-Date ▼	
	nary General er (specify)		322.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL	of Receipts This Page (optional)			648.90
TOTAL This	s Period (last page this line number on	ly)	•	

Use separate schedule(s)

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		Use separate schedule(s)	(check o	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12					
Any information copied from such Reports and												
or for commercial purposes, other than using t	ne name and a	ddress of any political committee	e to solicit c	ontric	outions t	rom sucr		ee.				
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I BRYANT, JEREMY, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt							
Mailing Address 4534 MYSTIQUE WAY			M 11	M /	26) / Y	ү ү 2018	Y				
City ROSWELL	State GA	Zip Code 30075-2087					6135261 is Period	7				
FEC ID number of contributing federal political committee.	С				7	-	105.0	00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Mgmt NA Accts		Memo	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 805.00	P/R De	educti	on (\$35.	00 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I B. COLEMAN, MICHAEL, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt							
Mailing Address 3325 LACEBARK PINE STF			M 11		26	/ Y	2018	Ŷ				
City LAS VEGAS	State NV	Zip Code 89129-8134					61452617 is Period	7				
FEC ID number of contributing federal political committee.	С						200.7	76				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 799.20	P/R De	ducti	on (\$66.	92 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I C. EHLMAN, MICHAEL, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt							
Mailing Address 10051 VALLEY RIDGE CO			M 11		26		2018					
City LAS VEGAS	State NV	Zip Code 89148-7602					6225261 is Period	7				
FEC ID number of contributing federal political committee.	С				y	y	42.0	00				
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) irrector Technology		Memo	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R De	educti	ion (\$14.	.00 Bi-We	ekly)					
SUBTOTAL of Receipts This Page (optional)					,	9	347.7	76				
TOTAL This Period (last page this line number	er only)											

Use separate schedule(s)

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TEMIZED RECEIPTS		for each category of the	✗ 11a ☐ 11b ☐ 11c ☐ 12
		Detailed Summary Page	13 14 15 16 17
or for commercial purposes, other than us			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	orated PAC (JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Mid A. FLANNERY, SCOTT, , ,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 8508 TRELADY CT			M M / D D / Y Y Y Y Y 11 26 2018
City	State TX	Zip Code	Transaction ID : PR2552962352617
PLANO		75024-6827	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		744.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item
Receipt For:	Aggregate	Year-to-Date V	-
Primary General Other (specify) ▼		4241.00	P/R Deduction (\$248.00 Bi-Weekly)
Full Name of Individual (Last, First, Mid B. JAMES, GREGORY, , ,	dle Initial) or Full C	Prganization Name	Date of Receipt
Mailing Address 2323 KINGS POINT DF	RIVE		11 26 2018
City	State	Zip Code	Transaction ID : PR2552963252617
LARGO	FL	33774-1009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		111.99
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 887.92	P/R Deduction (\$37.33 Bi-Weekly)
Full Name of Individual (Last, First, Mid C. KIDAMBI, NARASIMHAN, , ,		organization Name	Date of Receipt
Mailing Address 18477 85TH AVE N			M M / D D / Y Y Y Y 11 26 2018
City	State	Zip Code	Transaction ID : PR2552963852617
MAPLE GROVE	MN	55311-1663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
United HealthCare Services Inc	Ass	c Dir Bus Anlys	
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify)		460.00	P/R Deduction (\$20.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	nal)		915.99
TOTAL This Period (last page this line nu	umber only)		

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

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				or each category of the Detailed Summary Page	×	11a 13		-	11b		11c 15	12 16	17
	y information copied from such Reports and Stater for commercial purposes, other than using the nar					or the		rpo	ose of		liciting	contribu	tions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	Jni	tedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial) LANTER, KENNETH, , ,	or Full O	rgar	nization Name		Date o	of Re	ece	eipt				
	Mailing Address 2016 RICHVIEW DRIVE	0		7. 0		м 11		′	D D 26		/ Y	ү ү 2018	
	5	State IL		Zip Code 62281-1070								6405261	
					_ A	moui	nt of	· E	ach R	ece	eipt thi	s Perioc 30	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) SIs Producing		N	/lemo	οI	ltem				
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 230.00	P/	R De	ducti	ion	n (\$10.	00	Bi-We	ekly)	
B.	Full Name of Individual (Last, First, Middle Initial) LOVELADY, JOHN, , ,	or Full O	rgar	nization Name		Date o	of Re	ece	eipt				
	Mailing Address 5378 BUENA VISTA DR					™ 11	/	′	D D 26		/ Y	2018	Y
	City FRISCO	State TX		Zip Code 75034-2253								6425261 s Perioc	
	FEC ID number of contributing federal political committee.	0						,			-y	576	90
	Name of Employer (for Individual) Optum Services, Inc			ion (for Individual) s Ops		N	/lemo	οI	ltem				
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 4422.90	P/	R De	ducti	ion	n (\$192	2.30) Bi-We	eekly)	
с.	Full Name of Individual (Last, First, Middle Initial) MARTO, MICHELLE, , ,	or Full O	rgar	nization Name		Date of	of Re	ece	eipt				
	Mailing Address 149 WILLIAMSBURG COURT					[™] 11	И /	′	D 26		/ Y	2018 [°]	Y
	City ALBANY	State NY		Zip Code 12203-5502								647526 ⁻	
		_	-	12203-5502	A	moui	nt of	E	ach R	ece	eipt thi	s Perioc	_
								"		1	y	42	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Affs			/lemo	01	Item				
	Receipt For: At Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 322.00	P/	'R De	ducti	ior	ח (\$14.	.00	Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)			••••••								648.	90
т	OTAL This Period (last page this line number only)			Ī			,		l	- -		

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ITF			Use separate schedule(s)	(check only one)								
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13	\square	11b	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson fo	r the p		ose of		g contrib	utions		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)								
	Full Name of Individual (Last, First, Middle Initia MATTSON, CARL, , ,	l) or Full O	rganization Name	Da	ate of	Red	ceipt					
	Mailing Address 539 ROUTE 9P				11	/	D D 26	/ Y	ү ү 2018	Ý		
-	City SARATOGA SPRINGS	State NY	Zip Code 12866-7279						9648526 nis Perio			
	FEC ID number of contributing federal political committee.	С					y		138	8.45		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1061.45	P/R	l Dedu	uctio	on (\$46. ⁻	15 Bi-We	eekly)			
	Full Name of Individual (Last, First, Middle Initia MORRIS, MICHAEL, , ,	l) or Full O	rganization Name	Da	ate of	Red	ceipt					
	Mailing Address 2624 N HARTLAND COURT				11	/	D D D 26	/ Y	2018	Y		
	City CHICAGO	State	Zip Code 60614-4955						9650526 nis Perio			
-	FEC ID number of contributing federal political committee.	С			nount					5.14		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt		Me	emo	Item					
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 353.74	P/R	P/R Deduction (\$15.38 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia PAULUS, LESLIE, , ,	l) or Full O	rganization Name	Da	ate of	Red	ceipt					
	Mailing Address 305 E TUCKEY LN			_ L	11 ^M	/	D D D 26		2018 [°]	_		
-	City PHOENIX	State AZ	Zip Code 85012-1048						9652526 nis Perio			
	FEC ID number of contributing federal political committee.	С		ļ	_		y .	, J	42	2.00		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	upation (for Individual) Dir		Me	emo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/F	R Dedu	uctic	on (\$14.)	00 Bi-W	eekly)			
รเ	JBTOTAL of Receipts This Page (optional)								226	.59		
т	OTAL This Period (last page this line number or	ıly)		Ē								

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page		× 11	ŀ		11 14	H	11	ŀ	12	17
	y information copied from such Reports and Stater for commercial purposes, other than using the nam					for t	he p		oos	e of	solic	iting	contrib	utions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Jni	itedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) PEKA, GARY, , ,	or Full O	rgar	nization Name		Date	e of	Re	cei	pt				
	Mailing Address 8650 SOUTH FAIRWAY POINT	_				[™]		/	ſ	26	/	Y	y y 2018	Y
		State MN		Zip Code 55386-9630	_		-		-				653526	
		C	ï			Amo	unt	of	Ea	ch R	eceip	ot this	s Perio 42	d .00
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Sigma			Me	mo	lte	∍m				
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 322.00		P/R C)edu	uctic	on ((\$14.	00 B	i-Wee	ekly)	
в.	Full Name of Individual (Last, First, Middle Initial) POTTER, DONALD, , ,	or Full O	rgar	nization Name		Date	e of	Re	cei	pt				
	Mailing Address 116 FULLER LANE			1		M 1		/	ľ	26	/	Y	y y 2018	Y
	City WINNETKA	State IL		Zip Code 60093-4213	_				-				54526 Perio	
	FEC ID number of contributing federal political committee.	C				Ē			,	_		,	207	.30
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Business Development		Ц	Me	mo	lte	€				
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	ur-to-Date ▼ 542.40		P/R D	edu	ictio	on (\$69.	10 Bi	i-Wee	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgar	nization Name		Date	e of	Re	cei	pt				
	Mailing Address 91 WAVERLY RD					M 1	1 ^M	/	ſ	26	/	Y	ү ү 2018	Y
	City HUNTINGTON	State CT		Zip Code 06484-5835	_				-				657526 8 Perio	
	FEC ID number of contributing federal political committee.	C				Ē			7	_		y	42	.00
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt		Ц	Me	emo	lte	эm				
	Receipt For: Ag Primary General Other (specify)	ggregate	Yea	ar-to-Date ▼ 322.00		P/R E)edu	uctio	on ((\$14.	.00 B	i-Wee	ekly)	
s	UBTOTAL of Receipts This Page (optional)			••••••	I				,			,	291	.30
т	OTAL This Period (last page this line number only))		•	-	Ē			,			,		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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			Detailed Summary Page	×	11a	\square	11	-		11c	12		
	y information copied from such Reports and State for commercial purposes, other than using the na								se of				
$\overline{\left\langle \right\rangle}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated												
A.	Full Name of Individual (Last, First, Middle Initial) STREIT, BARRY, , ,) or Full O	rgar	nization Name		Date of Receipt							
	Mailing Address 5421 KELLOGG AVENUE	Stat-		Zin Codo		11 26 2018 Transaction ID : PR2552966752617							
	City EDINA	State MN		Zip Code 55424-1604	<i>H</i>							6675261 s Period	(
	FEC ID number of contributing federal political committee.	С				230.76							
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) eg VP of SIs	Memo Item								
_	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1769.16	P	P/R Deduction (\$76.92 Bi-Weekly)							
В.	Full Name of Individual (Last, First, Middle Initial) TINKER, ANN, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt		_		
	Mailing Address 530 HUNTER FLAT STREET	State		Zin Codo	11 / 26 / Y Y Y 2018							Y	
	City LAS VEGAS	State NV		Zip Code 89138-1110				-				6685261 s Period	7
	FEC ID number of contributing federal political committee.	С	-					-			-9-	42.0	00
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir (•	tion (for Individual) npli		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 322,00	P/R Deduction (\$14.00 Bi-Weekly)							ekly)	
с.	Full Name of Individual (Last, First, Middle Initial) WACKER, AARON, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 4704 CAVAN ROAD	01-1				M M 11	1	L	26	J		2018	
	City MOUND	State MN		Zip Code 55364-1877								6705261 s Period	(
	FEC ID number of contributing federal political committee.	С	_				_	y			y	42.0	00
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) ipal Engineer, TLCP		Me	emo	o It	em				
	Receipt For: // Primary General Other (specify)	Yea	r-to-Date ▼ 322.00	P	/R Dedi	uctio	on	(\$14.	00	Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)							,			,	314.7	76
т	OTAL This Period (last page this line number onl	y)		•••••				-		1	-9	4	

Use separate schedule(s)

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		Use separate schedule(s)	(check only	y one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12	<u> </u>				
Any information copied from such Reports and or for commercial purposes, other than using t											
NAME OF COMMITTEE (In Full)					TOTTI SUCI	Commute					
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle NAASZ, SCOTT, , ,	Initial) or Full C	rganization Name	Date of	Date of Receipt							
Mailing Address 3311 WILDS RIDGE NW			M M 11								
City PRIOR LAKE	State MN	Zip Code 55372-4540		Transaction ID : PR2553474752617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С			1.45.1		115.3	88				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		emo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Ded	luction (\$38.	46 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle B. PROSKAUER, DANIEL, , ,	Initial) or Full C	rganization Name	Date of	f Receipt							
Mailing Address 240 DERBY STREET			M M 11	/ D D 26	/ Y	y y 2018	Y				
City NEWTON	State MA	Zip Code 02465-1006		action ID : t of Each R			7				
FEC ID number of contributing federal political committee.	С			57.69							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 442.29	P/R Ded	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. RAYBURN, MONICA, , ,	Initial) or Full C	rganization Name	Date of	f Receipt							
Mailing Address 5127 JACKSON PONDS C			M M 11	26		у у 2018					
City SUGAR LAND	State TX	Zip Code 77479-4656		saction ID : t of Each R			7				
FEC ID number of contributing federal political committee.	С					117.0	00				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	м	emo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 897.00	P/R Ded	luction (\$39.	.00 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional).					,	290.0	17				
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)								
IIEIV	IIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 13	11b	11c	12 16	17				
or for	formation copied from such Reports and Stat commercial purposes, other than using the n			erson for the		of soliciting	contribut	ions				
\ \	ME OF COMMITTEE (In Full) nitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)								
	I Name of Individual (Last, First, Middle Initial HOMAS, RICHARD, , ,) or Full Or	ganization Name	Date o	of Receipt							
	iling Address 5121 DUPONT AVENUE SOUT	1		11 / D D / Y Y Y Y Y 2018								
City MI	/ NNEAPOLIS	State MN	Zip Code 55419-1151	Transaction ID : PR2553475452617 Amount of Each Receipt this Period								
	C ID number of contributing eral political committee.	С					291.0	0				
Op	me of Employer (for Individual) tum Services, Inc		pation (for Individual) Gen Mgmt		lemo Item							
Re	ceipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 2231.00	P/R Dec	duction (\$9	7.00 Bi-We	eekly)					
	Name of Individual (Last, First, Middle Initial) or Full Or	ganization Name	Date o	of Receipt							
Ма	iling Address 125 WALKER AVE S	1-		M N	/ D		2018	Y				
City WA	Υ ΑΥΖΑΤΑ	State MN	Zip Code 55391-1724		saction ID nt of Each			,				
	C ID number of contributing eral political committee.	С		576.90								
Na Uni	me of Employer (for Individual) ted HealthCare Services Inc		pation (for Individual) Bus Initiv Clin Aff	P/R Deduction (\$192.30 Bi-Weekly)								
Re	ceipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 4422.90									
	I Name of Individual (Last, First, Middle Initial ERAFA, DANIEL, , ,) or Full Or	ganization Name	Date o	of Receipt							
Ma Citv	iling Address 61234 ADMIRAL DRIVE	State	Zip Code	11 Trop	saction ID	6	2018					
	ASHINGTON TOWNSHIP	MI	48094-1242		nt of Each			r				
	C ID number of contributing eral political committee.	С			y	9	42.0	0				
Ор	me of Employer (for Individual) tum Services, Inc	Occu VP IT	pation (for Individual)		lemo Item							
	ceipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 322.00	P/R De	duction (\$1	4.00 Bi-We	eekly)					
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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than usin			person for the purpose of soliciting contributions be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	orated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mide A. FLAGSTAD, KARSTEN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1002 141ST LANE NE			11 26 / Y Y Y Y Y 2018							
City HAM LAKE	State MN	Zip Code 55304-6770	Transaction ID : PR2554013052617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	VP	upation (for Individual) Info Tech	Memo Item							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mido B. MOORE, THOMAS , , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 226 5TH AVENUE NOR #805			11 / D D / Y Y Y Y Y 11 26 2018							
City ST PETERSBURG	State FL	Zip Code 33701-2959	Transaction ID : PR2554013252617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs Care Mgmt & Del	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Mido REIDY, GREGORY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4836 W SUNSET BLVD			11 / D D / Y Y Y Y Y 2018							
City TAMPA	State FL	Zip Code 33629-6448	Transaction ID : PR2554013352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		734.28							
TOTAL This Period (last page this line nu	mber only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS			or each category o Detailed Summary I		×	11a		111	-	11c	12			
	y information copied from such Reports and State for commercial purposes, other than using the na									e of s					
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Uni	tedHealth Gr	oup PAC	C)									
A.	Full Name of Individual (Last, First, Middle Initial) ALEXANDER, JOY, , ,	or Full C	Drgar	nization Name			ate of	Re	ceip	ot					
	Mailing Address 5116 NORTH TIOGA WAY					11 / D D / Y Y Y Y 11 26 2018									
	City	State		Zip Code		Transaction ID : PR2560064152617									
	LAS VEGAS	NV		89149-5830	_	_ A	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С							,		- 9	42	2.00		
	Name of Employer (for Individual) Health Plan of Nevada		cupat Mktg	ion (for Individual) J		Memo Item									
	Receipt For:	Aggregate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼		-9-		22.00	P/I	R Ded	uctio	on (\$14.0	0 Bi-We	eekly)			
В.	Full Name of Individual (Last, First, Middle Initial) BENNETT, JIM, , ,	or Full C	Drgar	nization Name			ate of	Re	ceip	ot					
	Mailing Address 3724 PINE TIP ROAD					M M / D D / Y Y Y Y 11 26 2018									
	City TALLAHASSEE	State FL		Zip Code 32312-1016		Transaction ID : PR25600642526 Amount of Each Receipt this Perio									
	FEC ID number of contributing federal political committee.	С	42.00 Memo Item												
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Sr /													
	Receipt For: A Primary General Other (specify) ▼	\ggregate	Yea	r-to-Date ▼ 32	22.00	P/R Deduction (\$14.00 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drgar	nization Name			ate of	Re	ceip	ot					
	Mailing Address 7756 N 85TH STREET						M M	/	D	26	/ Y	2018	Y		
	City OMAHA	State NE		Zip Code 68122-1281								0644526			
				00122-1201	_	A	mount	of	Eac	ch Re	ceipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С							9		y	11:	5.38		
	Name of Employer (for Individual) United HealthCare Services Inc		cupat d Dir	ion (for Individual)			M	emo) Ite	em					
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 88	34.58	P/	R Ded	uctio	on (\$38.4	6 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)								,		,	199	9.38		
Т	OTAL This Period (last page this line number only	y)			····· ►	Ī			-		-				

SCHEDULE A (FEC Form 3X) _____ _

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12				
	y information copied from such Reports and S												
or	for commercial purposes, other than using the	e name and a	address of any political committee	to s	OIICIT COI	ntric	outions	from sucr	1 committ	ee.			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	(C)									
Α.	Full Name of Individual (Last, First, Middle Ini COY, THOMAS, , ,	tial) or Full O	Drganization Name	Date of Receipt									
	Mailing Address 6970 SUZANNE COURT				11 26 Y Y Y Y Y 2018								
	City SCHENECTADY	State NY	Zip Code 12303-5285	_	Transaction ID : PR2560064552617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			30.00								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt		M	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00		P/R Deduction (\$10.00 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Ini GAZELEY, PAULA, , ,	tial) or Full O	Drganization Name		Date of	Re	eceipt						
	Mailing Address 36 MAYFAIR ROAD	1			M M 11	1	D 26		2018	Y			
		State NY	Zip Code	_					6485261	7			
	WYNANTSKILL		12198-8018		Amount	tot	Each F	leceipt th	is Period	_			
	FEC ID number of contributing federal political committee.	С			Ļ.	_	-y		42.0	00			
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) CInt Svc Acct Mgt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 322.00		P/R Ded	uctio	on (\$14	.00 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Ini GIANCURSIO, DONALD, , ,	tial) or Full O	Drganization Name		Date of	Re	eceipt						
	Mailing Address 72 MIDNIGHT RIDGE DR				11 ^M	1	26		y y 2018	Y			
	City LAS VEGAS	State NV	Zip Code 89135-1680						06495261 is Period	7			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	. ,	576.9	90			
	Name of Employer (for Individual) Health Plan of Nevada		cupation (for Individual) I Plan CEO		М	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•				y	. ,	648.9	90			
т	OTAL This Period (last page this line number	only)	••••••	-									

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page								
			erson for the purpose of soliciting contributions							
or for commercial purposes, other than using	me name and a	ouress or any political committe								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. KUNEMUND, GREGG, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9040 RIVERBEND MANO	R		11 26 / Y Y Y Y 2018							
City ALPHARETTA	State GA	Zip Code 30022-1813	Transaction ID : PR2560065352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		683.10							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4316.25	P/R Deduction (\$227.70 Bi-Weekly)							
Full Name of Individual (Last, First, Middle LIPPMAN, SHELDON, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 55 CLIFFIELD ROAD			11 / D D / Y Y Y Y Y 26 / 2018							
City BEDFORD	State NY	Zip Code 10506-1210	Transaction ID : PR2560065452617							
		10000-1210	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		291.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item							
Receipt For:	Aggregate	Year-to-Date V	\neg							
Other (specify) ▼		2231.00	P/R Deduction (\$97.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle LOBERG, ANGELA, , ,	,	rganization Name	Date of Receipt							
Mailing Address 2837 EAST PARK PLACE			11 / D D / Y Y Y Y Y 26 2018							
City MILWAUKEE	State WI	Zip Code 53211-3845	Transaction ID : PR2560065552617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		428.55							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 571.40	P/R Deduction (\$142.85 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1402.65							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Summar		×	11a] 11b	۰ _	11c	12			
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	y information copied from such Reports and State for commercial purposes, other than using the na													
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth C	Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) LUCHT, JEFFREY, , ,	or Full O	rganization Name		Date of Receipt									
	Mailing Address 33 FOUR SEASONS DRIVE					11 26 / Y Y Y Y Y								
	City ALTON	State NH	Zip Code 03809-4872		Transaction ID : PR2560065652617 Amount of Each Receipt this Period							7		
	FEC ID number of contributing federal political committee.	С			291.00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individua Act Underwriting	al)	ן ו	Me	emo	lte	m					
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	2231.00	P/f	R Dedu	uctic	on (:	\$97.0	0 Bi-We	eekly)			
В.	Full Name of Individual (Last, First, Middle Initial) MARONEY, KEVIN, , ,	or Full O	rganization Name			Date of	Ree	ceip	ot	_				
	Mailing Address 5052 NORMAN DRIVE	Q4e4	7: 01		11 / D D / Y Y Y Y 26 / 2018							Y		
	City MINNETONKA	State MN	Zip Code 55345-4636								0 6575261 his Period	7		
	FEC ID number of contributing federal political committee.	С						-	-1	42.	00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individua c Gen Counsel	al)] [Memo Item								
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	P/R Deduction (\$14.00 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initial) MILICH, DAVID, , ,	or Full O	rganization Name			Date of	Ree	ceip	ot					
	Mailing Address 2702 BIRCHMERE COURT	Quet-	7:- 0- 1		4 6	11 T rans	/	L	26	/ Y	2018			
	City KATY	State TX	Zip Code 77450-1303								06605261 his Period	1		
	FEC ID number of contributing federal political committee.	С					_	9		,	683.	10		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individua Plan CEO	1)		Me	emo	b Ite	em					
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼	4316.32	P/I	R Dedı	uctic	on (:	\$227.	70 Bi-V	Veekly)			
s	UBTOTAL of Receipts This Page (optional)			•••••	[Ξ	,		,	1016.	10		
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12								
			, ,	13 14 15 16 17								
	y information copied from such Reports and State for commercial purposes, other than using the na											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial) OBRYANT, WILLIAM, , ,	or Full O	Organization Name	Date of Receipt								
	Mailing Address 3425 CHICKASAW			11 26 / Y Y Y Y								
	City	State TX	Zip Code	Transaction ID : PR2560066152617								
	SAN ANTONIO	17	78261-2139	_ Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir	Memo Item								
	Receipt For:	ggregate	Year-to-Date V	1								
	Primary General Other (specify) ▼		322.00	P/R Deduction (\$14.00 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initial) VAIL, DENISE, , ,	or Full O	Organization Name	Date of Receipt								
	Mailing Address 35 CLEVELAND AVENUE			11 26 / Y Y Y Y 2018								
	City	State	Zip Code	Transaction ID : PR2560066852617								
	SAYVILLE	NY	11782-1322	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.00 Memo Item								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) CInt Svc Acct Mgt									
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ , 322,00	P/R Deduction (\$14.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial) DICKMAN, KRISTA, , ,	or Full O	Organization Name	Date of Receipt								
	Mailing Address 2533 ONYX DRIVE			11 / D D / Y Y Y Y 11 26 2018								
	City	State	Zip Code	Transaction ID : PR2560398152617								
	SHAKOPEE	MN	55379-2770	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgr III	Memo Item								
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			126.00								
Т	OTAL This Period (last page this line number only	′)	·····									

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee								
		uaress or any political committer	to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle KOREAN, GEORGE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 23426 VILLENA			11 26 2018								
City MISSION VIEJO	State CA	Zip Code 92692-1861	Transaction ID : PR2560398552617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		42.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Cnslt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MURRAY, GARY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 13093 GROUSE POINTE C			11 / D D / Y Y Y Y Y 26 2018								
	State UT	Zip Code	Transaction ID : PR2560398752617								
DRAPER		84020-8258	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Risk Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		230.00	P/R Deduction (\$10.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle NOEL, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4316 FREMONT AVENUE			11 26 2018								
City MINNEAPOLIS	State MN	Zip Code 55409-1721	Transaction ID : PR2560398852617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			648.90								
TOTAL This Period (last page this line numb	er only)										

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177			Use separate schedule(s)	(ch	neck onl	y o	ne)					
			for each category of the Detailed Summary Page		× 11a]11b	11c	12	<u> </u>		
	y information copied from such Reports and S											
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	tudress of any political committee	τυ S	UNCIL CO		JULIONS 1	TOTT SUCK	i committ	ee.		
\rangle	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Init WULF, ROBERT, , ,	ial) or Full O	organization Name		Date of Receipt							
	Mailing Address 622 N 11TH ST				M M / D D / Y Y Y Y 11 26 2018							
	City WAUSAU	State WI	Zip Code 54403-5004		Transaction ID : PR2560398952617 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		42.12								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		М	emo	tem Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Init CRONIN, JAMES, , ,	ial) or Full O	organization Name		Date o	f Re	eceipt					
	Mailing Address 241 WALLACE RD				M M 11		26		2018	Y		
	City	State NH	Zip Code	_					82115261	7		
	BEDFORD FEC ID number of contributing		03110-5144		Amoun	t of	Each F	leceipt th	is Period	_		
	federal political committee.	C			P/R Deduction (\$192.30 Bi-Weekly)							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	F								
С.	Full Name of Individual (Last, First, Middle Init OBRIEN, PATRICK, , ,	ial) or Full O	organization Name		Date of	f Re	eceipt					
	Mailing Address 33 BARRINGTON DRIVE	1			м м 11	1	26		2018	Y		
	City BEDFORD	State NH	Zip Code 03110-5601						32145261 is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y.	J	42.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prov Svc		M	lemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00		P/R Dec	lucti	on (\$14	.00 Bi-W€	eekly)			
	UBTOTAL of Receipts This Page (optional)			• -		-	, , , ,	· · ·	661.0)2		

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

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17			Use separate schedule(s)	(check d	only c	one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b 14	11c 15		2 16	17	
	y information copied from such Reports and St for commercial purposes, other than using the			erson for th		rpose of	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P/	AC)							
Α.	Full Name of Individual (Last, First, Middle Init	al) or Full O	organization Name	Date	Date of Receipt						
	Mailing Address 516 APPLE LANE				11 / D D / Y Y Y Y 11 26 2018						
	City HARLEYSVILLE	State PA	Zip Code 19438-2549		Transaction ID : PR2560821552617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С				7		_	42.00)	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prod		Mem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R D	educt	ion (\$14.)	00 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi THOMPSON, CHARLES, , ,	al) or Full O	organization Name	Date	of R	eceipt					
	Mailing Address 5217 EDGEWOOD ROAD			M 1		26	/ Y	y 201	8		
	City LITTLE ROCK	State AR	Zip Code 72207-5413			tion ID:			-		
	FEC ID number of contributing federal political committee.	C				f Each R		-	576.90)	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initi LUND, BRIAN, , ,	al) or Full O	organization Name	Date	of R	eceipt					
	Mailing Address 11471 NORTH SHORE DRIVE			M 1	1	26		201	8		
	City GRANTSBURG	State WI	Zip Code 54840-8059			tion ID : f Each R					
	FEC ID number of contributing federal political committee.	С				y	. y	1	117.00)	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir 1	upation (for Individual) Fax		Mem	io Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 897.00	P/R D	educ	tion (\$39.	00 Bi-We	eekly)			
⊢	UBTOTAL of Receipts This Page (optional)					5	· · ·	7	735.90)	

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

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			e to solicit contributions from such committee.								
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle CAVANAUGH, LARRY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 520 NE 20TH ST # 1010			M M / D D / Y Y Y Y 11 26 2018								
City WILTON MANORS	State FL	Zip Code 33305-2162	Transaction ID : PR2563211052617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		117.00								
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Spc	upation (for Individual) Ben Govt Dntl Sls Mgr	Memo Item								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. HUSS, DIANE, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2622 LITER COURT	11 / D D / Y Y Y Y 2018										
City ELLICOTT CITY	State MD	Zip Code 21042-1729	Transaction ID : PR2564296752617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle . MACKENZIE, ANDREW, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1912 IRVING AVE S	0	7.0.4	11 / 26 / Y Y Y Y 11 / 26 / 2018								
City MINNEAPOLIS	State MN	Zip Code 55403-2823	Transaction ID : PR2564297152617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		723.90								
TOTAL This Period (last page this line num	ber only)										

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×]11a		1	1b		11c	12			
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (L	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) (DAMATO, ELLEN, , ,	or Full Or	rgar	nization Name	1	Date	of R	lece	eipt						
	Mailing Address 1300 DALHART DRIVE					11 26 2018									
		State TX		Zip Code		Transaction ID : PR2564802252617									
		1		75013-5339	_ /	Amou	nt of	f Ea	ach F	Rec	ceipt th	is Period	1		
	FEC ID number of contributing federal political committee.	0						-			-95-	42	.00		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual)			Mem	io It	em						
	Pocoint For:			r-to-Date ▼	-										
	Primary General Other (specify) ▼	-9-09410	100	322.00	P	/R De	educt	tion	(\$14	1.00) Bi-We	ekly)			
В.	Full Name of Individual (Last, First, Middle Initial) (WILLSON, JOSH, , ,	or Full Or	rgar	nization Name		Date	of R	lece	eipt						
	Mailing Address 201 ADAMS CT					11 26 Y Y Y Y Y 2018									
	City	State		Zip Code		Transaction ID : PR2564802552617 Amount of Each Receipt this Period									
	COLLEYVILLE	ТХ		76034-6811											
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) RVP SLS SB and Spec Ben					Memo Item								
	Name of Employer (for Individual) United HealthCare Services Inc														
	Receipt For: Ag Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					P/R Deduction (\$38.46 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial) (CARLSON, CHRISTOPHER, , ,	or Full Or	rgar	nization Name		Date	of R	lece	eipt						
	Mailing Address 10618 WEST RIVER ROAD					[™] 11	М	/	26		/ Y	2018	Y		
	5	State		Zip Code		Tra	nsac	tion	n ID :	: PI	R25648	8026526	17		
	BROOKLYN PARK	MN		55443-1233	_ /	Amou	nt of	f Ea	ach F	Rec	ceipt th	is Period	1		
	FEC ID number of contributing federal political committee.	0						9			y	576	.90		
	Name of Employer (for Individual)		•	ion (for Individual)		Memo Item									
	United HealthCare Services Inc Receipt For:	1		nr & Cust Experience	_										
	Primary General	ggregate	Yea	r-to-Date ▼		/R D/	aduat	tion	(\$10	32 :	30 Bi-W				
	Other (specify)		-	4422.90			Juuci		(ψι 8		JU - 10	UCKIY)			
s	UBTOTAL of Receipts This Page (optional)											734	28		
	OTAL This Period (last page this line number only)				j			-			Ŧ				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				or each category of the Detailed Summary Page	×	11] 11 1∠	1b 4		11c 15	12	17				
	y information copied from such Reports and Stater for commercial purposes, other than using the nam					or t	he		pos	se of		oliciting	contribu	itions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Uni	itedHealth Group PA	C)													
Α.	Full Name of Individual (Last, First, Middle Initial) HANSEN, PAUL, , ,	or Full O	Orgai	nization Name	[Date of Receipt												
	Mailing Address 18430 62ND PLACE NORTH				11 26 / Y Y Y Y Y 11 26													
		State		Zip Code		Transaction ID : PR2564802752617												
	MAPLE GROVE	MN		55311-4585	_ /	٩mo	unt	of	Ea	ach F	Rec	ceipt thi	s Period					
	FEC ID number of contributing federal political committee.	C							291.00									
	Name of Employer (for Individual)		•	ion (for Individual)			Me	emo	o It	em								
	United HealthCare Services Inc Receipt For:			Controller	_													
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2231.00							P/R Deduction (\$97.00 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) GOODWIN, MARYELLEN, , ,	or Full O	Orgai	nization Name	Date of Receipt													
	Mailing Address 3216 PLAYERS VIEW CIRCLE							11 / D D / Y Y Y Y Y 26 2018										
	City	StateZip CodeFL32779-3154											029526 1 s Perioc					
	FEC ID number of contributing federal political committee.	C						42.00						.00				
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Acct Mgmt		Memo Item												
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)													
	Full Name of Individual (Last, First, Middle Initial)	or Full O	Orgai	nization Name		Date	e of	Re	ece	eipt								
	Mailing Address 22408 FITZGERALD DRIVE			1			1	1	L	26			2018 Y					
	City LAYTONSVILLE	State MD		Zip Code 20882-2301	4								032526 s Period					
	FEC ID number of contributing federal political committee.	0							9			y	117	.00				
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) of Acct Mgmt			Me	emc	o It	tem								
	Receipt For: Ag Primary General Other (specify)	ggregate	Yea	ar-to-Date ▼ 897.00	P	/R [Ded	ucti	on	(\$39	.00) Bi-We	ekly)					
S	UBTOTAL of Receipts This Page (optional)			•••••					,			9	450	00				
т	OTAL This Period (last page this line number only))		····· •					-			-15-						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	,											
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middl A. MARDEN, PAUL, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 718 HICKORY HILL RD			M M / D D / Y Y Y Y 11 26 2018									
City FRANKLIN LAKES	State NJ	Zip Code 07417-1707	Transaction ID : PR2564803352617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middl B. MOQUIST, DARREN, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 5004 ARDEN AVE			11 / 26 / Y Y Y Y 2018									
City EDINA	State MN	Zip Code 55424-1314	Transaction ID : PR2564803452617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middl C. BELLMAN, MARK, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 5601 VAN WINKLE LN			11 / D D / Y Y Y Y 26 / 2018									
City AUSTIN	State TX	Zip Code 78739-1694	Transaction ID : PR2564803552617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	l)		1195.80									
TOTAL This Period (last page this line num	nber only)											

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. WRIGHT, LISA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6 VOLERRAN PATH LANE			11 26 2018								
City	State	Zip Code	Transaction ID : PR2564803752617								
MISSOURI CITY	TX	77459-1167	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. OHARE, TAMMY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2420 SAINT GEORGE WA			11 26 / Y Y Y Y 2018								
City BROOKEVILLE	State MD	Zip Code 20833-3265	Transaction ID : PR2564803952617								
FEC ID number of contributing	C	20035-3205	Amount of Each Receipt this Period								
federal political committee.											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	7								
Other (specify)		897.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle WICKS, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2600 WEST LAFAYETTE F PO BOX 352			11 / D D / Y Y Y Y Y 2018								
City WAYZATA	State MN	Zip Code 55391-0352	Transaction ID : PR2565448652617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group CFO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			735.90								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1 ¹								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle CARTER, WILLIAM, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address PO BOX 920679			M M / D D / Y Y Y Y Y 11 26 2018								
City HOUSTON	State TX	Zip Code 77292-0679	Transaction ID : PR2565448752617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle CRAIG, DONNA, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 13138 SORRENTO WAY			11 / 26 / Y Y Y Y Y 2018								
City	State	Zip Code	Transaction ID : PR2565448852617								
BRADENTON	FL	34211-2173	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		322.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. KUNST, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4872 103RD STREET	1		11 / D D / Y Y Y Y Y 26 2018								
City PLEASANT PRAIRIE	State WI	Zip Code 53158-6516	Transaction ID : PR2566302152617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.12								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CSIs RVP KA	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			199.50								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
IILIVIIZLU NEVEIFIJ		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			13 14 15 16 17 berson for the purpose of soliciting contributions be to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle Meiss, BRUCE, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 7425 N BEACH COURT			11 26 2018					
City FOX POINT	State WI	Zip Code 53217-3656	Transaction ID : PR2566302352617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		1153.84					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) <i>N</i> ed Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1692.28	P/R Deduction (\$1000.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. MANSUKHANI, NEIL, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 2681 N FLAMINGO RD # 1006S			11 / 26 / Y Y Y Y 2018					
City PLANTATION	State FL	Zip Code 33323-1766	Transaction ID : PR2567129452617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Dir SIs Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. ZAMORE, DENISE, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 180 FELT ROAD			11 / D D / Y Y Y Y 11 26 2018					
City SOUTH WINDSOR	State CT	Zip Code 06074-3864	Transaction ID : PR2567129552617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Issc Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)		1311.22					
TOTAL This Period (last page this line num	ber only)							

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle ARNONE, WENDY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5243 E DESERT PARK LA			M M / D D / Y Y Y Y 11 26 2018										
City PARADISE VALLEY	State AZ	Zip Code 85253-3015	Transaction ID : PR2568900552617										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.60	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle PARRILLO, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9501 WEXCROFT DRIVE			11 / D D / Y Y Y Y 26 2018										
City BRENTWOOD	State TN	Zip Code 37027-3824	Transaction ID : PR2571778252617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.46										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.66	P/R Deduction (\$77.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. MOYER, BRUCE, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 4242 BROADWAY STREE #802			11 / D D / Y Y Y Y Y 2018										
City SAN ANTONIO	State TX	Zip Code 78209-6463	Transaction ID : PR2571778352617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			886.36										
TOTAL This Period (last page this line numb	per only)												

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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	13		category of the Summary Page	×	11a	\vdash	11b	11c	12				
	such Reports and Statements other than using the name an					purpc							
	(In Full)												
UnitedHealth Gro	up Incorporated PAC	C (UnitedH	ealth Group PA	AC)									
Full Name of Individual (I HINTON, DUSTIN, , ,	ast, First, Middle Initial) or Fu	II Organization	Name		Date of	Rece	eipt						
Mailing Address W132N6	475 MARACH RD			M M / D D / Y Y Y Y 11 26 2018									
City MENOMONEE FALLS	State WI	Zip Co 5305		Transaction ID : PR2571978752617 Amount of Each Receipt this Period									
FEC ID number of contril federal political committee	ů.								576	5.90			
Name of Employer (for Ir United HealthCare Service	,	Dccupation (for Hlth Plan CEO		Me	emo I	ltem							
Receipt For: Primary G Other (specify) ▼	eneral Aggreg	ate Year-to-Dat	te ▼ 4422.90	P	/R Dedi	uctior	n (\$192.	.30 Bi-W	/eekly)				
Full Name of Individual (I B. ROBINSON, MARC	Last, First, Middle Initial) or Fu ${\sf CUS},,,$	II Organization	Name		Date of	Rece	eipt						
Mailing Address 590 SPE							D D D 26	/ Y	y y 2018	Y			
City DUNWOODY	State	Zip Co 3035						1889526					
FEC ID number of contril federal political committee	outing					Amount of Each Receipt this Period							
Name of Employer (for Ir United HealthCare Service	- L '					Memo Item							
Receipt For: Primary G Other (specify) ▼	eneral Aggreg	ate Year-to-Dat	ae ▼ , 322.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (I c. JACQUET, SHAU	_ast, First, Middle Initial) or Fu N, , ,	II Organization	Name		Date of	Rece	eipt						
Mailing Address 4332 FC		7:0.00			M M 11	/	D D D 26		2018	_			
City SUAMICO	State WI	Zip Co 5431:	3-8557						5893526 is Period				
FEC ID number of contril federal political committee	ů.					,		,		2.00			
Name of Employer (for Ir United HealthCare Service		Dccupation (for Dir Gen Mgmt	Individual)		Me	emo	ltem						
Receipt For: Primary G Other (specify)	eneral Aggreg	ate Year-to-Dat	ae ▼ 322.00] P	P/R Ded	uctior	n (\$14.0)0 Bi-We	ekly)				
SUBTOTAL of Receipts Th	is Page (optional)			,					660	.90			
TOTAL This Period (last pa	ge this line number only)		•••••••••••••••••••••••••••••••••••••••	•				-					

SCHEDULE A (FEC Form 3X) DEOFIDTO

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle SMITH, THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 1631 SAND LAKE ROAD SUITE 224			11 / D D / Y Y Y Y 26 2018							
City ONALASKA	State WI	Zip Code 54650-2481	Transaction ID : PR2572589552617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. CARLSON, KEVIN, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4511 BROWNDALE AVEN			11 / D D / Y Y Y Y 11 26 2018							
City EDINA	State MN	Zip Code 55424-1142	Transaction ID : PR2572590052617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. WACKER, CHARLES, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2747 WEST VIEW DRIVE	State	Zip Code	11 26 2018 Transaction ID : PP2573690152617							
NEW PRAGUE	MN	56071-8989	Transaction ID : PR2572590152617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Sr S	upation (for Individual) colution Sales Executive Year-to-Date ▼	Memo Item							
Primary General Other (specify)	P/R Deduction (\$14.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			372.45							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	EWIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11	- H	11c		12										
	y information copied from such Reports and Stater							se of													
or	for commercial purposes, other than using the name	ne and a	ddress of any political committee	to soli	cit cor	ntrid	outio	ons tr	om suc	n co	mmitt	ee.									
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (I	JnitedHealth Group PA	C)																	
Α.	Full Name of Individual (Last, First, Middle Initial) BECK, JOANNE, , ,											Date of Receipt									
	Mailing Address 17W724 BUTTERFIELD ROAD APT 310	<u></u>			M M / D D / Y Y Y Y 11 26 2018																
	5	State IL	Zip Code 60181-4224						PR2572			7									
	FFC ID number of contributing	C		Amount of Each Receipt this Period 42.12																	
	Name of Employer (for Individual)		upation (for Individual)	1	Memo Item																
	United HealthCare Services Inc	Dir	Ntwk Contrctng	_																	
	Receipt For: Ag Primary General Other (specify) ▼	P/R Deduction (\$14.04 Bi-Weekly)																			
В.	Full Name of Individual (Last, First, Middle Initial) OBRIEN, CHRISTINE, , ,	or Full C	rganization Name		ate of	Re	ecei	ipt													
	Mailing Address 931 FRENCH ST			11 / D D / Y Y Y Y Y 2018								Y									
	City NEW ORLEANS	State LA	Zip Code 70124-3806				-		PR2572 eceipt t			7									
	FEC ID number of contributing federal political committee.	C					42.00														
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) KA VP SIs Acct Mgmt						Memo Item													
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)																	
с.	Full Name of Individual (Last, First, Middle Initial) CHEEK, THOMAS, , ,	or Full C	rganization Name		ate of	Re	ecei	ipt													
	Mailing Address 38065 N CAVE CREEK ROAD VILLA 43				^M ^M	/	C	26	/ Y		018	Y									
	City CAVE CREEK	State AZ	Zip Code 85331-8533	A					PR2572			7									
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Perio							30.0	00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir/CMO	1	Memo Item																
	Receipt For: Ag Primary General Other (specify)	ggregate	P/R Deduction (\$10.00 Bi-Weekly)																		
s	UBTOTAL of Receipts This Page (optional)		•	- 						-	114.1	2									
т	OTAL This Period (last page this line number only))	•	Ī			-														

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17										
or for commercial purposes, other than	rts and Statements ma using the name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	porated PAC (JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, M MILLER, KIMBERLEY, , ,	<i>l</i> iddle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 16 CELONOVA PLA	CE												
City	State CA	Zip Code	Transaction ID : PR2572591252617										
FOOTHILL RANCH	CA	92610-1942	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		42.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting	Memo Item										
Receipt For:		Year-to-Date ▼	—										
Primary General Other (specify) ▼	Aggregate	322.00	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name of Individual (Last, First, N B. WIFFLER, THOMAS, , ,	/liddle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1421 SOMERFIELD	DRIVE		11 26 2018										
City	State	Zip Code	Transaction ID : PR2572992752617										
BOLINGBROOK	IL	60490-3207	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Unit CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, N C. GOETZ, MERRITT, David,		rganization Name	Date of Receipt										
Mailing Address 505 CHURCH STRE APT 1704	ET		M M / D D / Y Y Y Y 11 26 2018										
	State TN	Zip Code 37219-3608	Transaction ID : PR2573477352617										
NASHVILLE		31213-3000	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (op	lional)		1195.80										
TOTAL This Period (last page this line	number only)	······											

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
			Person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle QUINN, PATRICK, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 16933 TODD EVAN TRAI	L		M M / D D / Y Y Y Y 11 26 2018						
City CHESTERFIELD	State MO	Zip Code 63005-4641	Transaction ID : PR2573518752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		333.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2165.22	P/R Deduction (\$111.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. GROZDANICH, PATTI, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 12540 ROBINSON ST APT 6201 City	State	Zip Code	11 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
OVERLAND PARK	KS	66213-1418	Transaction ID : PR2573518852617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. BENSON, MICHAEL, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 2206 EAGLE VALLEY LN			11 26 2018						
City WAUSAU	State WI	Zip Code 54403-8154	Transaction ID : PR2573518952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		43.26						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir SIs Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 331.66	P/R Deduction (\$14.42 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		491.64						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page							
			13 14 15 16 17 erson for the purpose of soliciting contributions a to solicit contributions from such committee						
or for commercial purposes, other than using t	ne name and a	louress of any political committee							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle SHAW, AMY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 11844 DUNHILL ROAD			11 26 / Y Y Y Y 2018						
City EDEN PRAIRIE	State MN	Zip Code 55344-3238	Transaction ID : PR2574971352617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BUCCHIANERI, STEVEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 118 GOVERNORS			11 26 Y Y Y Y 2018						
City MEDFORD	State MA	Zip Code 02155-3018	Transaction ID : PR2574977152617						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		442.29	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle RICHARD, DARYL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 24 WEST RIDGE DRIVE	04-4-	Zin Ood-	11 26 2018						
City WEST HARTFORD	State CT	Zip Code 06117-2065	Transaction ID : PR2574979052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			215.19						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

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				er each category of the etailed Summary Page	×	11a 13		-	1b 4		11c 15	12	17	
	y information copied from such Reports and Stater for commercial purposes, other than using the nan					or the		po	se of		oliciting	contribu	tions	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Unit	edHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) KANE, BRIAN, , ,	or Full O	rgani	ization Name	1	Date of Receipt								
	Mailing Address 4615 ROANOAKE ROAD					11 26 2018								
	5	State		Zip Code		Tran	sact	io	n ID :	P	R25749	7915261	7	
	GOLDEN VALLEY	MN		55422-5254	_ Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	0						,			-9-	833	31	
	Name of Employer (for Individual) Optum Services, Inc		upatio Comr	on (for Individual) m		N	lemo	o li	tem					
	Receipt For: Ac	paregate	Year	-to-Date 🔻										
	Primary General Other (specify) ▼	<u>.</u>	7	1666.62	P	/R De	ducti	ion	ı (\$27	7.7	7 Bi-W	eekly)		
	Full Name of Individual (Last, First, Middle Initial) (HARE, LESLIE, , ,	or Full O	rgani	ization Name		Date o	of Re	ece	eipt					
	Mailing Address 9029 SHEEP RANCH CT					[™] 11	/	I	26		/ Y	y y 2018	Y	
	5	State Zip Code Transactio				ior	n ID :	PF	25749	7945261	7			
	LAS VEGAS	NV		89143-5432	Amount of Each Receipt			eipt thi	s Period					
	FEC ID number of contributing federal political committee.	0							42.	00				
	Name of Employer (for Individual) Health Plan of Nevada		upati Clms	on (for Individual)		Memo Item								
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Year	-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) (MASTERS, SCOTT, , ,	or Full O	rgani	ization Name	1	Date of Receipt								
	Mailing Address 1894 VILLAGE GLEN DRIVE					[™] 11	/		26		/ Y	2018	Y	
	5	State		Zip Code		Tran	sact	tio	n ID :	P	R25749	796526	7	
	SAINT JOHNS	FL		32259-9215	4	Amour	nt of	Ea	ach F	Rec	eipt thi	s Period		
	FEC ID number of contributing federal political committee.	0						,			9	115	50	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP C	•	on (for Individual)		P/R Deduction (\$38.50 Bi-Weekly)								
	Receipt For: Ag Primary General Other (specify)	ggregate	Year	-to-Date ▼ 616.00	P									
S	JBTOTAL of Receipts This Page (optional)											990.	81	
т	OTAL This Period (last page this line number only))			ĺ			,			7			

Use separate schedule(s)

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			Use separate schedule(s)				(check only one)						
11			for each category of the Detailed Summary Page		K 11a 13		11b 14	11c		12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	g con	tributi	ons		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia SIMPSON, TRENT, , ,	ll) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 3111 NORCREST AVE N				M M / D D / Y Y Y Y Y 11 26 2018								
	City STILLWATER	State MN	Zip Code 55082-1779		Transaction ID : PR2574985052617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						-	_	115.3	8		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		M	emc) Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 884.58	P/R Deduction (\$38.46 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia CIANFROCCO, HEATHER, , ,	l) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 4478 MIDDLE ROAD		Zip Code		11 26 Y Y Y Y 2018								
	City ALLISON PARK	State PA					PR2574						
	FEC ID number of contributing federal political committee.	С	15101-1110		Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia KAPLANLEWIS, DEBRA, , ,	l) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 41 WILDWOOD DR				M M 11	/	26		201		Y		
	City SOUTHBOROUGH	State MA	Zip Code 01772-1989					PR2574 Receipt th			,		
	FEC ID number of contributing federal political committee.	С			Memo Item								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90		P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•••••				, .	,	1:	269.1	8		
т	OTAL This Period (last page this line number or	ıly)		-			-						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle A. WASHUTA, KENNETH, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3926 CHERRY AVE			11 26 / Y Y Y Y Y 10 2018								
City MOUND	State MN	Zip Code 55364-9703	Transaction ID : PR2574987652617								
FEC ID number of contributing federal political committee.	C	33304-9703	Amount of Each Receipt this Period 30.00								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) IT	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. BURNETT, JAMIE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4625 EWING AVENUE SO			11 / 26 / Y Y Y Y 2018								
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2574988252617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		117.00								
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle LANGJACOBSEN, HEATHER,		rganization Name	Date of Receipt								
Mailing Address 11382 MOUNT CURVE R			11 / D D / Y Y Y Y 11 26 2018								
City EDEN PRAIRIE	State MN	Zip Code 55347-2918	Transaction ID : PR2574991452617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			262.38								
TOTAL This Period (last page this line numb	er only)	•									

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			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group PA	C)
Α.	Full Name of Individual (Last, First, Middle Initial) ALLAZETTA, DAVID, , ,		organization Name	Date of Receipt
	Mailing Address 339 DARTMOUTH HILLS STREE			11 / 26 / Y Y Y Y 11 26
	City LAS VEGAS	State NV	Zip Code 89138-1544	Transaction ID : PR2574995452617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		288.45
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)
	Full Name of Individual (Last, First, Middle Initial) AGEE, SHELONDA, , ,	or Full C	rganization Name	Date of Receipt
	Mailing Address 6317 BUNKER DRIVE			11 / D D / Y Y Y Y Y 26 2018
	City LOCUST GROVE	State GA	Zip Code 30248-7065	Transaction ID : PR2574997652617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
C.	Full Name of Individual (Last, First, Middle Initial) NEWKIRK, MEGHAN, , ,	or Full C	organization Name	Date of Receipt
	Mailing Address 10162 BEAVER CIR			11 / D D / Y Y Y Y 2018
	City CYPRESS	State CA	Zip Code 90630-4113	Transaction ID : PR2575008752617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.12
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
S	UBTOTAL of Receipts This Page (optional)		▶	360.57
т	OTAL This Period (last page this line number only	y)	▶	· · · · · · · · · · · · · · · · · · ·

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using th											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle Ir WILLIAMS, JOSEPH, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3221 FORSYTH DRIVE			11 26 / Y Y Y Y Y 11 26								
City GREENSBORO	State NC	Zip Code 27407-7221	Transaction ID : PR2575008852617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		307.70								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of SIs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2923.15	P/R Deduction (\$14.07 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Ir B. SJOBLAD, BETHANY, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 10730 PERRY DRIVE NORT	ГН		11 26 2018								
City BROOKLYN PARK	State MN	Zip Code 55443-4700	Transaction ID : PR2575009152617								
FEC ID number of contributing federal political committee.	С	33443-4700	Amount of Each Receipt this Period 833.31								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Quality	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	-								
Primary General Other (specify) ▼		4166.55	P/R Deduction (\$277.77 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Ir . KEMMER, HEIDI, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2211 WEST ROCKROSE PL	LACE		11 26 2018								
City CHANDLER	State AZ	Zip Code 85248-4208	Transaction ID : PR2575021352617								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prov Svc	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.22	P/R Deduction (\$14.14 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1183.43								
TOTAL This Period (last page this line number	r only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	IEWIZED RECEIPIS			X 11a 11b 11c 12							
			Detailed Summary Page	Summary Page 13 14 15 16 1 old or used by any person for the purpose of soliciting contributions any political committee to solicit contributions from such committee. 11 15 16 1 ealth Group PAC) Name Date of Receipt 11 26 2018 Transaction ID : PR2575027552617 Amount of Each Receipt this Period 11 26 2018 114 15 14 99-3810 Amount of Each Receipt this Period Individual) Memo Item P/R Deduction (\$38.33 Bi-Weekly) Name Date of Receipt 11 11 26 2018 Transaction ID : PR2575029652617 Amount of Each Receipt this Period 11 26 2018 Transaction ID : PR2575029652617 Amount of Each Receipt this Period Individual) Memo Item P/R Deduction (\$192.30 Bi-Weekly) P/R Deduction (\$192.30 Bi-Weekly) Name Date of Receipt Memo 11 26 Y 2018 76.90 Name Date of Receipt							
An or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pendotress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.							
$\langle \rangle$	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	NC)							
٩.	Full Name of Individual (Last, First, Middle Initia FRIDELL, CATHERINE, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 11 E STONEWALL DRIVE										
	City	State	Zip Code	Transaction ID : PR2575027552617							
	MIDDLETOWN	DE	19709-3810	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		114.99							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item							
	Receipt For:	Angregate	Year-to-Date V	_							
	Primary General	riggiogato		P/R Deduction (\$38.33 Bi-Weekly)							
	Other (specify)	L	884.92								
	Full Name of Individual (Last, First, Middle Initia DUNCAN, MICHELE, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 3038 FAIRWAY CIRCLE										
	City	State	Zip Code	Transaction ID : PR2575029652617							
	CHASKA	MN	55318-3408								
	FEC ID number of contributing federal political committee.	С									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli								
	Receipt For:	Aggregate	Year-to-Date V	1							
	Primary General Other (specify) ▼			P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia OBRIEN, JENNIFER, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 395 WOODLAWN AVE										
	City	State	Zip Code	Transaction ID : PR2575034552617							
	SAINT PAUL	MN	55105-1339	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
	United HealthCare Services Inc		ef Compli Off								
	Receipt For:	1	Year-to-Date ▼								
	Primary General Other (specify)		4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
	JBTOTAL of Receipts This Page (optional)		· ·	1268.79							

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			erson for the purpose of soliciting contributions						
or for commercial purposes, other than using	the name and a	duress of any political committee							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle JONCZYK, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6336 URBANDALE LANE	NORTH		M M / D D / Y Y Y Y 11 26 2018						
City MAPLE GROVE	State MN	Zip Code 55311-1384	Transaction ID : PR2575038752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MADDOX , JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5610 PURDUE AVE			11 / D D / Y Y Y Y Y 26 2018						
City	State TX	Zip Code	Transaction ID : PR2575039552617						
DALLAS		75209-4431	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify) ▼		884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ALLENBURG, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6224 LOCH MOOR DR	0		11 / D D / Y Y Y Y Y 11 26 2018						
City EDINA	State MN	Zip Code 55439-1618	Transaction ID : PR2575039852617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			346.14						
TOTAL This Period (last page this line numb	er only)								

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I A. HEATH, SEAN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1292 CASTLE CT			11 26 2018							
City GOLDEN VALLEY	State MN	Zip Code 55427-4453	Transaction ID : PR2575048752617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. JORDAN, GARELL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6104 S 64TH DRIVE			M M / D D / Y Y Y Y 11 26 2018							
City LAVEEN	State AZ	Zip Code 85339-2917	Transaction ID : PR2575050252617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For:		Year-to-Date ▼								
Other (specify) ▼		2211.45	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. LINDSAY, VIVIAN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 14930 SW 39 ST			11 / D D / Y Y Y Y 26 / 2018							
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054952617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		683.10							
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP 0	upation (for Individual) Dps	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4316.25	P/R Deduction (\$227.70 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1013.67							
TOTAL This Period (last page this line numbe	r only)									

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	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Initial CLACKO, MARY ANN, , ,	l) or Full Or	rganization Name	Date of Receipt								
	Mailing Address 6358 COTEAU TRAIL	1		11 26 / Y Y Y Y Y 2018								
	City EDEN PRAIRIE	State MN	Zip Code 55344-5205	Transaction ID : PR2575057952617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.38								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item								
	Bosoint For:		Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initial MCCARTY, CARY, , ,	l) or Full Or	rganization Name	Date of Receipt								
	Mailing Address 8800 RUMFIELD RD			11 26 2018								
	City	State	Zip Code	Transaction ID : PR2575059452617								
	NORTH RICHLAND HILLS	TX	76182-6131	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		117.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial ALLEN, MARK, , ,	l) or Full Or	rganization Name	Date of Receipt								
	Mailing Address 11359 ENTREVAUX DRIVE	Otete	Zin Code	11 26 2018								
	City EDEN PRAIRIE	State MN	Zip Code 55347-2862	Transaction ID : PR2575060252617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.38								
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
S	UBTOTAL of Receipts This Page (optional)			347.76								
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or	for commercial purposes, other than using the	name and a	address of any political committee	e to s	solicit cor	ntrib	utions f	rom such	n committ	90.			
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Α.	Full Name of Individual (Last, First, Middle Ini MCEVOY, AMY, , ,	,	Drganization Name		Date of Receipt								
	Mailing Address 10551 GREENBRIER RD AP				11 26 / Y Y Y Y Y 2018								
	City MINNETONKA	State MN	Zip Code 55305-3460						6225261 is Period	7			
	FEC ID number of contributing federal political committee.	С					7	- 7-	60.0	00			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 460.00]	P/R Ded	uctio	on (\$20.	.00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Ini SWAN, RICK, , ,	tial) or Full C	Drganization Name		Date of	f Re	ceipt						
	Mailing Address 2554 CHRISTIAN PKWAY				M M / D D / Y								
	City CHASKA	State MN	Zip Code 55318-1986	-									
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Peri				42.	2			
	Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) VP Gen Mgmt				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 322.92]	P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Ini CURRIE, ULYSSES, , ,	tial) or Full C	Drganization Name		Date of	f Re	ceipt						
	Mailing Address 3111 STILES WAY				M M 11	/	26		2018 Y	Y			
	City WEST FRIENDSHIP	State MD	Zip Code 21794-9218				-		06415261 is Period	7			
	FEC ID number of contributing federal political committee.	С			Ē		y	9	90.0	00			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 710.00		P/R Ded	luctio	on (\$30.	.00 Bi-W€	eekly)				
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,	,	192.1	2			
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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 or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ZAETTA, CHRISTOPHER, , , Mailing Address 5840 RIDGE ROAD Difference of the purpose of the purpose of the purpose of the purpose of soliciting of the purpose of any political committee to solicit contributions from such purpose of the purpose of soliciting of the purpose of the purpose of soliciting of the purpose of the purpose of any political committee to solicit contributions from such purpose of the purpose of soliciting of the purpose of the	12		11c	11b			la	11a	X	X			Detailed Summary Page					TEMIZED RECEIPTS						
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✓ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A, ZAETTA, CHRISTOPHER, , , . Mailing Address 5840 RIDGE ROAD City State Zip Code EXCELSIOR MN 55331-8153 FEC ID number of contributing tederal political committee. C Transaction ID : PR2575 Amount of Each Receipt terms Occupation (for Individual) Memo Item United HealthCare Services Inc Bus Segment Gen Counsel Primary Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-V Other (specify) ▼ 4422.90 P/R Deduction (\$192.30 Bi-V FUI Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt B. VERCHICK, TAMI, , , Mailing Address g916 DUSTY WINDS AVE Date of Receipt City Las VEGAS NV B9117-5986 FEC ID number of contributing tederal political committee. C Transaction ID : PR2575/ Amount of Each Receipt Mailing Address g494 E HAWAII LN Occupation (for Individual) P/R Deduction (\$38.46 Bi-We City General Occupation (for Individual) P/R Deduction (\$38.46 Bi-We Primary General Occupation (for Individual))	(In Full)	TEE (In	MMIT	OF CO	AME	1 /
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Optime Services, Inc Director Technology Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt ISMERT, JENNY, , , Mailing Address 8494 E HAWAII LN Date of Receipt City State Zip Code DENVER Co 80231-2732 FEC ID number of contributing federal political committee. C Occupation (for Individual) Mame of Employer (for Individual) Occupation (for Individual) Memo Item	115.38			<u>.</u>		_			ļ							С		•						
Primary General Other (specify) ▼ B84.58 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name P/R Deduction (\$38.46 Bi-We C. ISMERT, JENNY, , , Mailing Address 8494 E HAWAII LN Date of Receipt City State Zip Code DENVER CO 80231-2732 FEC ID number of contributing federal political committee. C Memo Item Name of Employer (for Individual) Occupation (for Individual) Memo Item				ltem	emo	1ei	М						al)	,	•			al)	ndividual)	(for Indi	oloyer (es, Inc	of Empl Service	ame o ptum \$	Ī
Primary General Other (specify) P/R Deduction (\$38.46 Bi-Weillow) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt ISMERT, JENNY, , , Date of Receipt Mailing Address 8494 E HAWAII LN Image: Color of														ar-to-Date 🔻	ate Yea	Aggrega						t For:	eceipt	Ī
C. ISMERT, JENNY, , , Mailing Address 8494 E HAWAII LN City State Zip Code DENVER CO 80231-2732 FEC ID number of contributing federal political committee. C Mailing Address Name of Employer (for Individual) Occupation (for Individual) Memo Item	ekly)	Veekly	46 Bi-W	n (\$38.4	ictio	Juc	Ded	/R De	>/∣	P			884.58		4				ieneral		pecify)	-		
City State Zip Code DENVER CO 80231-2732 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual)				ceipt	Re	of	e o	Date						anization Name	l Orga	l) or Ful	dle Initia	rst, Middl						
DENVER CO 80231-2732 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual)	2018 Y		/ Y		/				l									I LN	HAWAII L	94 E HA	ss 849	Addres	ailing	I
FEC ID number of contributing federal political committee. C Amount of Each Receipt the Memo Item Name of Employer (for Individual) Occupation (for Individual) Memo Item	070052617	50700	PR2575	on ID :	acti	sa	ans	Tra															-	(
federal political committee. C Name of Employer (for Individual) Occupation (for Individual)	is Period	this P	eceipt th	Each Re	of	nt /	oun	Amou	A		_			80231-2732								ER	DENVE	_
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Primary General P/R Deduction (\$50.00 Bi-We	ekly)	Neekh	00 Bi-W	on (\$50.)	uctio	du	Dec	/R De	P/	Ρ		-				riggroge			ieneral	Gen	Γ	rimary	Ρ	
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	IE OF COMMITTEE (In Full) itedHealth Group Incorporated	PAC (I	Uni	tedHealth Group PA	C)										
	Name of Individual (Last, First, Middle Initial ILOW, MARGARET, , ,) or Full C	Drgan	ization Name	Date of Receipt										
Mail	ing Address 103 LOCUST GROVE LANE	1				11 / D D / Y Y Y Y 26 / 2018									
City	RSAILLES	State KY		Zip Code 40383-8807							071052	• • •			
				40363-6607	Amount of Each Receipt this Period										
	D number of contributing ral political committee.	С				42.12									
Nam	ne of Employer (for Individual)	Occ	cupati	ion (for Individual)		М	emo	lter	m						
	ed HealthCare Services Inc	Dir	Ntwk	Contrctng											
Rec		Aggregate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼		-	322.92	P/	R Ded	luctio	on (\$	¢14.04	4 Bi-We	ekly)				
	Name of Individual (Last, First, Middle Initial) or Full C	Drgan	ization Name		Date o	f Re	eceip	ot						
Mail	ing Address 5 WINGATE COURT					™ _ M 11	/	D	26	/ Y	2018	Y			
City		State		Zip Code		Trans	acti	on I	D : Pl	R2575(071452	617			
FLC	DURTOWN	PA		19031-1117	A	moun	t of	Eac	h Red	ceipt th	nis Peri	od			
	ID number of contributing ral political committee.	С				576.90									
	ne of Employer (for Individual) ed HealthCare Services Inc		•	ion (for Individual) n Ops		Memo Item									
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 4422.90	P/	R Ded	uctic	on (\$	5192.3	30 Bi-W	√eekly)				
	Name of Individual (Last, First, Middle Initial CHOLS, SANDRA, , ,) or Full C	Drgan	ization Name		Date o	f Re	ceip	ot						
Mail	ing Address 12706 YOUNG LANE					м м 11	/	D	26	/ Y	2018				
City		State		Zip Code	_	Trans	sacti	ion l	D : P	R2575	074552	617			
NO	RTH POTOMAC	MD		20878-6112	A	moun	t of	Eac	h Red	ceipt th	nis Peri	od			
	CID number of contributing ral political committee.	С						9		y	57	6.90			
Nam	ne of Employer (for Individual)	Occ	cupati	ion (for Individual)	-	М	lemo	lte	m						
	ed HealthCare Services Inc	SVF	P Nat	I Inptnt Care Mgmt											
Rec	eipt For:	Aggregate	Yea	r-to-Date ▼											
	Primary General Other (specify)		-17-	4422.90	P/	R Dec	luctio	on (S	\$192.:	30 Bi-V	Veekly)				
SUBT	OTAL of Receipts This Page (optional)			•				9		,	119	5.92]		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Summary Page	X 11a 11b 11c 12								
			Detailed Summary Page									
An or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pound any pound by any pound by any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.								
\backslash	NAME OF COMMITTEE (In Full)											
$\left \right $	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
٩.	Full Name of Individual (Last, First, Middle Init BECK, RALPH, , ,	ial) or Full O	organization Name	Date of Receipt								
	Mailing Address W155 N5314 SHARPTAIL CO	URT		11 26 YYYYY 11 26 2018								
	City	State	Zip Code	Transaction ID : PR2575074952617								
	MENOMONEE FALLS	WI	53051-6771	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.12								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item								
	Receipt For:		Year-to-Date ▼	—								
	Primary General Other (specify) ▼		322.92	P/R Deduction (\$14.04 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Init SHELLEY, MATTHEW, , ,	ial) or Full O	Prganization Name	Date of Receipt								
	Mailing Address 13197 NW HELEN LANE			11 26 2018								
	City	State	Zip Code	Transaction ID : PR2575075252617								
	PORTLAND	OR	97229-7045	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	57.69										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Natl Clin Cvrge Review	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Init BURNAM, DEBRA, , ,	ial) or Full O	Prganization Name	Date of Receipt								
	Mailing Address 377 CALABRIA BEACH ST			M M / D D / Y Y Y Y 11 26 2018								
	City	State	Zip Code	Transaction ID : PR2575076252617								
	HENDERSON	NV	89015-2430	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.12								
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
	Optum Services, Inc		Clin Ops	-								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify)		322.92	P/R Deduction (\$14.04 Bi-Weekly)								
s	JBTOTAL of Receipts This Page (optional)		••••••	141.93								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usir			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (L	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Mide A. CALAMIA, EDITH, , ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 22 ROYAL OAK DRIVE			11 / D D / Y Y Y Y Y 26 / 2018
City FAR HILLS	State NJ	Zip Code 07931-2569	Transaction ID : PR2575076652617
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3175.08	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Mido B. UPCHURCH, KAREN, , ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5023 OAKMONT PLACE	E		M M / D D / Y Y Y Y Y 11 26 2018
City WESTERVILLE	State OH	Zip Code 43082-8781	Transaction ID : PR2575084452617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.38
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Midc C. ONEILL, AUDREY, , ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 71 CHESTNUT RIDGE			11 / D D / Y Y Y Y Y 26 2018
City QUEENSBURY	State NY	Zip Code 12804-7317	Transaction ID : PR2575089452617
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	al)		749.97
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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			ay not be sold or used by any ddress of any political commit											
	MMITTEE (In Full)													
> UnitedHea	alth Group Incorpor	ated PAC (I	JnitedHealth Group F	PAC)										
Full Name of Ir	ndividual (Last, First, Middle TACI, , ,	e Initial) or Full C	rganization Name		Date of Receipt									
Mailing Address	s 15008 GREEN OAKS TR				M M 11	′	D D D 26	/ Y	2018	Y				
City		State MN	Zip Code		Transaction ID : PR2575093052617									
PRIOR LAKE		IVIIN	55372-2159		Amount of Each Receipt this Period									
FEC ID numbe federal political	er of contributing I committee.	С			115.38									
•	oyer (for Individual) are Services Inc		upation (for Individual) Technology		Memo Item									
Receipt For:			Year-to-Date V											
Other (sp	General General Decify) ▼		884.58		P/R Deduction (\$38.46 Bi-Weekly)									
	ndividual (Last, First, Middle EPHENS, BARBARA,		rganization Name		Date of	f Re	ceipt							
	s 4704 DUNNIE DRIVE				11 26 2018									
City		State	Zip Code		Trans	actio	on ID : P	R25750	9345261	7				
TAMPA		FL	33614-1496		Amount	t of	Each Re	ceipt th	is Period					
FEC ID numbe federal political	er of contributing I committee.				7	-	40.	14						
	oyer (for Individual) are Services Inc		upation (for Individual) d Dir		M	emo	Item							
Receipt For: Primary Other (sp	General Decify) ▼	Aggregate	Year-to-Date ▼ 324.77		P/R Deduction (\$13.38 Bi-Weekly)									
	ndividual (Last, First, Middle BEVERLY-JANE, , ,	e Initial) or Full C	rganization Name		Date of	f Re	ceipt							
Mailing Address	^S 24 LORUSSO DRIVE				^M 11	/	D D D 26	/ Y	2018	Y				
City		State	Zip Code		Trans	acti	on ID : F	PR25750	9605261	7				
ATTLEBORO		MA	02703-5212		Amount	tof	Each Re	ceipt th	is Period					
FEC ID numbe federal political	er of contributing I committee.	С					9	9	28.	08				
	oyer (for Individual)		upation (for Individual)		M	emo	Item							
	are Services Inc	Dir 1	Ntwk Prgms											
Receipt For: Primary Other (sp	General General	Aggregate	Year-to-Date ▼ 308.88		P/R Deduction (\$0.00 Bi-Weekly)									
		, 					y		183.0	60				

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	Use separate schedule(s)	(check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle A. JACOBY, CHARLES, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 3315 IRVING AVE			M M / D D / Y Y Y Y 11 26 2018
City MINNEAPOLIS	State MN	Zip Code 55408-3321	Transaction ID : PR2575099252617
FEC ID number of contributing	C		Amount of Each Receipt this Period 48.00
federal political committee.	C		40.00
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Qlty Engineering	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$16.00 Bi-Weekly)
Other (specify)		368.00	
Full Name of Individual (Last, First, Middle B. CHAMPION, PHEBE, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 34 REYBURN DRIVE			M M / D D / Y Y Y Y Y 11 26 2018
City HENDERSON	State NV	Zip Code 89074-2760	Transaction ID : PR2575108352617
	_	89074-2760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Cust Service	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		575.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MADDIGAN, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 25131 TERRACE LANTER	Ν		M M / D D / Y Y Y Y 11 26 2018
City DANA POINT	State CA	Zip Code 92629-2864	Transaction ID : PR2575114852617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ir Software Engineering	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			165.12
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	y information copied from such Reports and State for commercial purposes, other than using the na					for	the		pos	se of		liciting	cont	ributi	ons		
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	Jnit	edHealth Group PA	C)												
Α.	Full Name of Individual (Last, First, Middle Initial) MORSCH, MARK, , ,	or Full Or	rgani	zation Name	Date of Receipt												
	Mailing Address 6344 GOLDEN LILY WAY	Otot-		Zin Oada		11 / 26 / 2018 Transaction ID : PR2575115152617											
	City SAN DIEGO	State CA		Zip Code 92130-6836	-				-					-			
	FFO ID number of contribution	C				An	nount	t of	Ea	icn R	ece	eipt thi	s Pe	riod 46.1	4		
	Name of Employer (for Individual) Optum360 Services Inc		•	on (for Individual) Mgmt			M	emo	b It	em							
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year	-to-Date ▼ 353.74	P	P/R	Ded	uctio	on	(\$15.	.38	Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rgani	zation Name		Da	ite of	Re	ece	ipt							
	Mailing Address 1170 NOONING TREE DRIVE		11 / D D / Y Y Y Y 26 2018										Y				
	City CHESTERFIELD	StateZip CodeMO63017-2481						Transaction ID : PR2575121352617 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		365.00									0				
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) cct Mgmt		L	M	emo	b It	em							
	Receipt For: A Primary General Other (specify) ▼	aggregate	Year	-to-Date ▼ 365.00	P	9/R	Ded	uctic	on	(\$365	5.00	0 Bi-W	eekly)			
C.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rgani	zation Name		Da	ite of	Re	ece	ipt							
	Mailing Address 2 PLOWBOY PATH					L	11 ^M		L	26	1		ү 201	8			
	City COMMACK	State NY		Zip Code 11725-1410								R25751			,		
	FFC ID number of contributing	C				An	nount	t of	Ea	icn R	ece	eipt thi	s Pe	riod 42.0	0		
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) cct Mgmt			M	emo	o It	em							
	Pagaint For:	1		-to-Date ▼ 322.00	F	P/R	Ded	uctio	on	(\$14	.00	Bi-We	ekly)				
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12		17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r									butio			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P/	AC)									
A.	Full Name of Individual (Last, First, Middle Initia HUNT, ZOE, , ,	al) or Full Oi	rganization Name										
	Mailing Address 4030 SERANGO COURT				M M 11	1	26) / Y	2018]		
	City WEST LINN	State OR	Zip Code 97068-2840	_	Transaction ID : PR2575136252617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С							4	2.00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00] 「	P/R Ded	uctio	on (\$14	.00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia MCDONNEL, LISA, , ,	al) or Full Oi	rganization Name		Date of	Re	eceipt						
	Mailing Address 9664 LAFORET DRIVE				11 26 / Y Y Y Y								
	City EDEN PRAIRIE	State MN	Zip Code 55347-3538	-				PR25751 leceipt th		-			
	FEC ID number of contributing federal political committee.	С		41.97									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ntwk		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98] 「	P/R Dedu	uctio	on (\$13.	99 Bi-We	eekly)				
с.	Full Name of Individual (Last, First, Middle Initia CARTER, JOCELYN, , ,	al) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 1471 COOPER ROAD				M M 11	1	26		2018]		
	City SCOTCH PLAINS	State NJ	Zip Code 07076-2833	-			-	PR2575		-			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		57	6.90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3749.85] '	P/R Ded	ucti	on (\$19	2.30 Bi-V	Veekly)				
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	66	0.87			
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		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle I DEWALL, PATRICK, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 7662 RIDGEVIEW WAY			11 26 Y Y Y Y Y 11 26 2018
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575145352617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		288.45
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)
Full Name of Individual (Last, First, Middle I MCGANN, JEAN, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 4 VILLAGE ROAD			11 / D D / Y Y Y Y Y 11 26 2018
City	State NJ	Zip Code	Transaction ID : PR2575146952617
FLORHAM PARK	NJ	07932-2415	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP of Acct Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		322.92	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle I C. PETERSOHN, PATRICK, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 16413 BIRCH STREET			11 / D D / Y Y Y Y Y 26 2018
City OVERLAND PARK	State KS	Zip Code 66085-7842	Transaction ID : PR2575148352617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1249.98
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Sls	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3749.94	P/R Deduction (\$416.66 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			1580.55
TOTAL This Period (last page this line numbe	r only)		

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	× 11a 11b		12	<u> </u>							
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	ig the hame and a				commute	e						
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	C)									
Full Name of Individual (Last, First, Mido JONES, RON, , ,	lle Initial) or Full O	rganization Name	Date of Receip	ot								
Mailing Address 10066 ESCAMBIA BAY	СТ		M M / D	26 / Y	2018	Y						
City NAPLES	State FL	Zip Code 34120-4621	Transaction I Amount of Eac			,						
FEC ID number of contributing federal political committee.	C				375.0	0						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? CInt Relationship	Memo Iter	m								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2875.00	P/R Deduction (\$	\$125.00 Bi-W	eekly)							
Full Name of Individual (Last, First, Mido B. RAZVI, NIGHET, , ,	lle Initial) or Full O	rganization Name	Date of Receip	ot								
Mailing Address 1015 S CLINTON AVEN			11 26 / Y Y Y Y									
City	State	Zip Code	Transaction I									
OAK PARK	IL	60304-1823	Amount of Eac	h Receipt thi	s Period							
FEC ID number of contributing federal political committee.	C				41.4	3						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Iter	m								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 328.48	P/R Deduction (\$	\$13.81 Bi-We	ekly)							
Full Name of Individual (Last, First, Mido C. HAMANN, CHAD, , ,	lle Initial) or Full O	rganization Name	Date of Receip	ot								
Mailing Address 7638 RIDGEVIEW WAY			11 · · ·	26 / Y	y y 2018	Y						
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction Amount of Eac			,						
FEC ID number of contributing federal political committee.	С		,	,	576.9	0						
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP 1	upation (for Individual) Fax	Memo Ite	m								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-W	'eekly)							
SUBTOTAL of Receipts This Page (option	al)				993.3	3						
TOTAL This Period (last page this line nu	mber only)			7								

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
$\overline{\langle}$	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)					
A.	Full Name of Individual (Last, First, Middle Initia WIELAND, MICHAEL, , ,	ll) or Full O	rganization Name	Date	of Re	eceipt			
	Mailing Address 6741 EAST SHADOW LAKE DF	RIVE		M 11		D D D 26	/ Y	y y 2018	Y
	City CIRCLE PINES	State MN	Zip Code 55014-1348					18165261 is Period	7
	FEC ID number of contributing federal political committee.	С			_			42.	12
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir I O Engineering		Memo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R De	əducti	ion (\$14.0	04 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initia MCGUIRE, THOMAS, , ,	l) or Full O	rganization Name	Date	of Re	eceipt			
	Mailing Address 41 CUMBERLAND ROAD			M 11		D D 26	/ Y	у у 2018	Y
	City WEST HARTFORD	State CT	Zip Code 06119-1121					8545261	7
	FEC ID number of contributing	C		Amol	int of	Each Re	eceipt th	is Period 576.9	20
	federal political committee.			나는			-	576.	90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel		Memo	o Item			
	Receipt For:	Aggregate	Year-to-Date V						
	Other (specify) ▼		4422,90	P/R De	∍ducti	on (\$192	.30 Bi-W	/eekly)	
с.	Full Name of Individual (Last, First, Middle Initia MELLO, STEPHANIE, , ,	ll) or Full O	rganization Name	Date	of Re	eceipt			
	Mailing Address 65 CLARK LANE			M 11		D D 26	/ Y	2018	Y
	City SWANSEA	State MA	Zip Code 02777-4550					19135261 is Period	7
	FEC ID number of contributing federal political committee.	С				,		42.	12
	Name of Employer (for Individual) Optum Services, Inc	Occu Exec	upation (for Individual) c Dir		Mem	o Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R De	educti	ion (\$14.0	04 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)							661.′	4
т	OTAL This Period (last page this line number or	וy)				45			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	JnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initia DEMARIS, PETER, , ,	l) or Full C	organization Name	Date of Receipt								
	Mailing Address 2301 OLIVER AVE S			11 / 26 / 2018								
	City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191852617								
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg eComm	Memo Item								
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3961.48	P/R Deduction (\$346.15 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia MUELLER, CYNTHIA, , ,	l) or Full C	organization Name	Date of Receipt								
	Mailing Address 6919 OLD WHISKEY CREEK DI	R		11 26 Y Y Y Y Y 2018								
	City FORT MYERS	State FL	Zip Code 33919-1828	Transaction ID : PR2575192252617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		52.20								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 313.40	P/R Deduction (\$17.40 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial MOORE, KRISTIN, , ,	l) or Full C	organization Name	Date of Receipt								
	Mailing Address 3021 ROSEDALE AVENUE	1		11 26 / Y Y Y Y Y 11 26								
	City DALLAS	State TX	Zip Code 75205-1451	Transaction ID : PR2575194452617								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)								
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	y information copied from such Reports and Sta for commercial purposes, other than using the r					se of so						
$\overline{\}$	NAME OF COMMITTEE (In Full)							r oommaa				
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initia GRANBERG, MITCHELL, , ,	al) or Full O	organization Name	Date o	of Rece	eipt						
	Mailing Address 6721 GALWAY DRIVE			11 26 / Y Y Y Y 12018								
	City EDINA	State MN	Zip Code 55439-1313					9615261	7			
	FEC ID number of contributing federal political committee.	С						683. <i>´</i>	0			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) buty Gen Counsel		lemo It	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4316.25	P/R Dec	luction	(\$227.7	0 Bi-W	'eekly)				
B.	Full Name of Individual (Last, First, Middle Initia CONDON, CRAIG, , ,	al) or Full O	organization Name	Date o	of Rece	eipt						
	Mailing Address 268 OAK LANDING WAY			M M 11] ' [26	/ Y	2018	Y			
	City SEVERNA PARK	State MD	Zip Code 21146-3116				03152617 is Period	7				
	FEC ID number of contributing federal political committee.	С			t OI Ea			576.9	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Unit CEO		lemo It	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initia FRANCIS, KEVIN, , ,	al) or Full O	organization Name	Date o	of Rece	eipt						
	Mailing Address 15815 MINNETONKA BLVD			M M	1	D D D 26	/ Y	2018	Y			
	City MINNETONKA	State MN	Zip Code 55345-1410					20335261 is Period	7			
	FEC ID number of contributing federal political committee.	С					9	576.9	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4230.60	P/R Dec	Juction	(\$192.3	0 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)		•		. ,		9	1836.9	90			
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171			Use separate schedule(s)	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12								
	y information copied from such Reports and Sta											
or	for commercial purposes, other than using the r	name and a	ddress of any political committee	to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia DURKO, GEORGE, , ,	al) or Full O	organization Name	Date of Receipt								
	Mailing Address 7029 KINGSBURY BLVD			11 26 2018								
	City UNIVERSITY CITY	State MO	Zip Code 63130-4305	Transaction ID : PR2575210852617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		166.65								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.30	P/R Deduction (\$55.55 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia CARRIS, DONNA, , ,	al) or Full O	organization Name	Date of Receipt								
	Mailing Address 5 PARK PLACE UNIT # 130			11 / 26 / Y Y Y Y 2018								
	City ANNAPOLIS	State MD	Zip Code 21401-3392	Transaction ID : PR2575212552617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		111.42								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 888.50	P/R Deduction (\$37.14 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initia STORDAHL, PAUL, , ,	al) or Full O	organization Name	Date of Receipt								
	Mailing Address 7001 W 175TH AVENUE			11 26 2018								
	City EDEN PRAIRIE	State MN	Zip Code 55346-2161	Transaction ID : PR2575213052617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		774.00								
	United HealthCare Services Inc		upation (for Individual) Actuary	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4226.28	P/R Deduction (\$258.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		>	1052.07								
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SCHEDULE A (FEC Form 3X) DEOFIDTO

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ITEMIZED RE	CEIDTS		Use separate schedule(s)	(che	eck only	/ on	e)				
			for each category of the Detailed Summary Page	×	11a 13	\vdash	11b	11c	12	Г	17
			y not be sold or used by any pe Idress of any political committee		for the	purp	ose of	soliciting	, contri	ibutio	ns
NAME OF COM		I PAC (U	InitedHealth Group PA	NC)							
Full Name of Inc A. MARTIN, PET	lividual (Last, First, Middle Initia ʿER, , ,	l) or Full Or	ganization Name		Date of	Rec	ceipt				
Mailing Address	7091 HIGHOVER DRIVE			M M / D D / Y Y Y Y Y 11 26 2018							1
City CHANHASSEN		State MN	Zip Code 55317-7572	Transaction ID : PR2575213 Amount of Each Receipt this F							
FEC ID number federal political c	0	С					y	-	2	45.00	
Optum360 Servic	er (for Individual) ees Inc		pation (for Individual) Sen Mgmt		Me	emo	Item				
Receipt For: Primary Other (spe	General cify) ▼	Aggregate Y	/ear-to-Date ▼ 345.00	P	9/R Dedu	uctio	n (\$15.0	00 Bi-We	ekly)		
	lividual (Last, First, Middle Initia ER, JEFFREY, , ,	l) or Full Org	ganization Name		Date of	Red	ceipt				
Mailing Address 6624 IROQUOIS TRAIL					^M ^M 11	/	D D 26	/ Y	2018]
City EDINA		State MN	Zip Code 55439-1065					PR25752 eceipt th		-	
FEC ID number federal political c	0	С	115.38								
Name of Employ United HealthCar	rer (for Individual) e Services Inc	'	pation (for Individual) Bundled Payment Svs		Me	emo	Item				
Receipt For: Primary Other (spe	General cify) ▼	Aggregate Y	Year-to-Date ▼ 884.58	P	/R Dedu	uctio	n (\$38.4	46 Bi-We	ekly)		
Full Name of Inc C. KOENIG, E	lividual (Last, First, Middle Initia RICA, , ,	l) or Full Org	ganization Name		Date of	Red	ceipt				
	9000 WARREN COURT				11 ^M	/	D D 26		2018	3]
City VICTORIA		State MN	Zip Code 55386-4578					PR25752 eceipt th			
FEC ID number federal political c	0	С			<u> </u>		y	, <u>,</u>	71	14.00	
United HealthCare Services Inc			pation (for Individual) Talent	al) Memo Item							
Receipt For: Aggregate Primary General Other (specify) Image: Construction of the specify in the specify in the specify in the specific of the			/ear-to-Date ▼ 714.00	P	P/R Ded	uctio	on (\$714	1.00 Bi-W	/eekly)	I	
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171			Use separate schedule(s)	(ch	neck only	or or	ne)				
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12		
	y information copied from such Reports and Sta										
or	for commercial purposes, other than using the n	ame and a	ddress of any political committee	to s	olicit con	ntrib	utions 1	trom suc	n commit	tee.	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initia DOUGLAS, CHRIS, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 14810 MCGINTY RD W	1		11 26 / Y Y Y Y Y 11 26							
	City WAYZATA	State MN	Zip Code 55391-2553						22025261 nis Period		
	FEC ID number of contributing federal political committee.	С			<u> </u>				40.	38	
	Name of Employer (for Individual) United HealthCare Services Inc	HealthCare Services Inc Dir Proj Mgmt									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 444.18	F	P/R Dedu	uctio	on (\$20	.19 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia SHORS, MATTHEW, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 4649 EWING AVENUE SOUTH				M M 11	/	26		2018	Y	
	City MINNEAPOLIS	State MN	Zip Code 55410-1745	-					22235261		
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia REILLY, DONALD, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 5 LEGHORN LANE				M M 11	/	26		2018	Y	
	City CROMWELL	State CT	Zip Code 06416-1671						2253526		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	9	30.	00	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.00		P/R Dedu	uctio	on (\$10	.00 Bi-W	eekly)		
s	UBTOTAL of Receipts This Page (optional)						, .	,	647.	28	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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			Detailed Summary Page	×	-		11b		11c	12	·		
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			ddress of any political committee										
	. ,												
/		`	JnitedHealth Group PA	4C)		_							
Full Name of Individu	ual (Last, First, Middle LEEN, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt						
Mailing Address 776	0 HAWTHORN TRL NV	V			M M 11	1′	D 26		/ Y	y y 2018	Y		
City		State	Zip Code	_ "	Trans	acti	on ID	: Pl	R25752	3045261	7		
WALKER		MN	56484-2600	Amount of Each Receipt this Peri									
FEC ID number of c federal political comr		С			30.00								
Name of Employer (for Individual)	Осси	upation (for Individual)		Me	əmo	ltem						
United HealthCare Se	ervices Inc	Dir E	Bus Process		0								
Receipt For:	Ganaral	Aggregate	Year-to-Date ▼		-								
Primary Other (specify)	General ▼		230.00	P,	/R Ded	uctic	on (\$1().0(0 Bi-We	ekly)			
B. KRUTA, DARLE		Initial) or Full O	rganization Name		Date of	Re	ceipt						
Mailing Address 924	3 GREEN BRIAR RD				11 26 2018								
City		State	Zip Code		Transa	actio	on ID :	: PF	R25752	3255261	7		
BLOOMINGTON		MN	55437-1939	4	\mount	of	Each I	Rec	ceipt thi	is Period			
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Name of Employer (United HealthCare Se			upation (for Individual) Gen Mgmt	Memo Item									
Receipt For:			Year-to-Date ▼										
Other (specify)	General ▼		884.58	P/	P/R Deduction (\$38.46 Bi-Weekly)								
	ual (Last, First, Middle ER, BRYAN, , ,	Initial) or Full O	rganization Name		Date of	Re	ceint						
Mailing Address 150					11	_	26		/ Y	2018	Y		
City		State	Zip Code		Trans	acti	ion ID	: P	R25752	23275261	7		
SAN ANTONIO		ТХ	78248-1346	/	\mount	of	Each I	Rec	ceipt thi	is Period			
FEC ID number of c federal political comr	0	C				_	,		y	576.0	00		
Name of Employer (1 Optum Services, Inc	for Individual)		upation (for Individual)) Med Grp Non Physn		Me	emo	o Item						
Bassint For:			Year-to-Date V	\neg									
Primary	General	Ayyreyale		P/	/R Dedu	uctic	วn (\$19	92.0	00 Bi-W	'eekly)			
Other (specify)		1290.00				,. ·		-	.,				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose		oliciting	g contribu	tions		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) KIRKPATRICK, SUSAN, , ,	or Full O	rgar	nization Name	0	Date of	Re	eceip	ot					
	Mailing Address 417 STERLING STREET					11 26 Y Y Y Y 2018								
	City	State MA		Zip Code	Transaction ID : PR2575233652617									
	LANCASTER	IVIA		01523-1847	_ A	mount	of	Ead	ch Re	ceipt th	nis Period			
	FEC ID number of contributing federal political committee.	C	_			38								
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) n Mgmt		Me	emo	b Ite	m					
	Peopint For:	aareaate	Yea	r-to-Date ▼										
	Primary General Other (specify) ▼	884.58	P/	R Ded	uctio	on (\$38.4	6 Bi-W	eekly)					
В.	Full Name of Individual (Last, First, Middle Initial) HOGAN, SCOTT, , ,	or Full O	rgar	nization Name		Date of	Re	eceip	ot					
	Mailing Address 10208 STANDING OAK				11 26 2018									
	City	State		Zip Code		Transaction ID : PR2575234852617								
	WESTON	WI		54476-5676	Amount of Each Receipt this P									
	FEC ID number of contributing federal political committee.	С				500.00								
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) it CEO		Memo Item								
	Receipt For: A Primary General Other (specify) ▼	aggregate	Yea	r-to-Date ▼ 500.00	P/R Deduction (\$500.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) RUSSELL, THOMAS, , ,	or Full O	rgar	nization Name		Date of	Re	eceip	ot					
	Mailing Address 10205 GROOMSBRIDGE ROAD					м м 11	/	D	26	/ Y	2018	Y		
	City	State		Zip Code		Trans	acti	ion	ID : F	R2575	2386526	7		
	JOHNS CREEK	GA		30022-5645	A	mount	of	Ead	ch Re	ceipt th	nis Period			
	FEC ID number of contributing federal political committee.	С						9		y	42.	00		
	Name of Employer (for Individual)	Оссі	upat	ion (for Individual)	\neg	Me	emo	o Ite	em					
United HealthCare Services Inc Di				l Rel										
		ggregate	Yea	r-to-Date 🔻										
	Other (specify)		-	322.00	P/	'R Ded	uctio	on (\$14.0	0 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•••••				,		,	657.	38		
Т	OTAL This Period (last page this line number only	/)		•••••				-,-		-9-				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
or	y information copied from such Reports and Stater for commercial purposes, other than using the nar			
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	JnitedHealth Group PA	C)
Α.		or Full O	rganization Name	Date of Receipt
	Mailing Address 2694 WEST CREEK DRIVE	State	Zip Code	11 / 26 / 2018
	FRISCO	TX	75033-4759	Transaction ID : PR2575241652617
		C		Amount of Each Receipt this Period
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
B.	Full Name of Individual (Last, First, Middle Initial) CHOATE, THOMAS, , ,	or Full O	organization Name	Date of Receipt
	Mailing Address 8222 STONE MASON CT			11 26 / Y Y Y Y Y 2018
	City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247852617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.38
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 4884.58	P/R Deduction (\$38.46 Bi-Weekly)
c.	Full Name of Individual (Last, First, Middle Initial) DIMARTINO, TIMOTHY, , ,	or Full O	organization Name	Date of Receipt
	Mailing Address 49605 KEYCOVE ST			11 26 / Y Y Y Y Y 11 26
	City CHESTERFIELD	State MI	Zip Code 48047-2361	Transaction ID : PR2575248152617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item
	Receipt For: All Primary General Other (specify)	ggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		▶	175.38
т	OTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				br each category of the Detailed Summary Page	×	11a		1	11b			11c	12	2	
				otalieu outilitary raye		13		-	4			15	10		17
	y information copied from such Reports and Stater for commercial purposes, other than using the nar														
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) DARRAH, JACQUELINE, , ,	or Full O	rgan	ization Name		Date o	f Re	ece	eip	t					
	Mailing Address 16942 HUBBARD TRAIL				11 26 / Y Y Y Y 2018										
	,	State		Zip Code		Transaction ID : PR2575248552617									
	LAKEVILLE	MN		55044-5846		Amoun	t of	E	ac	h Re	ece	eipt thi	s Per	iod	
	FEC ID number of contributing federal political committee.	C			115.38								3		
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) Gen Counsel		N	lemc	o I	lter	n					
		ggregate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼	884.58	P	/R Dec	ductio	ion	1 (\$	38. <i>4</i>	46	Bi-We	ekly)				
В.	Full Name of Individual (Last, First, Middle Initial) BRANT, PAUL, , ,	or Full O	rgan	ization Name		Date o	of Re	ece	eip	t					
	Mailing Address 17 ROCKY BROOK ROAD		11 / 26 / Y Y Y Y 2018												
	5	State		Zip Code		Transaction ID : PR2575250252617									
	WILTON	СТ		06897-1919	- '	Amoun	t of	E	ac	h Re	ece	eipt thi	s Per	iod	
	FEC ID number of contributing federal political committee.	C									1	15.38	3		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) /P SIs Acct Mgt	Memo Item										
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 884.58	P	/R Dec	luctio	on	n (\$	38.4	46	Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial) MATTILA, LUCAS, , ,	or Full O	rgan	ization Name		Date o	of Re	ece	eip	t					
	Mailing Address 22829 N 52ND ST					[™] 11				26			۲ 2018	3	
	,	State AZ		Zip Code								25752			
	PHOENIX	AL.		85054-7202		Amoun	t of	E	ac	h Re	ece	eipt thi	s Per	iod	
	FEC ID number of contributing federal political committee.	C						9				9		42.12	2
	Name of Employer (for Individual)	Осси	upati	on (for Individual)	\neg	Ν	lemo	οI	Iter	m					
	United HealthCare Services Inc			Is Acct Mgmt											
		ggregate	Yea	r-to-Date ▼											
	Other (specify)		- J -	322.92	P	P/R Dec	ducti	ior	า (\$	614.0	04	Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)			•••••				,			l	9	2	72.88	3
т	OTAL This Period (last page this line number only)		•••••				-				-7-		-	

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 11c 13 14 15							
Any information copied from such Reports and S or for commercial purposes, other than using the			rson for the purpose of soliciti							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	C)							
Full Name of Individual (Last, First, Middle Ini KORF, GRETCHEN, , ,	tial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3180 CYPRESS CIRCLE S			11 / D D / Y Y Y Y Y 26 2018							
City MEDINA	State MN	Zip Code 55340-8807	Transaction ID : PR257 Amount of Each Receipt							
FEC ID number of contributing federal political committee.	С			576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ini BACHMANN, ANITA, , ,	tial) or Full C	rganization Name	Date of Receipt							
Mailing Address 815 NORTHERN SHORES Po			M M / D D / 11 26	2018						
City GREENSBORO	State NC	Zip Code 27455-3459	Transaction ID : PR257							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt	200.01						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1800.07	P/R Deduction (\$66.67 Bi-V	√eekly)						
Full Name of Individual (Last, First, Middle Ini C. REICHEL, RANDI, , ,	tial) or Full C	rganization Name	Date of Receipt							
Mailing Address 331 TUSCANY ROAD			11 ^D 26 ¹	2018						
City BALTIMORE	State MD	Zip Code 21210-2934	Transaction ID : PR257 Amount of Each Receipt							
FEC ID number of contributing federal political committee.	С			157.89						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 842.08	P/R Deduction (\$52.63 Bi-V	Veekly)						
SUBTOTAL of Receipts This Page (optional)				934.80						
TOTAL This Period (last page this line number	only)									

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only	/ one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12				
Any information copied from such Reports an										
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit cor	ntributions from	m such	committe	е.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle BROOMFIELD, ROBERT, , ,	Initial) or Full C	rganization Name	Date of	Receipt						
Mailing Address 12501 WEST 156TH STR	EET		11 26 / Y Y Y Y Y 11 26							
City OVERLAND PARK	State KS	Zip Code 66221-2662		action ID : PI of Each Rec			,			
FEC ID number of contributing federal political committee.	С				-9-	219.2	.1			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Me	emo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 980.69	P/R Ded	uction (\$73.07	7 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle B. ZARN, MARY, , ,	Initial) or Full C	rganization Name	Date of	Receipt						
Mailing Address 11192 BLUESTEM LANE			M M	/ D D 26	/ Y	ү ү 2018	Y			
City EDEN PRAIRIE	State MN	Zip Code 55347-4731		action ID : PF of Each Rec			,			
FEC ID number of contributing federal political committee.	C					112.5	0			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Me	emo Item						
Receipt For:	Aggregate	Year-to-Date V								
Other (specify) ▼		887.50	P/R Dedu	uction (\$37.50) Bi-Wee	ekly)				
Full Name of Individual (Last, First, Middle C. ZAFFIRIS, NICHOLAS, , ,	Initial) or Full C	rganization Name	Date of	Receipt						
Mailing Address 1581 ISLAND WAY			M M 11	/ D D D 26	/ Y	ү ү 2018	Y			
City WESTON	State FL	Zip Code 33326-3623		of Each Rec			/			
FEC ID number of contributing federal political committee.	C				y	42.1	2			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Me	emo Item						
Receipt For: Primary General Other (specify)	Primary General General				4 Bi-We	ekly)				
SUBTOTAL of Receipts This Page (optional))				y	373.8	3			
TOTAL This Period (last page this line numb	per only)				-					

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle JONES, TERRY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 11856 NW 12TH MANOR			11 26 / Y Y Y Y 2018								
City CORAL SPRINGS	State FL	Zip Code 33071-5035	Transaction ID : PR2575279252617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer (for Individual) United HealthCare Services Inc	Occ KA	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. KRASKA, LISA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 14183 SHADY BEACH TRA	IL NE		11 26 / Y Y Y Y 11 26 2018								
City PRIOR LAKE	State MN	Zip Code 55372-1345	Transaction ID : PR2575283052617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		41.70								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Recruit	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$13.90 Bi-Weekly)								
Other (specify) ▼	L	323.18	(((((((((((
Full Name of Individual (Last, First, Middle HAMBLIN, JILLIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3103 BEACON GROVE ST			11 / D D / Y Y Y Y Y 26 / 2018								
City SPRING	State TX	Zip Code 77389-4348	Transaction ID : PR2575290352617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			199.08								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 rerson for the purpose of soliciting contributions from such committee								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle MUELLER, STEVEN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6895 LAKE HARRISON CI	RCLE		11 26 / Y Y Y Y Y								
City CHANHASSEN	State MN	Zip Code 55317-4589	Transaction ID : PR2575294552617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		272.70								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 727.20	P/R Deduction (\$90.90 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. BEAUREGARD, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 555 MILTON ROAD			11 26 2018								
City	State	Zip Code	Transaction ID : PR2575295152617								
GOSHEN	СТ	06756-1613	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir, Applied Research	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422,90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. HEWITT, SCOTT, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1443 RAYMOND AVE			11 / 26 / Y Y Y Y Y 2018								
City SAINT PAUL	State MN	Zip Code 55108-1430	Transaction ID : PR2575296752617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		170.19								
		upation (for Individual) Ntwk Contrctng	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 829.77	P/R Deduction (\$223.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1019.79								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12					
۸	u information conied from such Departs and Otation		, ,	13 14 15 16 17					
	y information copied from such Reports and Staten for commercial purposes, other than using the nam								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (U	InitedHealth Group PA	C)					
Α.	Full Name of Individual (Last, First, Middle Initial) of MONAGHAN, JOHN, , ,	or Full Or	ganization Name	Date of Receipt					
	Mailing Address 1432 E AMBERWOOD DRIVE			11 26 / Y Y Y Y 2018					
		State AZ	Zip Code	Transaction ID : PR2575296852617					
		AZ	85048-4056	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) twk Prams	Memo Item					
	Dessint For:		/ear-to-Date ▼	-					
	Primary General Other (specify) ▼	gregate	322.92	P/R Deduction (\$14.04 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initial) of HUGHES, ROBERT, , ,	or Full Or	ganization Name	Date of Receipt					
	Mailing Address 68 OCEAN DRIVE			11 26 2018					
		State	Zip Code	Transaction ID : PR2575304252617					
	SEABROOK	NH	03874-4712	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Mktg Bus Dev	Memo Item					
	Receipt For: Ag Primary General Other (specify) ▼	gregate	/ear-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial) o	or Full Or	ganization Name	Date of Receipt					
	Mailing Address 8 CLOISTER COURT			11 26 2018					
	5	State	Zip Code	Transaction ID : PR2575305652617					
	LADERA RANCH	CA	92694-1556	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			576.90					
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Regn	pation (for Individual) CEO	Memo Item					
	Receipt For: Ag Primary General Other (specify)	gregate \	/ear-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•	661.14					
Т	OTAL This Period (last page this line number only)		·····						

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
11			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
\setminus	NAME OF COMMITTEE (In Full)								
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)					
Α.	Full Name of Individual (Last, First, Middle Init HUNT, BRADLEY, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 6636 W SHORE DR			11 26 Y Y Y Y Y Y 11 26 2018					
	City EDINA	State MN	Zip Code 55435-1529	Transaction ID : PR2575310452617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		576.90					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Init GRIMM, JAN, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 3608 WEST 85TH STREET			11 / D D / Y Y Y Y Y 26 2018					
	City	State KS	Zip Code	Transaction ID : PR2575314852617					
	LEAWOOD	- KO	66206-1353	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		42.12					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Init DRAWZ, MATTHEW, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 4848 SPARROW ROAD	1 -		11 / D D / Y Y Y Y Y 26 / 2018					
	City MINNETONKA	State MN	Zip Code 55345-3219	Transaction ID : PR2575315952617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		314.13					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dvlp	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 685.60	P/R Deduction (\$104.71 Bi-Weekly)					
⊢	UBTOTAL of Receipts This Page (optional)			933.15					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	IMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
Any or	information copied from such Reports and Sta for commercial purposes, other than using the n	tements may name and ac	y not be sold or used by any p Idress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
\geq	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)			
۹.	Full Name of Individual (Last, First, Middle Initia GOLDBERG, JEFFREY, , ,	l) or Full Or	ganization Name	Date of Receipt			
	Mailing Address 3410 BRADLEY LANE			11 / 26 / Y Y Y Y Y 2018			
	City	State	Zip Code	Transaction ID : PR2575326952617			
	CHEVY CHASE	MD	20815-3262	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		117.00			
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) usiness Development Exe	Memo Item			
	Receipt For:		∕ear-to-Date ▼				
	Primary General	riggrogato		P/R Deduction (\$39.00 Bi-Weekly)			
	Other (specify) ▼		897.00				
	Full Name of Individual (Last, First, Middle Initia PEEL, CHAD, , ,	l) or Full Or	ganization Name	Date of Receipt			
	Mailing Address 7185 GUNFLINT TRAIL			11 26 2018			
	City	State	Zip Code	Transaction ID : PR2575329852617			
	CHANHASSEN	MN	55317-4743	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	120.00					
	Name of Employer (for Individual) Jnited HealthCare Services Inc	Occu VP F	pation (for Individual) Prd	Memo Item			
i	Receipt For:	Aggregate `	lear-to-Date ▼				
	Primary General Other (specify) ▼		920.00	P/R Deduction (\$40.00 Bi-Weekly)			
	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name	Date of Receipt			
	Mailing Address 727 N EVERGREEN AVE						
	City	State	Zip Code	Transaction ID : PR2575341952617			
	ARLINGTON HEIGHTS	IL	60004-5566	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		576.90			
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item			
	United HealthCare Services Inc		Plan CEO	-			
	Receipt For:	I	/ear-to-Date ▼				
	Primary General Other (specify)		4422.90	P/R Deduction (\$192.30 Bi-Weekly)			

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mid A. WHITE, WAYNE, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8727 W BUCKHORN	ſRL		M M / D D / Y Y Y Y 11 26 2018						
City PEORIA	State AZ	Zip Code 85383-4852	Transaction ID : PR2575342352617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		499.98						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$166.66 Bi-Weekly)						
Full Name of Individual (Last, First, Mic B. HUYSMAN, JAMES, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9441 OAK GROVE CIF			11 / 26 / Y Y Y Y Y 2018						
City DAVIE	State FL	Zip Code 33328-6939	Transaction ID : PR2575342652617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.86						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) t Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 221.26	P/R Deduction (\$9.62 Bi-Weekly)						
Full Name of Individual (Last, First, Mic SIMONE, MICHAEL, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 12 SCALIA COURT	01-14	7.0.0	11 26 2018						
City HAMILTON	State NJ	Zip Code 08690-1363	Transaction ID : PR2575346752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optio	nal)		570.96						
TOTAL This Period (last page this line n	umber only)								

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
111			for each category of the Detailed Summary Page	≭ 11a ☐ 11b ☐ 11c ☐ 12					
	y information copied from such Reports and Sta		ay not be sold or used by any pe						
or	for commercial purposes, other than using the n	ame and a	ddress of any political committee	to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	SC)					
A.	Full Name of Individual (Last, First, Middle Initia IMDIEKE, PATRICK, , ,	l) or Full O	rganization Name	Date of Receipt					
	Mailing Address 15900 WHITE PINE DRIVE			M M / D D / Y Y Y Y 11 26 2018					
	City WAYZATA	State MN	Zip Code 55391-2125	Transaction ID : PR2575347952617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		42.12					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Anlys Cnslt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
В.	Full Name of Individual (Last, First, Middle Initia TELESKY, MICHAEL, , ,	l) or Full O	rganization Name	Date of Receipt					
	Mailing Address 2602 PENNINGTON PLACE	1		M M / D D / Y Y Y Y 11 26 2018					
	City VALPARAISO	State IN	Zip Code 46383-9163	Transaction ID : PR2575350952617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		117.00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 897.00	P/R Deduction (\$39.00 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initia PHILLIPS, CHRISTINE, , ,	l) or Full O	rganization Name	Date of Receipt					
	Mailing Address 63 HERITAGE TRAIL			11 / D D / Y Y Y Y 26 2018					
	City SUFFIELD	State CT	Zip Code 06078-2376	Transaction ID : PR2575354052617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		41.91					
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) Regl Affs	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.20	P/R Deduction (\$13.97 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			201.03					
т	OTAL This Period (last page this line number or	ıly)	•						

FOR LINE NUMBER:

PAGE 138 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Ar	y information copied from such Reports and S for commercial purposes, other than using the	statements ma	ay not be sold or used by any political committee	erson for the purpose of soliciting contributions						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)						
Α.	Full Name of Individual (Last, First, Middle Ini BROWN, SALLY, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 192 HOMEWOOD DRIVE			11 26 / Y Y Y Y 2018						
	City CLINTON	State NY	Zip Code 13323-1512	Transaction ID : PR2575363652617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		42.12						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Ini ADAM, MATTHEW, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 15607 SUMMIT DRIVE			11 26 2018						
	City EDEN PRAIRIE	State MN	Zip Code 55347-2328	Transaction ID : PR2575364052617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		42.12						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Ini PIETROSIMONE, RALPH A, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 44 ROSES FARM ROAD	State	Zip Code	11 26 2018						
	City EAST HAVEN	CT	06512-4665	Transaction ID : PR2575373852617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.56						
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Sr N	upation (for Individual) twk Prgm Mgr	Memo Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 218.96	P/R Deduction (\$9.52 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			112.80						
т	OTAL This Period (last page this line number	only)								

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

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions see to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. CUNNINGHAM, BRIAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1711 ROLLING HILLS RE)		11 26 Y Y Y Y Y 2018						
City CHARLESTON	State WV	Zip Code 25314-2215	Transaction ID : PR2575375952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		400.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	P/R Deduction (\$200.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. CIAVARELLA, TRACY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 20 LORRAINE DRIVE			11 26 / Y Y Y Y 2018						
City BEACON FALLS	State CT	Zip Code 06403-1256	Transaction ID : PR2575377952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle DOLL, KATHLEEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3184 MULLIGAN LANE	0	7.0.4	11 / D D / Y Y Y Y Y 26 2018						
City CHASKA	State MN	Zip Code 55318-3226	Transaction ID : PR2575385152617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Mgmt NMT	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		557.50						
TOTAL This Period (last page this line num	ber only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1 ¹						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	NC)						
Full Name of Individual (Last, First, Middle Ir WINKLER, YASMINE, , ,		rganization Name	Date of Receipt						
Mailing Address 1429 WEST WIGWAM TRAI	L		11 26 Y Y Y Y Y 2018						
City MOUNT PROSPECT	State IL	Zip Code 60056-2940	Transaction ID : PR2575390952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		99.54						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3149.94	P/R Deduction (\$33.18 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir CROWE, ANGELA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 14 GLENBROOK DR			11 26 Y Y Y Y Y 2018						
City	State NJ	Zip Code	Transaction ID : PR2575391752617						
MENDHAM	INJ	07945-2306	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir	nitial) or Full C	rganization Name							
c. FENLON, STEVEN, , ,			Date of Receipt						
Mailing Address 4925 DREW AVE S			11 / D D / Y Y Y Y 2018						
City MINNEAPOLIS	State MN	Zip Code 55410-1743	Transaction ID : PR2575392052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		288.45						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			430.11						
TOTAL This Period (last page this line number	r only)								

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)					
			for each category of the Detailed Summary Page		11a		11b	11c	12	47
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia POST, LINDA, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 6520 JAYCOX ROAD				м м 11	/	D D D 26) / Y	ү ү 2018	Ŷ
	City GALENA	State OH	Zip Code 43021-9530					PR25753 leceipt th		
	FEC ID number of contributing federal political committee.	С					.	-	45	.00
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Ied Dir		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 345.00		P/R Dedu	uctio	on (\$15.	00 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initia BRATTEBO, CRAIG, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 10202 HARMONY CIRCLE				11 26 / Y Y Y Y Y 2018					Y
	City EDEN PRAIRIE	State MN	Zip Code 55347-5019					PR25753		
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period					_
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2019.15		9/R Dedu	uctic	on (\$96.	15 Bi-We	ekly)	
С.	Full Name of Individual (Last, First, Middle Initia UNDERWOOD, JEFFREY, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 14625 SW SUNRISE LN				11 ^M	1	D 26	/ Y	y y 2018	Y
	City TIGARD	State OR	Zip Code 97224-1209					PR25754		
	FEC ID number of contributing federal political committee.	С				U	,	, second the	750	
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Hith Plan CEO			Me	emo	Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1250.00		P/R Ded	uctio	on (\$250	0.00 Bi-W	/eekly)	
s	UBTOTAL of Receipts This Page (optional)			•			,	9	1083	.45
т	OTAL This Period (last page this line number or	ıly)	••••••	•			,			-

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ITEMIZED RECEIPTS			Use separate schedule(s)	(cł	(check only one)					
			for each category of the Detailed Summary Page		× 11a		11b	11c	12	·
	information copied from such Reports and Stat r commercial purposes, other than using the na									
· · · · · ·	AME OF COMMITTEE (In Full)									
'ι	InitedHealth Group Incorporated	PAC (U	nitedHealth Group PA	AC)						
	ull Name of Individual (Last, First, Middle Initial GOTHARD, CAROL, , ,) or Full Org	ganization Name		Date of	Re	ceipt			
Μ	ailing Address 16492 BROOKLANE BOULEVA	۶D			M M 11	1	26) / Y	ү ү 2018	Y
	ity IORTHVILLE	State MI	Zip Code 48168-8417					PR25754 Receipt th		
	EC ID number of contributing deral political committee.	С							114.	54
U	ame of Employer (for Individual) nited HealthCare Services Inc	Occup Dir Fi	pation (for Individual) n		Me	emo	Item			
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	′ear-to-Date ▼ 885.41		P/R Ded	uctio	on (\$38	.18 Bi-We	eekly)	
	ull Name of Individual (Last, First, Middle Initial MCGAVICK, KEVIN, , ,) or Full Org	ganization Name		Date of	Re	ceipt			
	ailing Address 705 NOTTINGHAM COURT	1			M M	1	26	/ Y	ү 2018	Y
	ity RANBERRY TOWNSHIP	State PA	Zip Code 16066-6527					PR25754 leceipt th		
	EC ID number of contributing deral political committee.	С			115.38					_
N Ui	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) us Dvlp		Me	emo	ltem			
R	eceipt For:	Aggregate Y								
-	Other (specify) V		884.58		P/R Deduction (\$38.46 Bi-Weekly)					
	ull Name of Individual (Last, First, Middle Initial) OHARA, KARIN, , ,) or Full Org	ganization Name		Date of	Re	ceipt			
_	ailing Address 1431 HENRY COURT				M M 11	/	26		2018	
	ity CHANHASSEN	State MN	Zip Code 55317-2200					PR25754 leceipt th		
	EC ID number of contributing deral political committee.	С					,	. ,	115.	38
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) VP Acctng			Me	emc	tem			
R	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 884.58				ucti	on (\$38	.46 Bi-We	eekly)	
SUE	STOTAL of Receipts This Page (optional)			•			, .		345.	30
тот	TAL This Period (last page this line number onl	y)		•	Γ.					

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	7				
Any information copied from such Reports and or for commercial purposes, other than using t								
NAME OF COMMITTEE (In Full)		any political committee	to solicit contributions from Such committee.	•				
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle I ACASTILLO, EFREM, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 307 JOLIET AVE			M M / D D / Y Y Y Y 11 26 2018]				
City SAN ANTONIO	State TX	Zip Code 78209-5243	Transaction ID : PR2575441352617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I B. MURLEY, MARY, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2775 COUNTRYSIDE DRIV			11 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City ORONO	State MN	Zip Code 55356-9675	Transaction ID : PR2575443652617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		0.10					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		5000.00	P/R Deduction (\$0.10 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I AXBERG, PAMELA, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1427 BROOKSHIRE COUR		Zin Onde	11 / D D / Y Y Y Y Y 11 26 2018]				
City NEW BRIGHTON	State MN	Zip Code 55112-6390	Transaction ID : PR2575443852617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		13.02					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 471.40	P/R Deduction (\$4.34 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)		,	590.02					
TOTAL This Period (last page this line number	er only)							

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	łC)					
Full Name of Individual (Last, First, Middle A. SPILKER, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 32 FITCH LANE			11 26 / Y Y Y Y 2018					
City NEW CANAAN	State CT	Zip Code 06840-5051	Transaction ID : PR2575446352617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Exec Sponsor	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. HAUTMAN, MILLA, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 410 SYCAMORE CIRCLE			11 / D D / Y Y Y Y 11 26 2018					
City PLYMOUTH	State MN	Zip Code 55441-5667	Transaction ID : PR2575447152617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle BOOKER, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 16632 HANSON BLVD NV			11 D D / Y Y Y Y 26 2018					
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447252617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) Gen Mgmt	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3846.00	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)	,		1730.70					
TOTAL This Period (last page this line numb	per only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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		for each category of the Detailed Summary Page	×	11a 13		11b 14	\vdash	11c 15	12	17			
Any information copied from such Reports and Stat or for commercial purposes, other than using the na				or the		oose of	f sol	iciting	contribu	tions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)										
Full Name of Individual (Last, First, Middle Initial FLOCCO, LOUIS, , ,) or Full O	rganization Name	D	Date of Receipt									
Mailing Address 3281 S VINE STREET				11 26 2018									
City CHANDLER	State AZ	Zip Code 85248-3845							4865261	7			
		05240-5045	_ A	mount	of	Each F	Rece	eipt this	s Period				
FEC ID number of contributing federal political committee.	С			_		y		-	936.	40			
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Underwriting		Me	emo	Item								
Receipt For:	Aggregate	Year-to-Date 🔻		2 Dedi	uctio	on (\$46	51 20	Bi-W	ookly)				
Other (specify)		1216.40		(Dout	uone	μ. (φ.	51.20		cckiy)				
Full Name of Individual (Last, First, Middle Initial B. GEHLBACH, THOMAS, , ,) or Full O	rganization Name	D	ate of	Re	ceipt							
Mailing Address 5380 YELLOWSTONE TRAIL		M M / D D / Y Y Y Y 11 26 2018											
City	State Zip Code				Transaction ID : PR2575448852617								
MINNETRISTA	MN	55331-9163	A	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С			745.50 Memo Item									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Underwriting											
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/F	P/R Deduction (\$248.50 Bi-Weekly)									
Other (specify) ▼		4245.22											
Full Name of Individual (Last, First, Middle Initial C. RUNICE, PAUL, , ,) or Full O	rganization Name	D	ate of	Re	ceipt							
Mailing Address 4622 BRUCE AVENUE			Т	^M 11	/	26		/ Y	y y 2018	Ŷ			
City	State	Zip Code		Trans	acti	ion ID :	: PR	25754	5155261	7			
EDINA	MN	55424-1123	A	mount	of	Each F	Rece	eipt this	s Period				
FEC ID number of contributing federal political committee.					,		y	46.					
Name of Employer (for Individual)		upation (for Individual)	1	Me	emo	Item							
United HealthCare Services Inc Receipt For:	1	Treasury	-										
Primary General	Aggregate	Year-to-Date ▼	P/F	R Dedi	uctio	on (\$15	5 38	Ri-We	ekly)				
Other (specify)		353.74				ω							
SUBTOTAL of Receipts This Page (optional)						,		,	1728.	04			
TOTAL This Period (last page this line number on	ly)		Ī			, , ,		-					

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I MCGLINCH, THOMAS, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 910 MIDWEST TRAIL NOR	TH		11 26 / Y Y Y Y Y 11 26						
City LAKE ELMO	State MN	Zip Code 55042-9658	Transaction ID : PR2575451652617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. MURPHY, ERIC, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5201 BLAKE ROAD			M M / D D / Y Y Y Y 11 26 2018						
City EDINA	State MN	Zip Code 55436-1127	Transaction ID : PR2575453752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90 Memo Item						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. PEGG, JACK, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4917 KAMA LANE NE			11 / D D / Y Y Y Y 26 / 2018						
City ALBERTVILLE	State MN	Zip Code 55301-3536	Transaction ID : PR2575456052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Underwriting	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			734.40						
TOTAL This Period (last page this line numbe	r only)								

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	Use separate schedule(s)	(check only one)										
111			for each category of the Detailed Summary Page		× 11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\overline{)}$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia SMITH, DAYNITA, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 4828 ISLAND VIEW DR						26	/ Y	ү ү 2018	Y		
	City MOUND	State MN	Zip Code 55364-9391						46065261	7		
FEC ID number of contributing federal political committee. Name of Employer (for Individual) O						O		eceipt in	is Period 42.	12		
			upation (for Individual) Acctng		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92		P/R Ded	uctio	on (\$14.	04 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia FRANZ, PHILLIP, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
Mailing Address 60 WALLACE ROAD		State Zip Code				11 / 26 / 2018						
	City MIDDLETOWN	NJ 07748-2932				Transaction ID : PR2575463152617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	Occupation (for Individual) HIth Plan CEO			0.10 Memo Item							
	Name of Employer (for Individual) United HealthCare Services Inc											
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00				P/R Deduction (\$0.10 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia PHINNEY, ASHLEY, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 5 GATEHOUSE ROAD				M M 11	/	26	/ Y	үүү 2018	Y		
	City GRANBY	State CT	Zip Code 06035-1922						46845261 is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		40.	89		
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) Dir Gen Mgmt				Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 324.19		P/R Ded	uctio	on (\$13.	.63 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•••••	•			,	,	83.	11		
т	OTAL This Period (last page this line number or	ıly)	••••••	-								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and								
or for commercial purposes, other than using the	ne name and a	duress of any political committee	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle I SADUSKE, NANETTE, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4276 NICOLET DRIVE			M M / D D / Y Y Y Y 11 26 2018					
City GREEN BAY	State WI	Zip Code 54311-9798	Transaction ID : PR2575470252617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		114.78					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 885.19	P/R Deduction (\$38.26 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I BARTHEL, THOMAS, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9713 HEMLOCK LANE NOP			11 / D D / Y Y Y Y Y 2018					
	State MN	Zip Code	Transaction ID : PR2575484352617					
MAPLE GROVE		55369-3665	Amount of Each Receipt this Period 42.12					
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Software Engineering	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Primary General Other (specify) ▼		322.92	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I MACLAUCHLAN, DANIEL, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 780 CENTRAL AVENUE			11 / D D / Y Y Y Y 2018					
City GLENSIDE	State PA	Zip Code 19038-1701	Transaction ID : PR2575492752617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.12					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			. 199.02					
TOTAL This Period (last page this line number	er only)	b						

SCHEDULE A (FEC Form 3X) DEOFIDTO

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)					
Full Name of Individual (Last, First, Middle A. STARMANN, LYNN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 11701 WEMBLEY RD			M M / D D / Y Y Y Y Y 11 26 2018					
City LOS ALAMITOS	State CA	Zip Code 90720-4235	Transaction ID : PR2575494552617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. RAMIREZ, MICHELE, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2569 HALL-JOHNSON RO APT 1428		Zin Codo	11 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City GRAPEVINE	State TX	Zip Code 76051-8707	Transaction ID : PR2575502452617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		96.45					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) nan Capital Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 503.50	P/R Deduction (\$32.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle SUNDAL, DEBORAH, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5109 WEST 66TH ST	State	Zip Code	11 26 2018					
EDINA	MN	55439-1429	Transaction ID : PR2575502952617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			253.83					
TOTAL This Period (last page this line numb	er only)							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
			, ,	13 14 15 16 17							
or	y information copied from such Reports and Statem for commercial purposes, other than using the name										
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (U	nitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initial) of WEBSTER, AMBER, , ,	Date of Receipt									
	Mailing Address 2115 VALLEY ROAD			M M / D D / Y Y Y Y 11 26 2018							
	,	tate	Zip Code	Transaction ID : PR2575504852617							
		A	92627-3976	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	;		42.12							
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) en Mgmt	Memo Item							
	Dessint For:		/ear-to-Date ▼	1							
	Primary General Other (specify) ▼	Joguto	322.92	P/R Deduction (\$14.04 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) of HAGEN, ALDIS, , ,	r Full Or	ganization Name	Date of Receipt							
	Mailing Address 152 OCEAN AVENUE	· · · · · · · · · · · · · · · · · · ·	M M / D D / Y Y Y Y 11 26 2018								
	,	tate	Zip Code	Transaction ID : PR2575506752617							
	BREEZY POINT	١Y	11697-1727	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	30.00									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) od Mgr	P/R Deduction (\$10.00 Bi-Weekly)							
	Receipt For: Agg Primary General Other (specify) ▼	gregate N	/ear-to-Date ▼ 230.00								
	Full Name of Individual (Last, First, Middle Initial) of DELREAL, MAGDALENA, , ,	r Full Or	ganization Name	Date of Receipt							
	Mailing Address 31 E OGDEN AVE UNIT 412			11 26 / Y Y Y Y 2018							
		tate L	Zip Code	Transaction ID : PR2575507752617							
		L	60525-2136	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	;		42.12							
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item							
	United HealthCare Services Inc		Reg Sls Dir								
		gregate Y	'ear-to-Date ▼								
	Other (specify)		322.92	P/R Deduction (\$14.04 Bi-Weekly)							
S	UBTOTAL of Receipts This Page (optional)		•	114.24							
т	OTAL This Period (last page this line number only).		•••••								

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		Use separate schedule(s)	(check only one)							
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
Any or 1	information copied from such Reports and Sta for commercial purposes, other than using the r	itements ma name and a	ay not be sold or used by any po ddress of any political committee	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated		InitedHealth Group PA	AC)						
/										
	Full Name of Individual (Last, First, Middle Initia JONES, RICHARD, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 7597 S OLD FARM LANE			11 26 2018						
	City MERIDIAN	State ID	Zip Code 83642-7132	Transaction ID : PR2575509652617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		42.12						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg SIs Dir	Memo Item						
Ì	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initia HOWELL, NICHOLAS, , ,	al) or Full O	rganization Name	Date of Receipt						
Mailing Address 300 ORANGE GROVE AVENUE				11 / D D / Y Y Y Y Y Y 11 26 2018						
		State CA	Zip Code	Transaction ID : PR2575510052617						
-	SOUTH PASADENA		91030-1616	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	576.90								
	Name of Employer (for Individual) Dptum Services, Inc		upation (for Individual) 9 Advisory Svc	P/R Deduction (\$192.30 Bi-Weekly)						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90							
	Full Name of Individual (Last, First, Middle Initia TSENG, LISA, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 55 TEMPLE PLACE UNIT 5			11 / D D / Y Y Y Y Y 2018						
	City BOSTON	State MA	Zip Code 02111-1300	Transaction ID : PR2575511452617 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		461.40						
Name of Employer (for Individual) Optum Services, Inc			upation (for Individual) Segment CEO	Memo Item						
Ì	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 538.32	P/R Deduction (\$153.80 Bi-Weekly)						
รเ	JBTOTAL of Receipts This Page (optional)			1080.42						
тс	TAL This Period (last page this line number or	וy)	••••••							

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	λC)						
Full Name of Individual (Last, First, Middle SHAPIRO, SHEILA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1727 EAST MYRTLE AVE	NUE		11 26 2018						
City PHOENIX	State AZ	Zip Code 85020-5529	Transaction ID : PR2575512052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		500.10						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.10	P/R Deduction (\$166.70 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JOSEPH, MOLLY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9209 GRAND SUMMIT BL			11 / 26 / Y Y Y Y Y 2018						
City	State TX	Zip Code	Transaction ID : PR2575521752617						
DRIPPING SPRINGS		78620-2882	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Primary General Other (specify) ▼		4416.00	P/R Deduction (\$192.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. DIRE, BERNADETTE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1 NORFOLK LANE			M M / D D / Y Y Y Y 11 26 2018						
City HOLLISTON	State MA	Zip Code 01746-2362	Transaction ID : PR2575522552617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1191.48						
TOTAL This Period (last page this line numb	per only)								

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12		
	y information copied from such Reports and Stat for commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full)		duress of any political committee	10 3					r commu		
\rangle	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initial KAPLAN, ERIC, , ,) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 193 PARTRIDGE LANDING				M M 11	1	26) / Y	ү ү 2018	Y	
5		StateZip CodeCT06033-2849						PR25758 Receipt th			
Optum Services, Inc M					<u> </u>			1 3 5-	42	00	
			ipation (for Individual) SIs SVP OptumI		Me	emc	tem				
			Year-to-Date ▼ 322.00		P/R Ded	uctio	on (\$14.	.00 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initial CROCKETT, DOUGLAS, , ,) or Full Or	rganization Name		Date of	Re	eceipt				
Mailing Address 5938 DEER HOLLOW COURT			-		м м 11	1	26	/ Y	2018	Y	
	City PITTSBORO	State IN	Zip Code 46167-9583					PR25755			
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Gen Mgmt			Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1328.50	P/R Deduction (\$57.14 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial COHEN, SANFORD, , ,) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 28 CRESCENT LANE				M M 11	1	D 26		2018	Ŷ	
	City LEVITTOWN	State NY	Zip Code 11756-2506					PR2575			
FEC ID number of contributing federal political committee.					<u> </u>		, .	9	576	90	
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Bus Seg Chief Med Off				Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 4422.90		P/R Ded	ucti	on (\$19	2.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)						, .		790.	32	
т	OTAL This Period (last page this line number on	ly)	•	-			-				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements mang the name and a	L ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Mido A. JETER, WILLIAM, , ,	•	rganization Name	Date of Receipt					
Mailing Address 21 PLAINFIELD STREE UNIT 3	Т		11 26 / Y Y Y Y 2018					
City JAMAICA PLAIN	State MA	Zip Code 02130-3632	Transaction ID : PR2575528152617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.			42.00					
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mide B. HUNTER, ROBERT, , ,		rganization Name	Date of Receipt					
Mailing Address 9236 PRESTON PLACE			11 / 26 / 2018					
City EDEN PRAIRIE	State MN	Zip Code 55347-3396	Transaction ID : PR2575528352617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.12					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Midc BASS, JOHN, , ,	lle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 265 CAVE LN			11 / D D / Y Y Y Y Y 2018					
City SAN ANTONIO	State TX	Zip Code 78209-2242	Transaction ID : PR2575528552617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		280.20					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) RVP SIs	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 719.72	P/R Deduction (\$93.40 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		364.32					
TOTAL This Period (last page this line nu	mber only)							

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			for each category of the Detailed Summary Page	×			11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson foi							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initia HERNANDEZ, MAYRENE, , ,	al) or Full Oi	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 850 SW 189TH AVENUE				11	/	D D 26	/ Y	Y Y 2018	Y	
	City PEMBROKE PINES	State FL	Zip Code 33029-6047						5 2925261 is Period		
	FEC ID number of contributing federal political committee.						7	-7	115.	38	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Sr M		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R	Dedu	uctio	on (\$38.	46 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initia HOLOVNIA, KRISTEN, , ,	al) or Full Oi	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 4610 LAKEVIEW DRIVE			11 26 Y Y Y Y Y 2018							
	City EDINA	State MN	Zip Code 55424-1518				-		3305261 is Period		
	FEC ID number of contributing federal political committee.	С				683.10					
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Deputy Gen Counsel			Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R	P/R Deduction (\$227.70 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia HILL, JANE, , ,	al) or Full Oi	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 34301 299TH PLACE				11 ^M	/	26		ү 2018		
	City AITKIN	State MN	Zip Code 56431-5914						53315261 is Period		
	FEC ID number of contributing federal political committee.	С					7	, y	115.	38	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP C		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R	Dedu	uctio	on (\$38.	46 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)						,	. ,	913.	86	
т	OTAL This Period (last page this line number or	nly)					,				

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	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17					
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Mic A. BAHL, ALISA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 41 BIRCHWOOD DRIV	Έ		M M / D D / Y Y Y Y 11 26 2018					
City GREENWICH	State CT	Zip Code 06831-3311	Transaction ID : PR2575534452617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.			57.69					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Sales	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)					
Full Name of Individual (Last, First, Mic B. MULLANEY, SUSAN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 169 HUNNEWELL STREET			11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City NEEDHAM	State MA	Zip Code 02494-1421	Transaction ID : PR2575535152617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		176.46					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	P/R Deduction (\$58.82 Bi-Weekly)					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 823.48						
Full Name of Individual (Last, First, Mic C. HAMLIN, THOMAS, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2800 NEWMAN			11 / D D / Y Y Y Y Y 2018					
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536252617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ehvrl Med Dir	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	nal)		349.53					
TOTAL This Period (last page this line nu	umber only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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			for each category of the Detailed Summary Page		×	11a			11	-	_	11c			- - -	
	y information copied from such Reports and Statem for commercial purposes, other than using the nam									se of	sol			ributi		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	PAC (L	Jni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) o SULLIVAN, EILEEN, , ,		rgar	nization Name	C	Date	of	Re	cei	ipt						
	Mailing Address 9675 WATERWAY PASSAGE DRIV			Zin Codo	11 26 2018 Transaction ID : PR2575537252617 Amount of Each Receipt this Period											
	5	state FL		Zip Code 34787-4957												
	FEC ID number of contributing federal political committee.	;			42.12											
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Gen Counsel	Memo Item											
	Receipt For: Age Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)											
В.	Full Name of Individual (Last, First, Middle Initial) o HAUF, NADINE, , ,	r Full O	Date of Receipt													
	Mailing Address 1008 WIMBERLY COURT				11 26 2018 Transaction ID : PR2575538852617											
		State Zip Code TX 75013-1195										25755 eipt thi				
	FEC ID number of contributing federal political committee.	;		30.00									0			
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Med Clin Ops						mo) Ite	em						
	Receipt For: Age Primary General Other (specify) ▼	gregate	P/R Deduction (\$10.00 Bi-Weekly)													
с.	Full Name of Individual (Last, First, Middle Initial) o	r Full O	rgar	nization Name		Date	of	Re	cei	ipt						
	Mailing Address 11700 PRESTON ROAD 660-602					[™] 11		/	L	26	1		2018	8		
	5	state TX		Zip Code 75230-6112								25755			,	
	FEC ID number of contributing federal political committee.	;				Inot			La		ece	eipt thi		45.0	0	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Clin Ops			Me	mo) It	em						
	Receipt For: Age Primary General Other (specify) Image: Constraint of the second secon	gregate	ate Year-to-Date ▼ 345.00					P/R Deduction (\$15.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			••••••					,		-	,	1	17.1	2	
Т	OTAL This Period (last page this line number only).			••••••					-			-		-		

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)		laitedl lealth Crown D	10)										
UnitedHealth Group Incorpora	ated PAC (I	United Health Group P	4C)										
Full Name of Individual (Last, First, Middle SUN, TONY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 8408 ENSLEY PLACE			M M / D D / Y Y Y Y 11 26 2018										
City LEAWOOD	State KS	Zip Code 66206-1402	Transaction ID : PR2575540252617										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄led Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 884.58	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. WENTZIEN, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6350 SUMMIT CIRCLE			11 / D D / Y Y Y Y Y 26 / 2018										
City CHANHASSEN	State MN	Zip Code 55317-9138	Transaction ID : PR2575540852617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.12										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svcs	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. STEINBRECHER, HOLLY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2101 LILAC LANE			11 26 2018										
City FRISCO	State TX	Zip Code 75034-3652	Transaction ID : PR2575544552617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		683.10										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4316.25	P/R Deduction (\$227.70 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			840.60										
TOTAL This Period (last page this line numb	er only)												

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			13 14 15 16 17 berson for the purpose of soliciting contributions te to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, M BALCK, AMY, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address N3681 VINE RD			M M / D D / Y Y Y Y 11 26 2018							
City FREEDOM	State WI	Zip Code 54913-6928	Transaction ID : PR2575548452617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, M DAIKEN, LAURIE, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5002 ONEIDA ST			11 / D D / Y Y Y Y 26 2018							
City DULUTH	State MN	Zip Code 55804-1642	Transaction ID : PR2575549652617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		57.69							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, M MORGAN, MARY, , ,	,	rganization Name	Date of Receipt							
Mailing Address 9900 WILBUR MAY F APT 705 City	PARKWAY	Zip Code	11 26 2018 Transaction ID : PR2575550852617							
RENO	NV	89521-4007	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.12							
Name of Employer (for Individual) United HealthCare Services Inc	Dir F	upation (for Individual) Proj Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (opti	onal)		141.81							
TOTAL This Period (last page this line	number only)									

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle A. STAFFORD, JEFF, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9413 W 131ST STREET			M M / D D / Y Y Y Y 11 26 2018										
City OVERLAND PARK	State KS	Zip Code 66213-3079	Transaction ID : PR2575561252617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1154.00	P/R Deduction (\$57.70 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. CHERRYHOMES, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5921 CREEK POINT			11 26 2018										
City MINNETONKA	State MN	Zip Code 55345-6224	Transaction ID : PR2575573552617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		40.44										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 324.63	P/R Deduction (\$13.48 Bi-Weekly)										
Full Name of Individual (Last, First, Middle MOCK, CURTIS, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 23 KELTON STREET			11 / D D / Y Y Y Y 26 / 2018										
City REHOBOTH	State MA	Zip Code 02769-2530	Transaction ID : PR2575579252617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		288.45										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional))		501.99										
TOTAL This Period (last page this line num	per only)												

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TEMIZED RECEIPTS		Use separate schedule(s)	(check only one)											
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11											
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, Middle WINSOR, ELIZABETH, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 57 WILDERS PASS			11 / 26 / Y Y Y Y 11 / 26 2018											
City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582852617 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		576.90											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle EULL, MARY ANN, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 11204 BEDFORDSHIRE A			11 / 26 / Y Y Y Y 2018											
City	State	Zip Code	Transaction ID : PR2575583752617											
POTOMAC	MD	20854-2003	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		41.70											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) cc Dir	Memo Item											
Receipt For:	Aggregate	Year-to-Date 🔻												
Other (specify) ▼		323.18	P/R Deduction (\$13.90 Bi-Weekly)											
Full Name of Individual (Last, First, Middle HARRIS, EUGENE, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 2832 HARBORSIDE WAY			11 / D D / Y Y Y Y 26 2018											
City SOUTHPORT	State NC	Zip Code 28461-8373	Transaction ID : PR2575585452617 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		115.38											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Brkr SIs	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional).			733.98											
TOTAL This Period (last page this line number	er only)													

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IT.			Use separate schedule(s)	(check only one)										
11	CIVILLED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Ar	y information copied from such Reports and Si	tatements m	hay not be sold or used by any po	13 14 15 16 17 erson for the purpose of soliciting contributions										
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	address of any political committee	to solicit contributions from such committee.										
	UnitedHealth Group Incorporate	UnitedHealth Group PA	NC)											
Α.	Full Name of Individual (Last, First, Middle Init LYON, JAMIE, , ,	ial) or Full C	Organization Name	Date of Receipt										
	Mailing Address 2069 CIRCLE DRIVE			11 / 26 / Y Y Y Y 2018										
	City KRONENWETTER	State WI	Zip Code 54455-9062	Transaction ID : PR2575585952617 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		42.12										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Init SOLLER, BRIAN, , ,	ial) or Full C	Organization Name	Date of Receipt										
	Mailing Address 17210 62ND AVE NORTH			11 26 / Y Y Y Y 2018										
		State MN	Zip Code	Transaction ID : PR2575586752617										
			55311-6406	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.38										
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	cupation (for Individual) P IT	Memo Item										
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼											
	Other (specify) ▼		, 884.58	P/R Deduction (\$38.46 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Init GISCH, SHAWNA, , ,	ial) or Full C	Organization Name	Date of Receipt										
	Mailing Address 320 PRESERVE COURT			11 / D D / Y Y Y Y 26 / 2018										
	City CHANHASSEN	State MN	Zip Code 55317-8717	Transaction ID : PR2575592152617 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		600.00										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Med Clin Ops	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 4400.00	P/R Deduction (\$200.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			757.50										
Г	OTAL This Period (last page this line number of	only)												

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ı ب	EMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)									
11	EIVILLED RECEIPIS		for each category of the Detailed Summary Page				11b	11c	12					
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or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit coi	ntrib	outions t	rom such	n committe	e.				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Ini JORGE, DEBORAH, , ,	tial) or Full C	rganization Name	Date of Receipt										
	Mailing Address 45 DELPHI ROAD				м м 11	/	26) / Y	2018	Y				
	City STAFFORD SPRINGS	State CT	Zip Code 06076-3405						59365261 is Period	7				
	FEC ID number of contributing federal political committee.	С		42.00										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prod	М	emo	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00]	P/R Ded	ucti	on (\$14.	.00 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Ini MILLER, MICHAEL, , ,	tial) or Full C	rganization Name		Date of	f Re	eceipt							
	Mailing Address 213 MAGILL DRIVE			M M	/	26	/ Y	2018	Y					
	City GRAFTON	State MA	Zip Code 01519-1328						9565261	1				
	FEC ID number of contributing federal political committee.	C	01313-1328		Amoun	tor	Each H	eceipt th	is Period 114.9	99				
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Business Development Exe				Memo Item								
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 884.92	P/R Deduction (\$38.33 Bi-Weekly)										
c.	Full Name of Individual (Last, First, Middle Ini CHIMENTO, LISA, , ,	tial) or Full C	rganization Name		Date of	f Re	eceipt							
	Mailing Address 524 FORT WILLIAMS PKWY	State	Zip Code		11 Trans		26		2018 59615261					
	ALEXANDRIA	VA	22304-1849	_					is Period	<u> </u>				
	FEC ID number of contributing federal political committee.	С			Ē		,	. ,	576.9	90				
	Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) g Dir Optuml Cons		M	emo	o Item							
	Primary General Other (specify)	Aggregate]	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	733.8	39				
Т	OTAL This Period (last page this line number	only)	b	-	.	T								

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171			Use separate schedule(s	/	(check only one)										
			for each category of the Detailed Summary Page		X 11a	11b		12							
	y information copied from such Reports and Sta for commercial purposes, other than using the					purpose									
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group) PAC))										
A.	Full Name of Individual (Last, First, Middle Initia IVERSON, LISA, , ,	al) or Full O	Prganization Name		Date of Receipt										
	Mailing Address 13341 CARRACH AVENUE				11 / D D / Y Y Y Y Y 11 26 2018										
	City ROSEMOUNT	State MN	Zip Code 55068-4774		Transaction ID : PR2575603252617 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						576	.90						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO		M	emo Iter	n								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90		P/R Ded	uction (\$	\$192.30 Bi-\	Veekly)							
в.	Full Name of Individual (Last, First, Middle Initia MCNUTT, DIANE, , ,	al) or Full O	organization Name		Date of Receipt										
	Mailing Address 11524 ZION ROAD	-		M M 11		26 / Y	ү ү 2018	Y							
	City BLOOMINGTON	State MN	Zip Code 55437-3636	-			D : PR2575 h Receipt tl								
	FEC ID number of contributing federal political committee.	С		576.90											
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I		Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	,	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initia COSTA, JOEL, , ,	al) or Full O	rganization Name		Date of	Receip	t								
	Mailing Address 775 WESTCHESTER AVENUE				M M 11	L	26	2018							
	City SHAKOPEE	State MN	Zip Code 55379-4557				D: PR2575								
	FEC ID number of contributing federal political committee.	С					,	346	.14						
	Name of Employer (for Individual) Optum Services, Inc	Occu VP F	upation (for Individual) Fin		M	emo Iter	m								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2538.36	P/R Deduction (\$115.38 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)			▶		. ,		1499	.94						
т	OTAL This Period (last page this line number o	nly)		🕨		-									

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		Use separate schedule(s)	(check	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	- F	11b	11c		2					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for				ng cont						
NAME OF COMMITTEE (In Full)		duress of any political commutes		CON	ibution	3 110111 30							
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle KING, SARAH, , ,	Initial) or Full C	organization Name	Da	Date of Receipt									
Mailing Address 116 CUTLER ROAD				11 26 / Y Y Y Y Y									
City GREENWICH	State CT	Zip Code 06831-2511				D : PR257 Receipt							
FEC ID number of contributing federal political committee.	С				-1		5	576.90					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI		Mer	no Item	1							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R	Deduo	ction (\$ ⁻	192.30 Bi	-Weekly)					
Full Name of Individual (Last, First, Middle STOCKHOWE, MARK, , ,	Initial) or Full C	organization Name	Da	te of I	Receipt								
Mailing Address 2108 MANOR DRIVE				11 26 2018 Transaction ID : PR2575619952617									
City BURNSVILLE	State MN	Zip Code 55337-2036											
FEC ID number of contributing federal political committee.	С					Receipt		15.38	;				
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) Sr Director, Advisory Svcs Aggregate Year-to-Date ▼			no Iterr	1							
Receipt For:													
Primary General Other (specify) ▼		884.58	P/R	Deduc	tion (\$3	38.46 Bi-V	Veekly)						
Full Name of Individual (Last, First, Middle C. WAULTERS, SCOTT, , ,	Initial) or Full C	organization Name	Da	te of I	Receipt								
Mailing Address 4 HEMLOCK COURT	1			11 ^M		26	Y Y 201						
City MANALAPAN	State NJ	Zip Code 07726-4254				D : PR257 Receipt							
FEC ID number of contributing federal political committee.	С			_	9		5	576.90)				
Name of Employer (for Individual) United HealthCare Services Inc	Occ COC	upation (for Individual) D		Mer	no Item	ı							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).					y	,	12	269.18					
TOTAL This Period (last page this line number	er only)				-			-					

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		1b	11c	12						
Any information copied from such Reports and or for commercial purposes, other than using t					se of s								
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle KELLEYBURNS, SUSAN, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 2279 STEARNLEE AVE			M M 11	11 26 / Y Y Y Y Y									
City LONG BEACH	State CA	Zip Code 90815-1934	Transaction ID : PR2575623052617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		41.70										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /anager Data Analytics	м	lemo It	tem								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Ded	luction	(\$13.90) Bi-We	ekly)						
Full Name of Individual (Last, First, Middle THOMPSON, BRIAN, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 17829 63RD AVE N													
City MAPLE GROVE	State MN	Zip Code 55311-4650						7					
		55311-4050	Amoun	t of Ea	ach Red	ceipt thi	s Period	_					
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		4422.90	P/R Ded	luction	(\$192.3	30 Bi-W	eekly)						
Full Name of Individual (Last, First, Middle C. WILSON, STEPHEN, , ,	Initial) or Full C	organization Name	Date o	f Rece	eipt								
Mailing Address 2420 DURHAM MANOR D	RIVE		M M 11	/	D D D 26	/ Y	y 2018	Y					
City FRANKLIN	State TN	Zip Code 37064-5266					3615261 s Period	7					
FEC ID number of contributing federal political committee.	С			. ,		y	308.7	9					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	M	lemo li	tem								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1681.28	P/R Deduction (\$102.93 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).						9	927.3	9					
TOTAL This Period (last page this line number	er only)					-9-							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17											
or for commercial purposes, other than using			erson for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle CLARK, TERRENCE, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 8 COOPER AVENUE			M11 D J Y											
City EDINA	State MN	Zip Code 55436-1315												
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Marketing Officer	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle CABANILLAS, MARIA, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 2411 WORDSWORTH ST			11 / D D / Y Y Y Y 26 2018											
City HOUSTON	State TX	Zip Code 77030-1833	Transaction ID : PR2575637352617 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		288.45											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1807.62	P/R Deduction (\$96.15 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. COLLINS, NEIL, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 8465 MISSION HILLS LAN	1E		M M / D D / Y Y Y Y 11 26 2018											
City CHANHASSEN	State MN	Zip Code 55317-7712	Transaction ID : PR2575637652617											
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item											
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			907.35											
TOTAL This Period (last page this line numb	per only)	•••••												

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11	EIVILED RECEIPIS		for each category of the Detailed Summary Page	×	ŀ	_	11b	11c	12						
	y information copied from such Reports and Sta			rson for		ourpo									
or	for commercial purposes, other than using the n	ame and a	ddress of any political committee	to solic	t con	tribu	itions f	rom such	n committ	ee.					
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initia DAVIS, BENTON, , ,	l) or Full O	organization Name	Date of Receipt											
	Mailing Address 9825 NORTH 53RD PLACE			11 26 2018 Transaction ID : PP2575630252617											
	City PARADISE VALLEY	State AZ	Zip Code 85253-1634	Transaction ID : PR2575639252617 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		576.90											
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM Clin Comnty Ntwk		Me	mo	ltem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3906.49	P/R	Dedu	ctio	n (\$192	2.30 Bi-W	/eekly)						
B.	Full Name of Individual (Last, First, Middle Initia NICOLL, DEREK, , ,	l) or Full O	organization Name	Date of Receipt											
	Mailing Address 155 MEADOWVIEW LANE	0	The Oaste	Ň	11	/	26	/ Y	ү ү 2018	Y					
	City MEDINA	State MN	Zip Code 55340-4510						4865261 is Period	7					
	FEC ID number of contributing federal political committee.	С			nount				173.	10					
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1327.10	P/R Deduction (\$57.70 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initia HERMAN, CRAIG, , ,	l) or Full O	organization Name	Da	ate of	Rec	eipt								
	Mailing Address 9609 WYOMING CIRCLE				11 ^M	1	D D D 26	/ Y	2018	Y					
	City BLOOMINGTON	State MN	Zip Code 55438-1628						6 5025261 is Period	7					
	FEC ID number of contributing federal political committee.	С			_	,	9	,	576.	90					
	Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Gen Mgmt		Me	mo	Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4230.60	P/R Deduction (\$192.30 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)					,	,	,	1326.	90					
т	OTAL This Period (last page this line number on	ly)	••••••												

SCHEDULE A (FEC Form 3X) DEAEIDTA

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee						
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. VANERT, MARK, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 221 OAKWOOD RD			M M / D D / Y Y Y Y 11 26 2018						
City HOPKINS	State MN	Zip Code 55343-8532	Transaction ID : PR2575650552617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. HAYHURST, JENNY, , ,		rganization Name	Date of Receipt						
Mailing Address 23A MOUNT HYGEIA ROA			11 / D D / Y Y Y Y 26 2018						
City FOSTER	State RI	Zip Code 02825-1434	Transaction ID : PR2575651852617						
		02020-1434	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		42.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		322.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SJODIN, CARA, , ,		rganization Name	Date of Receipt						
Mailing Address 1751 HAMPSHIRE AVENU		7. 0.4	11 / D D / Y Y Y Y 11 26 2018						
City SAINT PAUL	State MN	Zip Code 55116-2457	Transaction ID : PR2575652452617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		750.00						
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Prod	Memo Item							
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			834.12						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	- H	11b	11c	12	<u> </u>			
Any information copied from such Reports and or for commercial purposes, other than using the				the pu							
				conti	DULIONS						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I MCFANN, ELENA, , ,	nitial) or Full C	rganization Name	Dat	e of F	Receipt						
Mailing Address 18925 24TH AVENUE NOR	TH		M M / D D / Y Y Y Y 11 26 2018								
City PLYMOUTH	State MN	Zip Code 55447-2072					65475261 his Period	7			
FEC ID number of contributing federal political committee.	С			_	-y		576.	90			
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) In CEO		Men	no Item							
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I B. KANE, HEATHER, , ,	nitial) or Full C	rganization Name	Dat	e of F	Receipt						
Mailing Address 3621 N LAKEWOOD AVEN UNIT 3S			м 11	/ D		2018	Y				
City CHICAGO	State IL	Zip Code 60613-4842					65745261	7			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) VP Gen Mgmt			no Item						
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		442.29	P/R I	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I PIZZANO, KATHRYN, , ,	nitial) or Full C	rganization Name	Dat	e of F	Receipt						
Mailing Address 387 DEPOT HILL ROAD				11	- 1	6	2018				
City POUGHQUAG	State NY	Zip Code 12570-5763					66215261 his Period	7			
FEC ID number of contributing federal political committee.	С			_	y	5	369.	00			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations		Men	no Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1630.44	P/R	Deduc	ction (\$1	23.00 Bi-\	Weekly)				
SUBTOTAL of Receipts This Page (optional)					,		1003.	59			
TOTAL This Period (last page this line number	r only)					1.40					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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			Detailed Summary Page	×	11a	1	11b	11			2	
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	/ information copied from such Reports and for commercial purposes, other than using th							f solic	iting	cont	ributi	ons
	NAME OF COMMITTEE (In Full)											
\sum	UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	(C)								
Α.	Full Name of Individual (Last, First, Middle Ir HUXLEY, JEFFREY, , ,	nitial) or Full O	rganization Name		Date of Receipt							
	Mailing Address 2465 EDGERTON ST				M M / D D / Y Y Y Y Y 11 26 2018							
	City	State	Zip Code	Transaction ID : PR2575664252617								
	LITTLE CANADA	MN	55117-1674	_ '	Amount	t of	Each	Receip	ot this	s Pe	riod	
	FEC ID number of contributing federal political committee.	С							y		42.1	2
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process		M	emo	Item					
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼	322.92	P	/R Ded	uctio	on (\$14	4.04 Bi	-Wee	ekly)			
	Full Name of Individual (Last, First, Middle Ir WARSHAW, ROBERT, , ,	nitial) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 94 CARLSON DRIVE	11 / D D / Y Y Y Y Y 26 2018							Y			
	City	State	Zip Code		Trans	acti	on ID :	: PR25	7566	6555	2617	
	PORTLAND	СТ	06480-1699		Amount	t of	Each	Receip	ot this	s Pe	riod	
	FEC ID number of contributing federal political committee.	С							,	1	09.5	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.50	P/R Deduction (\$36.50 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Ir ZIGLER, JANICE, , ,	nitial) or Full O	rganization Name		Date of	^r Re	ceipt					
	Mailing Address 21 TREVINO CIRCLE				M M	/	D 26		Y	y 201	8 8	Y
	City	State	Zip Code		Trans	act	ion ID	: PR2	5756	6565	2617	,
	ANGEL FIRE	NM	87710	/	Amount	t of	Each	Receip	ot this	s Pe	riod	
	FEC ID number of contributing federal political committee.	С					,		9	5	576.9	0
	Name of Employer (for Individual)	Occi	upation (for Individual)	-	M	emc	Item					
	United HealthCare Services Inc		n Pres Ntwk Mgmt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify)		4422.90	P	P/R Ded	ucti	on (\$19	92.30 I	∃i-W€	eekly	()	
	JBTOTAL of Receipts This Page (optional)			 			y	-	9	7	28.5	2

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	Detailed Summary Page		Detailed Summary Page	×	11a] 11k	b	11c	12		
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	y information copied from such Reports and Sta for commercial purposes, other than using the r											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	Uni	itedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initia EVERETT, RICARDO, , ,	al) or Full C	Drgai	nization Name	Date of Receipt							
	Mailing Address 10507 WALPOLE LANE				M M / D D / Y Y Y Y 11 26 2018							
	City AUSTIN	State TX		Zip Code 78739-1554							6765261	7
	FEC ID number of contributing federal political committee.	C		10135-1354		mount	: of	Eac	ch Re	ceipt th	is Period 78.	21
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) k Contrctng		Me	emo	b Ite	em			
	Receipt For: Primary General Other (specify) ▼	ur-to-Date ▼ 286.77	P/R Deduction (\$26.07 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Drgai	nization Name		Date of	Re	eceip	pt			
	Mailing Address 8675 AZURE SKY DRIVE	11 / D D / Y Y Y Y 26 2018							Y			
	City LAS VEGAS	State NV		Zip Code 89129-2227	Transaction ID : PR2575669352 Amount of Each Receipt this Peri							7
	FEC ID number of contributing federal political committee.	С				-		-7	117.	00		
	Name of Employer (for Individual) Southwest Medical Assoc. Inc.	Occ Sr N	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 897.00	P/	R Dedu	uctic	on (S	\$39.00) Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initia BOGATYRENKO, VICTORIA, , ,	al) or Full C	Orgai	nization Name		Date of	Re	eceip	pt			
	Mailing Address 1 FRANKLIN STREET APT 2C					^M 11		L	26		ү 2018	
	City EXETER	State NH		Zip Code 03833-2816	A			-			67545261 is Period	7
	FEC ID number of contributing federal political committee.	С								,	288.	15
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt		Me	emo	o Ite	em			
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 1538.40	P/	R Ded	uctio	on ((\$96.1	5 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)			•••••	. [7		9	483.	6
т	OTAL This Period (last page this line number or	nly)						-		-		

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		Use separate schedule(s)	(check	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		H	_	11b	11c	12	<u> </u>			
Any information copied from such Reports and or for commercial purposes, other than using the			erson for		ourpo							
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle In MITCHELL, JILL, , ,	nitial) or Full C	rganization Name	Da	te of	Rec	eipt						
Mailing Address 11499 ASHLEY COURT			M M / D D / Y Y Y Y Y 11 26 2018									
City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251						57835261 is Period	7			
FEC ID number of contributing federal political committee.	С						-	115.:	38			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr		Me	mo l	Item						
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$38.46 Bi-Weekly)											
Full Name of Individual (Last, First, Middle I B. STIDMAN, CHRISTOPHER, , ,	nitial) or Full C	rganization Name	Da	te of	Rec	eipt						
Mailing Address 6504 CHEROKEE TRAIL		M	[™] 11	/	D D 26	/ Y	2018	Y				
City	State MN	Zip Code						8385261	7			
EDINA		55439-1109	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С	C Occupation (for Individual) Regn Pres Ntwk Mgmt			576.90							
Name of Employer (for Individual) United HealthCare Services Inc					mo l	ltem						
Receipt For:	Aggregate	Year-to-Date 🔻										
Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I OCHIPINTI, JOSEPH, , ,	nitial) or Full C	rganization Name	Da	te of	Rec	eipt						
Mailing Address 2751 MEETING PLACE				11 ^M	1	D D 26		2018 Y				
City ORLANDO	State FL	Zip Code 32814-6136						58575261 is Period	7			
FEC ID number of contributing federal political committee.	С			_	y		. ,	576.9	90			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	mo	ltem						
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 4422.90	P/R	Dedu	ictior	n (\$192	2.30 Bi-W	/eekly)					
SUBTOTAL of Receipts This Page (optional)		••••••						1269. ⁻	18			
TOTAL This Period (last page this line numbe	r only)											

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т			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □								
	ny information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions								
$\overline{)}$	NAME OF COMMITTEE (In Full)											
$\Big)$	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	.C)								
•	Full Name of Individual (Last, First, Middle Initia FINE, BRETT, , ,	l) or Full O	rganization Name	Date of Receipt								
А.	Mailing Address 707 STONINGTON ROAD											
			1	11 26 2018 Transaction ID : PR2575692852617								
	City SILVER SPRING	State MD	Zip Code 20902-1549									
			20902-1549	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.				1206.30								
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item								
	United HealthCare Services Inc	SVP	Corp Strat									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General Other (specify) ▼	· · · ·	3793.70	P/R Deduction (\$402.10 Bi-Weekly)								
_	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name									
в.	FARRELL, STEPHEN, , , Mailing Address 50 MAJOR DOANE RD			Date of Receipt								
	Maining Address 50 MAJOR DOANE RD			11 26 2018								
	City	State	Zip Code	Transaction ID : PR2575696252617								
	WELLFLEET	MA	02667-7836	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.38								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General	· · ·	884.58	P/R Deduction (\$38.46 Bi-Weekly)								
	Other (specify) v		004.00									
с.	Full Name of Individual (Last, First, Middle Initia MOORE, EDWARD, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 4354 GINGER DRIVE											
			710 0 1	11 26 2018								
	City MINNETRISTA	State MN	Zip Code 55331-2172	Transaction ID : PR2575702752617								
	FEC ID number of contributing			Amount of Each Receipt this Period								
	federal political committee.	С		42.12								
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item								
	Optum Services, Inc	VP I	nfo Security Risk Mgmt									
	Receipt For: Primary General	Aggregate	Year-to-Date V									
	Other (specify)	_ · · ·	322.92	P/R Deduction (\$14.04 Bi-Weekly)								
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s	UBTOTAL of Receipts This Page (optional)			1363.80								
т	OTAL This Period (last page this line number or	ıly)										
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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	D RECEIPTS	for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
or for comm	nercial purposes, other than using the			rrson for the purpose of soliciting contributions to solicit contributions from such committee.							
\	of COMMITTEE (In Full) dHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	C)							
	ne of Individual (Last, First, Middle Ini ES, JAMIL, , ,	itial) or Full C	organization Name	Date of Receipt							
	Address 9809 BROOKFORD ROAD	01-1-		11 / 26 / Y Y Y Y 2018							
City POTOM	AC	State MD	Zip Code 20854-2135	Transaction ID : PR2575705352617 Amount of Each Receipt this Period							
	number of contributing political committee.	С		43.26							
	Employer (for Individual)		upation (for Individual) P Sales	Memo Item							
	For: mary General her (specify) ▼	Aggregate	Year-to-Date ▼ 331.66	P/R Deduction (\$14.42 Bi-Weekly)							
	ne of Individual (Last, First, Middle Ini COCKI, ELIZABETH, , ,	itial) or Full C	organization Name	Date of Receipt							
Mailing A	Address 9746 SUNSET HILL DR	11 / D D / Y Y Y Y 26 2018									
City LONE T	REE	State CO	Zip Code 80124-6720	Transaction ID : PR2575705852617 Amount of Each Receipt this Period							
	number of contributing political committee.	С		683.10							
	f Employer (for Individual) ealthCare Services Inc		upation (for Individual) P Gen Mgmt	Memo Item							
	For: mary General her (specify) ▼	Aggregate	Year-to-Date ▼ 4316.25	P/R Deduction (\$227.70 Bi-Weekly)							
	ne of Individual (Last, First, Middle Ini ON, D ELLEN, , ,	itial) or Full C	organization Name	Date of Receipt							
	Address 400 STUART STREET 25D			11 26 / Y Y Y Y Y 2018							
City BOSTO	N	State MA	Zip Code 02116-5011	Transaction ID : PR2575708852617 Amount of Each Receipt this Period							
	number of contributing political committee.	С		576.90							
United H	Employer (for Individual) lealthCare Services Inc		upation (for Individual) 9 Human Capital	Memo Item							
	For: imary General her (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTA	L of Receipts This Page (optional)		•••••	1303.26							
TOTAL Th	is Period (last page this line number	only)	•								

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle CAMPBELL, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 635 N HIGHLAND			11 26 2018								
City ARLINGTON HEIGHTS	State IL	Zip Code 60004-5513	Transaction ID : PR2575715452617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		118.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Svc Acct Mgt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 394.60	P/R Deduction (\$39.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. VOLLRATH, MICHELLE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7647 MARKER ROAD			11 / D D / Y Y Y Y 11 26 2018								
City SAN DIEGO	State CA	Zip Code 92130-5616	Transaction ID : PR2575719852617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		170.52								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1329.42	P/R Deduction (\$56.84 Bi-Weekly)								
Full Name of Individual (Last, First, Middle CREED, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6813 67TH STREET NE			11 26 / Y Y Y Y 11 26 2018								
City ALBERTVILLE	State MN	Zip Code 55301-4643	Transaction ID : PR2575720552617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		41.91								
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) irector Technology	Memo Item								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.20	P/R Deduction (\$13.97 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			330.81								
TOTAL This Period (last page this line numb	er only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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				etailed Summary Page	×	11a		-	1b		11c	12	_
	y information copied from such Reports and State								se of				
	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ane and a	auures	ss of any political committee	ເບ S0	non cor	nrin	JUI	UIS T	101	n such	ourimitt	ee.
$\left \right\rangle$	UnitedHealth Group Incorporated	PAC (l	Unit	edHealth Group PA	C)								
۹.	Full Name of Individual (Last, First, Middle Initial) CRANDALL, KIM, , ,) or Full O	Drgani	zation Name	[Date of	Re	ece	eipt				
	Mailing Address 6016 BRIGIDS CLOSE DRIVE					м м 11	1	ſ	D D D 26		/ Y	y y 2018	Y
	City DUBLIN	State OH		Zip Code 43017-3428								3125261 is Period	7
	FEC ID number of contributing federal political committee.	С						-				42.	
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Clin Ops	Memo Item								
	Receipt For: // Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)										
B.	Full Name of Individual (Last, First, Middle Initial) HELLAND, ROBYN, , ,	zation Name	Date of Receipt										
	Mailing Address 9089 PARTRIDGE RD			Zip Code		м м 11	/	l	26	2	/ Y	2018	Y
	City MINNETRISTA	State MN								3385261 is Period	7		
	FEC ID number of contributing federal political committee.	С		42.12									
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir (Memo Item										
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial) OLSON, KRISTIN, , ,) or Full O	Drgani	zation Name		Date of	Re	ece	eipt				
	Mailing Address 5901 TRACY AVENUE					M M 11		l	26			2018	
	City EDINA	State MN		Zip Code 55436-2516								'3445261 is Period	7
	FEC ID number of contributing federal political committee.	С						,			9	41.	97
	Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncDir Compli							o li	tem				
	Receipt For: // Primary General Other (specify)	Aggregate	P	/R Ded	ucti	on	(\$13.	.99) Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)							,		ļ	9	126.:	21
Т	OTAL This Period (last page this line number onl	y)		•••••				,			-		

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. KNORR, MOLLY, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1144 PROSPECT AVENU			11 / D D / Y Y Y Y 11 26 2018						
City HARTFORD	State CT	Zip Code 06105-1124	Transaction ID : PR2575735452617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Risk Adjustment	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle GROSKLAGS, JEFFREY, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3233 TIMBERWOLF CIRC			11 26 / Y Y Y Y 2018						
City PRIOR LAKE	State MN	Zip Code 55372-3272	Transaction ID : PR2575735752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		288.45						
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		2211.45	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. KRAL, JESSICA, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4358 COOLIDGE AVE	01-1-	7. 0.4	11 / D D / Y Y Y Y 2018						
City SAINT LOUIS PARK	State MN	Zip Code 55424-1020	Transaction ID : PR2575736152617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		745.50						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4245.22	P/R Deduction (\$248.50 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona)		1149.33						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
			erson for the purpose of soliciting contributions						
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle MURRAY, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10 CIRCLE WEST			11 26 2018						
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736552617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item						
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. CESARETTI, GINA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5020 CIRCLE DOWN			11 / D D / Y Y Y Y 11 26 2018						
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) buty Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	·	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. STRICKLAND, JULIE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3207 SUNNYWOOD DRIV			11 / 26 / Y Y Y Y 2018						
City FULLERTON	State CA	Zip Code 92835-1858	Transaction ID : PR2575740952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Iktg Cnslt Year-to-Date ▼	Memo Item							
Receipt For: Primary General Other (specify)	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			1195.80						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12								
			13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. WAITE, STEPHANIE, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2501 S HORIZON DR			M M/D - D/YYY11262018Transaction ID : PR2575743252617Amount of Each Receipt this Period								
City APPLETON	State WI	Zip Code 54915-5851									
FEC ID number of contributing federal political committee.	С		42.12								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Mgr	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. PORTZ, THOMAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2119 SHERIDAN HILLS F	RD		M M / D D / Y Y Y Y 11 26 2018								
City	State MN	Zip Code	Transaction ID : PR2575744552617								
WAYZATA		55391-2327	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		42.12								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle PINERSKI, JENNIFER, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3424 BRYANT AVE S #2 MINNEAPOLIS	1		11 26 2018								
City MINNEAPOLIS	State MN	Zip Code 55408-4110	Transaction ID : PR2575752852617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		124.98								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 874.86	P/R Deduction (\$41.66 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		209.22								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				Detailed Summary Page		× 11a		11	1b	1	11c		12			
						13		14			15		16	17		
	y information copied from such Reports and S for commercial purposes, other than using the															
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (I	Un	itedHealth Group PA	C)											
۹.	Full Name of Individual (Last, First, Middle Init LAMOINE, DAVID, , ,	ial) or Full C		Date of Receipt												
	Mailing Address 6075 LINCOLN DR APT 110			11 26 2018												
	City EDINA	State MN		Zip Code 55436-1649		Trans Amount								7		
	FEC ID number of contributing federal political committee.	С				<u> </u>		-			- J -		115.3	88		
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) ctor Technology		Me	emo	o It	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 884.58		P/R Dedi	uctio	on	(\$38.4	46 E	3i-We	ekly	')			
3.	Full Name of Individual (Last, First, Middle Init FULTON, RYAN, , ,	ial) or Full C	Drga	nization Name		Date of	Re	ece	eipt							
	Mailing Address 805 LANEWOOD LANE NOR1					11 / 26 / Y Y Y Y 2018										
	City PLYMOUTH	State MN		Zip Code 55447-4347	_	Trans: Amount		-						7		
	FEC ID number of contributing federal political committee.	С		<u> </u>		-			-g-		41.7	0				
	Name of Employer (for Individual) Optum Services, Inc	Occ VP		Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 323.18						P/R Deduction (\$13.90 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Init JOHNSON, KURT, , ,	ial) or Full C	Drga	nization Name		Date of	Re	ece	eipt							
	Mailing Address 8351 E REDFIELD RD	1		1		M M 11	1	E	26	/	Y	20	18 [°]	Y		
	City SCOTTSDALE	State AZ		Zip Code 85260-3535		Trans Amount								7		
	FEC ID number of contributing federal political committee.	С				<u> </u>		y			g		115.5	50		
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) tor Data Science		Me	emc	o It	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 616.00		P/R Ded	ucti	ion	(\$38.	50 E	Bi-We	ekly	')			
s	JBTOTAL of Receipts This Page (optional)					-	_	,		_	9		272.5	8		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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17			Use separate schedule(s)				(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12					
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initia LOWE, JANET, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 2439 BROADMONT DRIVE				Min M / D D / Y									
	City CHESTERFIELD	State MO	Zip Code 63017-7801											
	FEC ID number of contributing federal political committee.	С			<u> </u>				46.	14				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) .cct Mgmt TPA		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 353.74	1	P/R Dedu	uctio	on (\$15.	38 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initia EKLO, BENJAMIN, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 3942 CAMPELLO CURVE				M M 11	1	26	/ Y	2018	Y				
	City CHASKA	State MN	Zip Code 55318-4639						6185261	7				
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 576.90											
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Fin				Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)											
C.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 309 DUNLEIGH COURT	Chata	Zin Oodo		11 ^M	/	26		2018					
	City MADISON	State MS	Zip Code 39110-6806						76615261 is Period	1				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		42.	12				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ir SIs & AM-Producing	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	1	P/R Ded	uctio	on (\$14.	04 Bi-We	eekly)						
s	UBTOTAL of Receipts This Page (optional)			•			, .		665. ⁻	16				
т	OTAL This Period (last page this line number or	ıly)	••••••	 ►			.	-						

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.							
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle CUNNINGHAM, MICHAEL, , ,	Initial) or Full O	Prganization Name	Date of Receipt							
Mailing Address 50 SOUTH 16TH STREET			11 26 Y Y Y Y 2018							
City PHILADELPHIA	State PA	Zip Code 19102-2534	Transaction ID : PR2575767852617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O NA Acct	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MONTOYA, MATTHEW, , ,	Initial) or Full O	organization Name	Date of Receipt							
Mailing Address 12370 BRADFORD DR	Ototo	The Oak	11 / 26 / Y Y Y Y 2018							
City PARKER	State CO	Zip Code 80134-3609	Transaction ID : PR2575777652617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle ROEPKE, KRISTIN , , ,	Initial) or Full O	organization Name	Date of Receipt							
Mailing Address 11828 200TH STREET			11 26 Y Y Y Y Y 11 26 2018							
City SILVER LAKE	State MN	Zip Code 55381-6069	Transaction ID : PR2575777752617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.12							
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir H	upation (for Individual) Human Capital Dev	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			661.02							
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using th												
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle In MULLINS, CHRISTOPHER, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 15560 SMITHFIELD PLACE			11 26 2018									
City CENTREVILLE	State VA	Zip Code 20120-4901	Transaction ID : PR2575778752617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		57.69									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)									
Full Name of Individual (Last, First, Middle II B. PAIK, JESSICA, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 18 BUTTONWOOD LANE E			11 26 2018 Transaction ID : PP2575783152617									
City RUMSON	State NJ	Zip Code 07760-1010	Transaction ID : PR2575783152617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		2000.00 Memo Item									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P CInt Mgmt Svc										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	P/R Deduction (\$1000.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In C. MADDUX, SUSAN, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 16426 FARMERS MILL LAN	E		M M / D D / Y Y Y Y 11 26 2018									
City CHESTERFIELD	State MO	Zip Code 63005-4549	Transaction ID : PR2575783852617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Pharm	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			2099.81									
TOTAL This Period (last page this line number	r only)											

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle BERGDOLL, JENNIFER, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 523 LOS DOLCES ST			11 26 Y Y Y Y Y 2018
City LAS VEGAS	State NV	Zip Code 89138-4559	Transaction ID : PR2575793752617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.38
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital Partner	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 884.58	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle 3. JELINEK, TROY, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 16601 S MOUNTAIN STON			11 / 26 / Y Y Y Y 2018
City PHOENIX	State AZ	Zip Code 85048-2080	Transaction ID : PR2575795652617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		166.65
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833,25	P/R Deduction (\$55.55 Bi-Weekly)
Full Name of Individual (Last, First, Middle MAURER, CARRIE, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 2899 EDGEWATER COVE			11 / D D / Y Y Y Y 11 26 2018
City WOODBURY	State MN	Zip Code 55125-8705	Transaction ID : PR2575798152617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			858.93
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12									
			, , ,	13 14 15 16 17									
	y information copied from such Reports and State for commercial purposes, other than using the nar												
\backslash	NAME OF COMMITTEE (In Full)												
\sum	UnitedHealth Group Incorporated		UnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) SANKEN, SARA, , ,	or Full C	Organization Name	Date of Receipt									
	Mailing Address 3018 ASPEN LAKE DRIVE			11 26 / Y Y Y Y 2018									
	City BLAINE	State MN	Zip Code	Transaction ID : PR2575798552617									
	BLAINE		55449-7517	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		42.12									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nan Capital Partner Mgr	Memo Item									
	Receipt For:		Year-to-Date ▼	—									
	Primary General Other (specify) ▼	ggroguto	322.92	P/R Deduction (\$14.04 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initial) WIX, LACOSTA, , ,	or Full C	Organization Name	Date of Receipt									
	Mailing Address 910 MANILA ST			M M / D D / Y Y Y Y 11 26 2018									
	City	State	Zip Code	Transaction ID : PR2575800052617									
	NASHVILLE	TN	37206-3437	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		112.50									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item									
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Year-to-Date ▼ , 887,50	P/R Deduction (\$37.50 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) GALIAN, SANDRA, , ,	or Full C	Organization Name	Date of Receipt									
	Mailing Address 120 SEQUAMS LANE WEST			M M / D D / Y Y Y Y 11 26 2018									
	City	State	Zip Code	Transaction ID : PR2575803252617									
	WEST ISLIP	NY	11795-4549	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		166.50									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item									
	Receipt For: A Primary General Other (specify)	1	Year-to-Date ▼ 832.50	P/R Deduction (\$55.50 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		>	321.12									
т	OTAL This Period (last page this line number only)	·····										

Use separate schedule(s)

FOR LINE NUMBER:

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17			Use separate schedule(s)	(check on	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12					
	y information copied from such Reports and Sta for commercial purposes, other than using the n				purp								
$\overline{)}$	NAME OF COMMITTEE (In Full)			<u></u>									
/	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia LEVINE, CAROL, , ,	l) or Full O	organization Name	Date of Receipt									
	Mailing Address 9100 LARKSPUR LANE			11 26 2018									
	City EDEN PRAIRIE	State MN	Zip Code 55347-2004					30335261	7				
	FEC ID number of contributing			Amoun	TOLE	ach Re	ceipt th	is Period					
	federal political committee.	C				-		576.9	90				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		1emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Dec	ductio	n (\$192.	30 Bi-W	/eekly)					
	Full Name of Individual (Loot, First, Middle, Initia		Argonization Name										
В.	Full Name of Individual (Last, First, Middle Initia HJERPE, ADAM, , ,	II) or full O	rganization Name	Date o	of Rec	ceipt							
	Mailing Address 13932 UTAH AVE S			11 26 2018 Transaction ID : PR2575806252617									
	City SAVAGE	State MN	Zip Code 55378-2159					30625261 is Period	7				
	FEC ID number of contributing federal political committee.	С		576.90									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mamt	Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼	_									
	Primary General Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	organization Name	Date o	of Rec	ceipt							
	Mailing Address 1608 SIENNA DR			M M	/	D D D 26	/ Y	2018	Y				
	City CEDAR PARK	State TX	Zip Code 78613-4061					80815261 is Period	7				
	FEC ID number of contributing federal political committee.	С					ceipt th	41.7	70				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Fech Proj-Prgm Mgmt	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Dec	ductio	n (\$13.9	0 Bi-W€	eekly)					
s	UBTOTAL of Receipts This Page (optional)		>			7	9	1195.8	50				
т	OTAL This Period (last page this line number or	ıly)	••••••				-						

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

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ידו	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
116			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	17							
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and a	y not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions to solicit contributions from such committee.								
<u> </u>	NAME OF COMMITTEE (In Full)											
$\langle \rangle$	UnitedHealth Group Incorporate	ed PAC (L	InitedHealth Group P	AC)								
А.	Full Name of Individual (Last, First, Middle In PRICCO, CHRISTOPHER, , ,	itial) or Full O	ganization Name	Date of Receipt								
	Mailing Address 9441 RIVER ROCK DRIVE S			11 / Y Y Y Y Y 11 26 2018								
	City CHANHASSEN	State MN	Zip Code 55317-2304	Transaction ID : PR2575808452617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		315.00								
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) <i>I</i> ed Clin Ops	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1029.00	P/R Deduction (\$105.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle In RUSSELL, LAURIE, , ,	itial) or Full O	ganization Name	Date of Receipt								
	Mailing Address 3108 SONIA DRIVE			11 / D D / Y Y Y Y 2018								
	City	State	Zip Code	Transaction ID : PR2575812152617								
	LAS VEGAS	NV	89107-3246	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		117.00								
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) t Affs Dir	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 897.00	P/R Deduction (\$39.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle In SCHENEMAN, STEPHEN, , ,	itial) or Full O	ganization Name	Date of Receipt								
	Mailing Address 428 8TH ST			11 / D D / Y Y Y Y 2018								
	City HUNTINGTON BEACH	State CA	Zip Code 92648-4629	Transaction ID : PR2575813452617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		428.55								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Iin Affordability	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 571.40	P/R Deduction (\$142.85 Bi-Weekly)								
				860.55	Ξ							

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

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IT.	EMIZED RECEIPTS		(ch	(check only one)									
	EIVILLED REVEILIS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	,			
Ar	y information copied from such Reports and S	statements ma	ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting	contribut	ions			
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit co	ntrib	outions 1	from such	n committ	ee.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Ini SHAPIRO, DAVID, , ,		organization Name		Date of Receipt								
	Mailing Address 5215 MORGAN AVENUE SO			м м 11	1	D 26) / Y	y y 2018	Y				
	City MINNEAPOLIS	State MN	Zip Code 55419-1026						31425261 is Period	7			
	FEC ID number of contributing federal political committee.	С			<u> </u>				576.9	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Μ	emo	ttem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90		P/R Ded	ucti	on (\$19	2.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Ini SEXTON, ELLEN, , ,	tial) or Full C	organization Name		Date of	f Re	eceipt						
	Mailing Address 14750 CRESTWOOD COURT			11 26 2018 Transaction ID : PR2575823252617									
	City ELM GROVE	State WI	Zip Code 53122-1603						2325261 is Period	7			
	FEC ID number of contributing federal political committee.	С								90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90]	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Ini MCNATT, RICHARD, , ,	tial) or Full C	organization Name		Date of	f Re	eceipt						
	Mailing Address 1120 KENSINGTON COURT				M M 11	1	26		2018 Y	Y			
	City ALPHARETTA	State GA	Zip Code 30022-6274						32495261 is Period	7			
	FEC ID number of contributing federal political committee.	С			Ē		y	. ,	115.:	38			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Ops	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate		P/R Ded	lucti	on (\$38	.46 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)		••••••	•			, .	. ,	1269. <i>*</i>	18			
T	OTAL This Period (last page this line number	only)		-	Γ.	Ţ							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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				or each category of the Detailed Summary Page	×	11a 13		11b		11c	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose		oliciting	contribu	tions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) BRADLEY, JOEL, , ,	or Full O	rgar	nization Name	Date of Receipt											
	Mailing Address 300 WHITE MOSS PLACE															
	City FRANKLIN	State TN		Zip Code 37064-8628							32585261	7				
		C	-	57004-0020	Amount of Each Receipt this Period											
	Name of Employer (for Individual)		upat	ion (for Individual)	-	Me	emo	b Ite	m		4					
	United HealthCare Services Inc	Sr N	Med	Dir												
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 424.58	P/	R Ded	uctio	on (\$	\$18.4	6 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initial) KAUFMAN, PHILIP, , ,	or Full O	Orgar	nization Name		Date of	Re	eceip	ot							
	Mailing Address 1580 BOHNS POINT ROAD				11 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y											
	City WAYZATA	State MN		Zip Code 55391-9309		Transaction ID : PR2575829852617 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		tion (for Individual) n CEO		Memo Item											
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial) HUNTLEY, MICHELLE, , ,	or Full O	Orgar	nization Name		Date of	Re	eceip	ot							
	Mailing Address 19503 HARMONY AVE					^M 11	/	D	26	/ Y	2018 [°]	Y				
	City ROGERS	State MN		Zip Code 55374-4843				-			33205261	7				
			_	5557 4-4045		mount	of	Eac	n Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С			H		_	9		y	576.	90				
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) Gen Counsel		M	emo	o Ite	m							
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)			••••••	[1209.	18				
т	OTAL This Period (last page this line number only	y)		····· •	ĺ			, ,		-						

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle II A. HARPER, JENNIFER, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8206 WEST 16TH STREET			M M / D D / Y Y Y Y 11 26 2018							
City SAINT LOUIS PARK	State MN	Zip Code 55426-1904	Transaction ID : PR2575835552617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle II B. JERDE, MARY, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 304 EAST VERA LANE			11 / D D / Y Y Y Y Y 26 2018							
City	State	Zip Code	Transaction ID : PR2575837452617							
TEMPE	AZ	85284-4036	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		Memo Item							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops								
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		884.58	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle II C. MANDELL, WILLIAM, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 720 MISSION HILL WAY			11 26 / Y Y Y Y							
City COLORADO SPRINGS	State CO	Zip Code 80921-2672	Transaction ID : PR2575837852617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) United HealthCare Services Inc	Occ Med	upation (for Individual) Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			199.62							
TOTAL This Period (last page this line number	r only)									

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b	b	11c	12				
۸n	y information copied from such Reports and Stateme	ante mav	not be sold or used by any po	13		14		15 Diciting	16 contribu	17			
	for commercial purposes, other than using the name												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (Ur	nitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) or BEESON, MARY JANE, , ,	⁻ Full Orga	anization Name	Date	Date of Receipt								
	Mailing Address 204 BLUE INDIGO CT		1	11 26 2018									
	City St PONTE VEDRA BEACH F	ate I	Zip Code 32082-6543						3955261	7			
		-	J2002-00 4 0	_ Amo	unt of	Eac	ch Rec	ceipt thi	s Period				
	FEC ID number of contributing federal political committee.					-		-	288.	45			
	Name of Employer (for Individual) Optum Services, Inc		ation (for Individual) n Mgmt		Mem	o Ite	em						
		regate Ye	ear-to-Date 🔻										
	Primary General Other (specify) ▼		2211.45	P/R D	educt	ion (S	\$96.15	5 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initial) or HARRISON, CHARLES, , ,	Full Orga	anization Name	Date	of Re	eceip	ot						
	Mailing Address 10603 MILLET SEED HILL		1	11 26 2018									
		ate 1D	Zip Code 21044-4150						4035261 s Period	7			
	FEC ID number of contributing federal political committee.					7		- -	42.	12			
	Name of Employer (for Individual) United HealthCare Services Inc	Occupa Med D	ation (for Individual) Dir	Memo Item									
	Receipt For: Agg Primary General Other (specify) ▼	pregate Ye	ear-to-Date ▼ 322,92	P/R Deduction (\$14.04 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) or WILLIAMS, DALE, , ,	Full Orga	anization Name	Date	of Re	eceip	ot						
	Mailing Address 121 CHOCTAW CIRCLE			M 1		/ D	26	/ Y	2018 [°]	Y			
	5	ate /N	Zip Code 55317-9505						4925261 s Period	7			
	FEC ID number of contributing federal political committee.					1		9	42.	12			
	Name of Employer (for Individual) Optum Services, Inc		ation (for Individual) j Mgmt		Mem	o Ite	em						
	Receipt For: Agg Primary General Other (specify)	pregate Ye	ear-to-Date ▼ 322.92	P/R D	educt	tion (\$14.04	4 Bi-We	ekly)				
S	UBTOTAL of Receipts This Page (optional)								372.	69			
	OTAL This Period (last page this line number only)		r	Ē		,		7					

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions a to collicit contributions from such committee							
or for commercial purposes, other than using	me name and a	duress of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. BOROCH, BLAIR, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 800 BELFRY DRIVE			11 26 2018							
City BLUE BELL	State PA	Zip Code 19422-1210	Transaction ID : PR2575849952617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		120.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item							
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 812.30	P/R Deduction (\$40.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle GOLDEN, WILLIAM, , ,	Initial) or Full C	Date of Receipt								
Mailing Address 106 SOUND COURT	1-		11 / D D / Y Y Y Y 26 2018							
City	State NY	Zip Code	Transaction ID : PR2575859352617							
NORTHPORT	IN Î	11768-3527	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D E&I Regions & Growth	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$96.15 Bi-Weekly)							
Other (specify)		4711.45								
Full Name of Individual (Last, First, Middle COTTINGTON, NYLE BRENT,		rganization Name	Date of Receipt							
Mailing Address 15050 47TH STREET NE			11 / D D / Y Y Y Y 2018							
City SAINT MICHAEL	State MN	Zip Code 55376-1613	Transaction ID : PR2575865352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		194.40							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1306.02	P/R Deduction (\$64.80 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			602.85							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) DEOFIDTO

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	-	Use separate schedule(s)	(check onl	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12					
Any information copied from such Reports an											
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit co	ntributions	from such	committe	e.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle A. ROSS, CHRISTY, , ,	e Initial) or Full C	rganization Name	Date o	f Receipt							
Mailing Address 211 JIM CANNON RD			11	M M / D D / Y Y Y Y Y							
City VAN ALSTYNE	State TX	Zip Code 75495-2803		Transaction ID : PR2575873352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С					115.5	0				
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Ops	M	emo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 616.00	P/R Deduction (\$38.50 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. PEZHMAN, PAYMAN, , ,	e Initial) or Full C	rganization Name	Date o	f Receipt							
Mailing Address 3016 GROVELAND SCH			M M 11	11 / D D / Y Y Y Y 11 26 2018							
City WAYZATA	State MN	Zip Code 55391-2816		action ID :			,				
FEC ID number of contributing federal political committee.	С	33391-2010	Amount of Each Receipt this Period 576.90								
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual)			Memo Item						
Receipt For:		Segment Gen Counsel Year-to-Date ▼		-							
Primary General Other (specify) ▼	Aggregate	4422.90	P/R Ded	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. LANGAN, PATRICK, , ,	e Initial) or Full C	rganization Name	Date o	f Receipt							
Mailing Address 405 MEADOW LANE			M M 11	/ D 1		2018	Y				
City BENSON	State MN	Zip Code 56215-1033		saction ID : t of Each F			7				
FEC ID number of contributing federal political committee.	С			- y - 1	,	291.0	00				
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) T		Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2231.00	P/R Dec	duction (\$97	.00 Bi-W€	eekly)					
SUBTOTAL of Receipts This Page (optiona				,	. ,	983.4	0				
TOTAL This Period (last page this line num	ber only)				1.40						

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 rerson for the purpose of soliciting contributions e to solicit contributions from such committee							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle RANDALL, RHONDA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 48 INTERLAKEN ROAD			11 26 / Y Y Y Y 2018							
City ORLANDO	State FL	Zip Code 32804-3418	Transaction ID : PR2575889652617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. SCHMUKER, ERIN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2575 TALL TIMBER COUR			11 26 / Y Y Y Y Y 2018							
City GRAND RAPIDS	State MI	Zip Code 49546-6787	Transaction ID : PR2575906652617							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date V	P/R Deduction (\$83.33 Bi-Weekly)							
Other (specify) v	L	, 249.99								
Full Name of Individual (Last, First, Middle ALT, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 133 PHEASANT FIELDS L	1		11 26 / Y Y Y Y Y 11 26 2018							
City MOORESTOWN	State NJ	Zip Code 08057-1431	Transaction ID : PR2575907352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		84.21							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Prov Svc	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.70	P/R Deduction (\$28.07 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			376.32							
TOTAL This Period (last page this line numb	er only)									

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

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle MARGHERIO, MICHAEL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 111 W 67TH STREET			11 26 2018							
City KANSAS CITY	State MO	Zip Code 64113-2405	Transaction ID : PR2575916352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. JENSENPFIEFFER, KIM, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9449 ASPEN RD			M M / D D / Y Y Y Y 11 26 2018							
City LAKEVILLE	State MN	Zip Code 55044-8148	Transaction ID : PR2575929752617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle MCGOLDRICK, CHRISTOPHER		rganization Name	Date of Receipt							
Mailing Address 48 MOUNTAIN TERRACE			11 26 2018							
City WEST HARTFORD	State CT	Zip Code 06107-1533	Transaction ID : PR2575930452617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs & Bus Dev	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			272.88							
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle MEDEIROS, MICHAEL, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name MEDEIROS, MICHAEL, , ,									
Mailing Address 7112 LANGMUIR DRIVE			11 / D D / Y Y Y Y 26 / 2018							
City MCKINNEY	State TX	Zip Code 75071-4606	Transaction ID : PR2575930652617							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Mgmt NA Accts	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. ZITZER, CHRISTOPHER, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2848 FRANCE AVE S			11 / D D / Y Y Y Y 26 2018							
City ST LOUIS PARK	State MN	Zip Code 55416-4204	Transaction ID : PR2575933352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. MATTERA, RICHARD, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 483 HIGHCROFT ROAD			11 / D D / Y Y Y Y Y 2018							
City WAYZATA	State MN	Zip Code 55391-1548	Transaction ID : PR2575938452617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional			809.28							
TOTAL This Period (last page this line num	ber only)	•••••								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Summary Page	×	11a 13] 11b		11c 15	12	17		
	y information copied from such Reports and Stater for commercial purposes, other than using the nan				or the		pose		oliciting	contribu	tions		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (I	UnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initial) STANDIG, LAUREN, , ,	D	Date of Receipt										
	Mailing Address 8660 FARLEY WAY				11 26 2018								
	5	State	Zip Code		Trans	acti	ion l	ID : P	R25759	3985261	7		
	FAIR OAKS	CA	95628-5352	A	mount	of	Eac	h Re	ceipt th	is Period			
	FEC ID number of contributing federal political committee.				45.00								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) d Dir	1	Me	emo	b Ite	m					
	Pagaint For:	areaste	Year-to-Date V										
	Primary General Other (specify) ▼	ggregate	330.00	P/I	P/R Deduction (\$15.00 Bi-Weekly)								
В.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drganization Name		Date of Receipt								
	Mailing Address 2315 BEVERLY ROAD				11 26 2018								
	City	State	Zip Code		Trans	acti	ion I	ID : P	R25759	4335261	7		
	SAINT PAUL	MN	55104-5003	A	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.			326.07 Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	- [
	Receipt For: Ag Primary General Other (specify) ▼	gregate	P/f	P/R Deduction (\$108.69 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drganization Name	D	ate of	Re	eceip	ot					
	Mailing Address 144 HOWELL DRIVE				11 26 2018								
		State	Zip Code		Trans	acti	ion	ID : P	R25759	95355261	7		
	BRANCHBURG	NJ	08876-3309	A	mount	of	Eac	h Re	ceipt th	is Period			
	FEC ID number of contributing federal political committee.	0			_		<u>y</u>		g	42.			
	Name of Employer (for Individual) United HealthCare Services Inc							m					
	Receipt For: Ag Primary General Other (specify)	ggregate	Year-to-Date ▼ 322.92	P/	P/R Deduction (\$14.04 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)									413.	19		
Т	OTAL This Period (last page this line number only))	·····	Ī			T		-				

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			13 14 15 16 17 verson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	5	<u> </u>								
VinitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P/	4C)							
Full Name of Individual (Last, First, Mic NEFF, WAYNE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1158 DESERT ROCK I	DRIVE		M M / D D / Y Y Y Y 11 26 2018							
City REXBURG	State ID	Zip Code 83440-3697	Transaction ID : PR2575961852617							
		03440-3097	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		428.55							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Sales	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 571.40	P/R Deduction (\$142.85 Bi-Weekly)							
Full Name of Individual (Last, First, Mic B. SALVO, GIANCARLO, , ,	dle Initial) or Full O	Date of Receipt								
Mailing Address 1027 SW 149 LANE			11 / D D / Y Y Y Y 2018							
City	State	Zip Code	Transaction ID : PR2575964952617							
SUNRISE	FL	33326-1957	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg SIs Dir	Memo Item							
Receipt For:		Year-to-Date ▼	-							
Primary General Other (specify) ▼		, 884.58	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Mic C. KISCH, DAVID, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7715 GIBRALTER TEF	RACE		11 / D D / Y Y Y Y 11 26 2018							
City APPLE VALLEY	State MN	Zip Code 55124-6124	Transaction ID : PR2575966052617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		45.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optio	nal)		588.93							
TOTAL This Period (last page this line nu	umber only)									

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group P/	ϞC)						
Full Name of Individual (Last, First, Middle DICELLO, MARK, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 619 SAND CRANE CT			M M / D D / Y Y Y Y 11 26 2018						
City BRADENTON	State FL	Zip Code 34212-5226	Transaction ID : PR2575977952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		42.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SIEBERT, GREGORY, , ,	Initial) or Full C	Date of Receipt							
Mailing Address 46 VIA BELLEZA									
City SAN CLEMENTE	State CA	Zip Code 92673-6910	Transaction ID : PR2575979652617						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 400.00	P/R Deduction (\$100.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. RICHARDS, ALISON, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 257 WEST GRANTLEY			11 / D D / Y Y Y Y 11 26 2018						
City ELMHURST	State IL	Zip Code 60126-2237	Transaction ID : PR2575987952617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? NA Strat Initiv	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			918.90						
TOTAL This Period (last page this line numb	er only)								

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and s or for commercial purposes, other than using the	Statements ma e name and a	A not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle In GOLD, PAMELA, , ,	itial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8370 DYNASTY WAY			11 26 / Y Y Y Y 2018							
City SALT LAKE CITY	State UT	Zip Code 84121-6089	Transaction ID : PR2575988652617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In B. SCHULTZ, STACY, , ,	itial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4012 S XERXES AVENUE			11 26 / Y Y Y Y Y 2018							
City MINNEAPOLIS	State MN	Zip Code 55410-1146	Transaction ID : PR2575990952617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) buty Gen Counsel	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	-							
Other (specify) ▼		884.58	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In CHAMBUNDABONGSE, KUNJO		rganization Name	Date of Receipt							
Mailing Address 9128 WOODLAND DRIVE			11 26 / Y Y Y Y Y 10 2018							
City MINNETRISTA	State MN	Zip Code 55375-4515	Transaction ID : PR2576000252617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 727.20	P/R Deduction (\$90.90 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			430.08							
TOTAL This Period (last page this line number	only)									

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(cł	neck only	y or	ne)						
11	EIVILED RECEIPIS		for each category of the Detailed Summary Page				11b	11c	12	<u> </u>			
	y information copied from such Reports and S												
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and a	doress of any political committee	e to s	SOLICIT COL	anno	utions t	rom sucr	1 Committ	ee.			
	UnitedHealth Group Incorporate	JnitedHealth Group PA	AC)										
А.	Full Name of Individual (Last, First, Middle Ini BRIGGS, MARC, , ,	tial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 13534 TUSCALEE HILL CIR				11 26 / Y Y Y Y Y								
	City DRAPER	State UT	Zip Code 84020-5653						00165261 is Period	7			
	FEC ID number of contributing federal political committee.	С							609.0	00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		M	emc	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4383.34]	P/R Ded	ucti	on (\$203	3.00 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Ini SANN, DAVID, , ,	vidual (Last, First, Middle Initial) or Full Organization Name D, , ,					ceipt						
	Mailing Address 8326 ELKO DRIVE			11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
	City ELLICOTT CITY	State MD	Zip Code 21043-6913						2645261	7			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual)	Occupation (for Individual)				Memo Item							
	Optum Services, Inc	Dir	Med Clin Ops		_								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 973.13	1	P/R Ded	uctio	on (\$42.	31 Bi-We	ekly)				
— C.	Full Name of Individual (Last, First, Middle Ini SONERHOLM, KIMBERLY, , ,	tial) or Full O	rganization Name		Date of	f Re	ceipt						
	Mailing Address 7210 HEGGIE AVE				M M 11	/	D D D 26		2018	Y			
	City LAS VEGAS	State NV	Zip Code 89131-3233						03325261 is Period	7			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	y	42.0	00			
	Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) KA VP SIs Acct Mgt		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 322.00				P/R Deduction (\$14.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•			, ,		777.9	93			
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11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	Г	17	
	y information copied from such Reports and S for commercial purposes, other than using the				or the		oose of	soliciting	g contrib		าร	
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (UnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Init HOLZERSPARR, CYNTHIA, , ,	ial) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 30 BRIDGHAM FARM ROAD			M M 11	1	26) / Y	ү ү 2018]		
	City RUMFORD		StateZip CodeRI02916-1304					PR2576				
	FEC ID number of contributing federal political committee.	С		[4	2.12		
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Sr I		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 322.92	P/	R Ded	uctio	on (\$14.	.04 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Init ADAMS, GAYLE, , ,	ial) or Full C	Drganization Name	C	ate of	f Re	ceipt					
	Mailing Address 39 CANYON RIDGE DRIVE			11 / D D / Y Y Y Y Y 26 2018]	
	City	State	Zip Code				-	PR2576		-		
	SANDIA PARK	NM	87047-8509	A	mount	t of	Each R	leceipt th	is Peric	bd		
	FEC ID number of contributing federal political committee.	С	288.45									
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) SVP Strategic Acct Mgmt				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2211.45	P/I	P/R Deduction (\$96.15 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init BYRNES, CHRISTOPHER, , ,	ial) or Full C	Drganization Name		ate of	f Re	ceipt					
	Mailing Address 3920 GLENWOOD STREET	-			^M 11	1	26) / Y	2018	Y	1	
	City DULUTH	State MN	Zip Code 55804-1403	A				PR2576 Receipt th				
	FEC ID number of contributing federal political committee.	С		ļļ			y .	, <u>,</u>	68	3.10		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Ops		M	emc	ltem					
	Receipt For: Primary General Other (specify)	4040.05					P/R Deduction (\$227.70 Bi-Weekly)					
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or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit co	ntrib	outions f	rom such	n committ	ee.		
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	InitedHealth Group PA	AC)								
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Α.	Full Name of Individual (Last, First, Middle Ini KANDALAFT, KEVIN, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 4189 WINDSOR POINT PLAC	CE			M M / D D / Y Y Y Y Y							
	City	State	\neg	11 26 2018 Transaction ID : PR2576043652617								
	EL DORADO HILLS	CA	Zip Code 95762-3797						is Period			
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	Name of Employer (for Individual)		upation (for Individual)		M	emo	tem					
	United HealthCare Services Inc Receipt For:	Hlth										
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	Other (specify) V		1807.62			uou	οπ (φου	no Br we	Jonry			
В.	Full Name of Individual (Last, First, Middle Ini STONE, LAURA, , ,	of Individual (Last, First, Middle Initial) or Full Organization Name										
	Mailing Address 4644 VENETO DRIVE			11 / D D / Y Y Y Y Y 26 2018								
	City	State	Zip Code		Trans	acti	ion ID :	PR25760	4515261	7		
	FRISCO	TX	75033-7135	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.00								
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Ntw		Memo Item								
	Receipt For:	Aggregate	Year-to-Date 🔻		1							
	Primary General Other (specify) ▼		322.00] '	P/R Deduction (\$14.00 Bi-Weekly)							
<u> </u>	Full Name of Individual (Last, First, Middle Ini GROENENDAAL, MICHAEL, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 1017 N EUCLID				11 ^M	/	26) / Y	y y 2018	Y		
	City OAK PARK	State IL	Zip Code 60302-1321						04625261	7		
			00302-1321	\neg	Amount	t of	Each F	leceipt th	is Period			
	FEC ID number of contributing federal political committee.	С			Ļ.	_	y		42.0)0		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Executive Compensation		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 322.00					P/R Deduction (\$14.00 Bi-Weekly)					
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17									
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	UnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Initia VINCENT, BRYAN, , ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 5025 YVONNE TERRACE	04-14-	7. 0.1	11 / D D / Y Y Y Y 11 26 2018									
	City EDINA	State MN	Zip Code 55436-2423	Transaction ID : PR2576049152617									
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initia MONICAL, KENT, , ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 9795 E PIEDRA DRIVE			11 26 2018									
	City SCOTTSDALE	State AZ	Zip Code 85255-9231	Transaction ID : PR2576051352617 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		576.90									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Medicare STARS	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia REED, BARTON, , ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 16716 MAYFIELD DRIVE	1		11 / D D / Y Y Y Y Y 26 2018									
	City EDEN PRAIRIE	State MN	Zip Code 55347-2242	Transaction ID : PR2576059252617 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		42.12									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Proc	upation (for Individual) d Dir	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
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	NAME OF COMMITTEE (In Full)			, 10 301					T COMMIN				
\rangle	UnitedHealth Group Incorporated	PAC (L	UnitedHealth Group PA	NC)									
A.	Full Name of Individual (Last, First, Middle Initia HUANG, JAMES, , ,) or Full O	organization Name		Date of	Re	ceipt						
	Mailing Address 6838 IDLEWOOD WAY				м м 11	/	D D D 26) / Y		Y			
	City EDEN PRAIRIE	State MN	Zip Code 55346-3519	A						7			
	FEC ID number of contributing federal political committee.	С			_		7		230.	76			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	upation (for Individual) Fin		Me	emo	Item						
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B.	Full Name of Individual (Last, First, Middle Initial REX, JOHN, , ,) or Full Oi	Organization Name		Date of	Re	ceipt						
	Mailing Address 503 HARRINGTON ROAD				м м 11	/		/ Y		Y			
	City WAYZATA	State MN	Zip Code 55391-1512							7			
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G CFO		Ме	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/I	R Dedu	11b 11c 12 14 15 16 e purpose of soliciting contribut 16 ontributions from such committee of Receipt 1 26 2018 nsaction ID : PR2576059952611 nt of Each Receipt this Period 230.7 Wemo Item eduction (\$76.92 Bi-Weekly) of Receipt 1 26 2018 nsaction ID : PR2576060052617 nt of Each Receipt this Period 576.5 Memo Item duction (\$192.30 Bi-Weekly) of Receipt 1 26 2018 saaction ID : PR2576085752617 nt of Each Receipt this Period 576.5 Memo Item duction (\$192.30 Bi-Weekly) of Receipt 1 26 2018 saaction ID : PR2576085752617 nt of Each Receipt this Period 590.7 Memo Item eduction (\$196.92 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial MCEWAN, JOSHUA, , ,) or Full Oi	Organization Name		Date of	Re	ceipt						
	Mailing Address 4711 WEST 28TH STREET				M M 11	/) / Y		Y			
	City SAINT LOUIS PARK	State MN	Zip Code 55416-1927	A			-			7			
	FEC ID number of contributing federal political committee.	С					y	. ,	590.	76			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP T	upation (for Individual) Tax		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4409.16	P/	R Dedu	uctio	on (\$190	6.92 Bi-V	Veekly)				
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	SC)									
Α.	Full Name of Individual (Last, First, Middle Initial) DUDA, MICHAEL, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 5208 RICHWOOD DRIVE												
	City EDINA												
			JJ430-ZJZZ	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		288.45									
	Name of Employer (for Individual) United HealthCare Services Inc			Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼			P/R Deduction (\$96.15 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) OLUJIC, TAMMY, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 14908 SE 66TH STREET												
	City			Transaction ID : PR2576097352617									
	BELLEVUE	WA	98006-5022	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		70.56									
	Name of Employer (for Individual) United HealthCare Services Inc		· · · · · ·	Memo Item									
	Receipt For: µ Primary General Other (specify) ▼	Aggregate		P/R Deduction (\$23.52 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) LAFIANDRA, CRAIG, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 4 WETHERELL HILL												
	City			Transaction ID : PR2576097852617									
	WOODSTOCK	CI	06281-1648	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		28.86									
	Name of Employer (for Individual) United HealthCare Services Inc			Memo Item									
	Receipt For: A Primary General Other (specify)	Aggregate	221.26	P/R Deduction (\$9.62 Bi-Weekly)									
s	JBTOTAL of Receipts This Page (optional)			387.87									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	y information copied from such Reports and State for commercial purposes, other than using the na					or the		rpc	ose of	soli	citing	contribu	tions		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) HARBISON, CECILIA, , ,	or Full O	rgar	nization Name	0	Date of Receipt									
	Mailing Address 233 MAGNOLIA STREET	I				11 / D D / Y Y Y Y 26 2018									
	City DRESHER	State PA		Zip Code 19025-2012								0015261			
	DRESHER			19023-2012	_ A	mour	nt of	E	ach Re	ece	ipt this	s Period			
	FEC ID number of contributing federal political committee.	С				41.70									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		N	lemo	οI	Item						
	Receipt For:	Agaregate	Yea	r-to-Date ▼	1										
	Primary General Other (specify) ▼		-	323.18	P/	R De	ducti	ior	n (\$13.9	90 I	Bi-Wee	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial) DAHL, KEVIN, , ,	or Full O	rgar	nization Name		Date d	of Re	ece	eipt						
	Mailing Address 4242 N CAPISTRANO DR APT 135					™ 11	/		D D 26	1	Y	2018	Y		
	City	State		Zip Code		Tran	sact	io	n ID : F	PR2	257610	0025261	7		
	DALLAS	ТХ		75287-4036	A	mour	nt of	E	ach Re	ece	ipt this	s Period			
	FEC ID number of contributing federal political committee.	С				42.12 Memo Item									
	Name of Employer (for Individual) Optum Services, Inc		upat Corr	tion (for Individual) npli											
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 294.84	P/R Deduction (\$14.04 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) JOHNSON, DARRIN, , ,	or Full O	rgar	nization Name		Date d	of Re	ece	eipt						
	Mailing Address 11 BERTON COURT					M 11	/	′	D D 26	1	Y	2018 [°]	Y		
	City	State		Zip Code		Tran	sact	tio	on ID : I	PR	25761	037526	17		
	MIDDLETOWN	DE		19709-9932	A	mour	nt of	E	ach Re	ece	ipt this	s Period			
	FEC ID number of contributing federal political committee.	С						,			9	576	90		
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP (ion (for Individual)		N	/lemo	0	ltem						
	Receipt For:	1	-	r-to-Date ▼	_										
	Primary General Other (specify)		-	4422.90	P/	P/R Deduction (\$192.30 Bi-Weekly)									
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		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)	primation copied from such Reports and Statements may not be sold or used by an operation commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political commercial purposes, other than using the name and address of any political commercial political committee. Primary State Zip Code of ther (specify) Occupation (for Individual) VP Gen Mgmt vipt For: Primary General Other (specify) ✓ Aggregate Year-to-Date V HARTFORD State Zip Code of address 45 STEELE ROAD C 06057-2621 ID number of contributing ral political committee. C 06057-2621 ID number of contributing ral political committee. C 322,92 Name of Individual (Last, First, Middle Initial) or Full Organization Name 322,92 Name of Individual (Last, First, Middle Initial) Occupation (for Individual) V HARTFORD C 322,92 Name of Individual (Last, First, Middle Initial) or Full Or									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle DIAMOND, TIFFANY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5 HARVEY DRIVE			M M / D D / Y Y Y Y Y 11 26 2018							
City GOFFSTOWN		· ·	Transaction ID : PR2576105552617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		115.38							
Name of Employer (for Individual) Optum Services, Inc		, , ,	Memo Item							
	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle CASEY, TAMMY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 45 STEELE ROAD			11 26 / Y Y Y Y Y							
			Transaction ID : PR2576107352617							
		06057-2621	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		i (,	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
		322.92	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle KIEWEL, NATHAN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1137 PRAIRIE VIEW DR S	SW .		11 26 / Y Y Y Y Y							
City HUTCHINSON			Transaction ID : PR2576117552617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Optum Services, Inc		1 ()	Memo Item							
Primary General	Aggregate	322.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			199.50							
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	y information copied from such Reports and State for commercial purposes, other than using the na					for the purpose of soliciting contributions									
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) SANCHEZ, VINCENT, , ,	or Full O	rgar	ization Name		Date of Receipt									
	Mailing Address 5025 BRANFORD COURT					11 / D D / Y Y Y Y Y 26 / 2018									
	City DUBLIN	State CA		Zip Code 94568-7241		Transaction ID : PR2576126952617									
		C		54500-7241	_	Amount of Each Receipt this Period 41.70									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		Memo Item									
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Yea	r-to-Date ▼ 323.18	F	P/R Deduction (\$13.90 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initial) STINE, KARL, , ,	or Full O	rgar	ization Name		Date of Receipt									
	Mailing Address PO BOX 265					11 / D D / Y Y Y Y 26 2018									
	City CRESSON	State PA		Zip Code 16630-0265		Transaction ID : PR2576133452617 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				121.65									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Med Dir			Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 243.30	F	P/R Deduction (\$40.55 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) KERAN, PATRICK, , ,	or Full O	rgar	ization Name		Date of Receipt									
	Mailing Address 6631 108TH CT					M M / D D / Y Y Y Y 11 26 2018									
		State MN		Zip Code		Transaction ID : PR2576137852617									
	BROOKLYN PARK FEC ID number of contributing	C		55445-6503		Amount of Each Receipt this Period 42.12									
	federal political committee.														
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) ech Proj-Prgm Mgmt		Memo Item									
		ggregate	Yea	r-to-Date ▼											
	Other (specify)		-7-	322.92	F	P/R Deduction (\$14.04 Bi-Weekly)									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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<u> </u>	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	AC)							
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I	Mailing Address 9 WEST WOODLAWN DRIVE				M M 11	/	26) / Y	Y 20	ү 018	Y
	City	State	Zip Code		Trans	acti	on ID :	PR2576	1389	95261	7
-	DESTREHAN	LA	70047-2535		Amount	t of	Each R	Receipt th	nis P	Period	
	FEC ID number of contributing federal political committee.	С					7			42.1	2
ī	Name of Employer (for Individual)	Occ	upation (for Individual)		M	emo	Item				
I	United HealthCare Services Inc	Dir,	Health Plan Operations								
Ī	Receipt For:	Aggregate	Year-to-Date V								
	Primary General			Р	/R Ded	uctio	on (\$14	.04 Bi-We	eekly	y)	
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-	Mailing Address 14924 PONDVIEW CIRCLE				M M	/) / Y	Y	Y	Y
					11		26				
(City	State	Zip Code		Trans	acti	on ID :	PR2576	1446	52617	,
-	WAYZATA	MN	55391-2249		Amount	t of	Each F	Receipt th	nis P	Period	
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ι	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel		M	emo	item				
I		Aggregate	Year-to-Date ▼								
	Other (specify) ▼		4422.90] P.	15 16 f soliciting contribution from such committee. f soliciting contribution from such committee. 2018 PR2576138952617 Receipt this Period 42.12 4.04 Bi-Weekly) 9 / 2018 PR2576144652617 Receipt this Period 576.90 92.30 Bi-Weekly) 92.30 Bi-Weekly) 92.30 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Init NELSON, STEVEN, , ,	ial) or Full C	Organization Name		Date of	Re	ceipt				
-	Mailing Address 640 LOCUST HILLS DRIVE				^M 11	/	26	J L	ing contributions uch committee. 76138952617 this Period 42.12 Weekly) Weekly) -Weekly) -Weekly) -Weekly)		
		State MN	Zip Code				-				7
-	WAYZATA		55391-1973		Amount	t of	Each R	Receipt th	nis P	Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y		_	16 contributior 2018 38952617 5 Period 42.12 42.12 42.12 42.12 42.12 576.90 576.90 2018 44852617 576.90 2018 44852617 576.90 2018 2	0
ī	Name of Employer (for Individual)	Occ	upation (for Individual)		M	emo	Item				
	United HealthCare Services Inc	EVF	UHC CEO								
Ī	Receipt For:	Aggregate	Year-to-Date V								
	Primary General			P	P/R Ded	uctio	on (\$19	2.30 Bi-V	Veek	dy)	
	Other (specify)		4422.90	4							
	JBTOTAL of Receipts This Page (optional)			• •			y .		-	1195.9	2

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	15 16 liciting contribution such committee / 2018 2576147552617 eipt this Period 117.00 Bi-Weekly) / 2018 2576147852617 eipt this Period 37.53 Bi-Weekly) / 2018 2576147852617 eipt this Period 37.53 Bi-Weekly) / 2018 2576306752617 eipt this Period 576.90	47				
			erson for the		pose of	soliciting	contribut					
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle In FRIDNER, JOHN, , ,	itial) or Full C	rganization Name	attegory of the minimary Page Ita 11b 11c 1 11c 1 <td></td> <td></td>									
Mailing Address 782 PENFIELD DR				/		/ Y		Y				
City CAROL STREAM	State IL	Zip Code 60188-4738				15 16 of soliciting contributions from such committee 15 16 15 16 16 16 16 16 16 10 16 16 16 10 117 2018 117 117 117	7					
FEC ID number of contributing federal political committee.	C						00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) NA VP SIs/Gen		/lemo	tem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 897.00	P/R De	ductio	on (\$39.)	15 16 of soliciting contribution s from such committee. 6 2018 2018 2018 : PR2576147552617 Receipt this Period 117.00 9.00 Bi-Weekly) 6 2018 : PR2576147852617 Receipt this Period 37.53 2.51 Bi-Weekly) 6 2.51 Bi-Weekly) 6 2018 : PR2576306752617 Receipt this Period 37.53 92.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In B. KEPNER, SHELLY, , ,	itial) or Full C	organization Name	Date o	of Re	ceipt							
Mailing Address 10165-222ND STREET EAS				P/R Deduction (\$3 Date of Receipt		/ Y		Y				
City LAKEVILLE	State MN	Zip Code 55044-9752					2018 R2576147552617 Peipt this Period 117.00 DBi-Weekly) Bi-Weekly) Bi-Weekly) 4 2018 R2576147852617 Peipt this Period 37.53 Bi-Weekly) 4 2018 R2576306752617 Peipt this Period 576.90	7				
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp		/lemo	ltem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 327.36	P/R Deduction (\$12.51 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In C. PAUNOVICH, VUKASIN, , ,	itial) or Full C	organization Name	Date o	of Re	ceipt							
Mailing Address 1209 KEITH RD				/		/ Y	16 g contributions g contributions g contributions 2018 147552617 his Period 117.00 eekly) 2018 147852617 his Period 37.53 eekly) 2018 147852617 his Period 37.53 eekly) 2018 1306752617 his Period 576.90 Weekly)	Y				
City WAKE FOREST	State NC	Zip Code 27587-7301						7				
FEC ID number of contributing federal political committee.	С			_	y 1	, ,	576.9	90				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Tech Off		/lemc	tem							
Receipt For: Primary General Other (specify)	Aggregate		P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)					, .	. ,	731.4	13				
TOTAL This Period (last page this line number	only)											

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using t			person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle BENSON, JEAN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 14951 HIGHLAND COURT	NE		11 26 / Y Y Y Y 2018								
City PRIOR LAKE	State MN	Zip Code 55372-4109	Transaction ID : PR2576310952617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		,	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. COMBSMORGAN, LAURIE, , ,	Initial) or Full O	for each category of the Detailed Summary Page I1a I1b I1c I2 may not be sold or used by any person for the purpose of soliciting contril i address of any political committee to solicit contributions from such comm (UnitedHealth Group PAC) Organization Name Date of Receipt Zip Code 55372-4109 Capanization (for Individual) Prin te Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) Organization Name Date of Receipt Zip Code Sign Address Zip Code Sign Address Sign Address P/R Deduction (\$192.30 Bi-Weekly) Organization Name Date of Receipt United V P/R Deduction (\$192.30 Bi-Weekly) Organization Name Date of Receipt Zip Code Transaction ID : PR2578719852 37064-5512 Memo Item P/R Deduction (\$19.20 Bi-Weekly) Organization Name Date of Receipt Memo Item P/R Deduction (\$19.20 Bi-Weekly) Organization Name Date of Receipt Memo Item P/R Deduction (\$19.20 Bi-Weekly) Organization Name Date of Receipt Zip Code Me									
Mailing Address 513 RIVERVIEW DRIVE											
City FRANKLIN	State TN		Transaction ID : PR2578719852617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		57.60								
Name of Employer (for Individual) United HealthCare Services Inc		,	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate		P/R Deduction (\$19.20 Bi-Weekly)								
Full Name of Individual (Last, First, Middle TIDMARSH, BRIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 14425 NORTH 15TH STRE		Zin Oode	11 26 2018								
City PHOENIX	State AZ		Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		42.06								
Name of Employer (for Individual) United HealthCare Services Inc			Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	323.01	P/R Deduction (\$14.02 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			676.56								
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1								
			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I LONG, PAUL, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 12352 PRINCETON AVE			11 26 / Y Y Y Y Y 2018								
City EDEN PRAIRIE	State MN	Zip Code 55347-1936	Transaction ID : PR2578734952617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I EGELAND, DANIEL, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2659 E LAKE OF THE ISLE			11 / 26 / Y Y Y Y 2018								
City			Date of Receipt Date of Receipt Amount of Each Receipt this Period P/R Deduction (\$38.46 Bi-Weekly) Date of Receipt P/R Deduction (\$38.46 Bi-Weekly) Date of Receipt P/R Deduction (\$416.66 Bi-Weekly) P/R Deduction (\$416.66 Bi-Weekly) P/R Deduction (\$416.66 Bi-Weekly) Date of Receipt P/R Deduction (\$416.66 Bi-Weekly) P/R Deduction (\$416.66 Bi-Weekly) P/R Deduction (\$416.66 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi-Weekly) P/R Deduction (\$14.42 Bi								
MINNEAPOLIS	State Zip Code MN 55408-1052	55408-1052	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		1249.98								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3749.94	P/R Deduction (\$416.66 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C. STRODE, KURT, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 15 MIRA SEGURA											
City RANCHO SANTA MARGARITA	State CA	Zip Code 92688-4113									
FEC ID number of contributing federal political committee.	С		43.26								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 331.66	P/R Deduction (\$14.42 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1408.62								
TOTAL This Period (last page this line numbe	r only)										

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	Use separate schedule(s)	(check only one)											
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)	ated PAC (I	InitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle A. ASNER, BARTLEY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 25 OFFSHORE			11 26 2018										
City NEWPORT BEACH	State CA	Zip Code 92657-2162	Transaction ID : PR2578819452617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Physn	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. HALTIWANGER, RACHEL, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3011 GRUNION LANE			11 / D D / Y Y Y Y 11 26 2018										
City	State TN	Zip Code	Transaction ID : PR2578820252617										
SPRING HILL		37174-1551	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		42.03										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		323.01	P/R Deduction (\$14.01 Bi-Weekly)										
Full Name of Individual (Last, First, Middle DUFFEY, KRISTY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 42095 N 109TH PLACE			11 / 26 / Y Y Y Y 2018										
City SCOTTSDALE	State AZ	Zip Code 85262-3293	Transaction ID : PR2578823252617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Clin Off	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			1195.83										
TOTAL This Period (last page this line number	er only)												

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information conied from such	Reports and Statements m			13 r the i		14	15	16	17				
Any information copied from such or for commercial purposes, other	than using the name and a												
NAME OF COMMITTEE (In Ful UnitedHealth Group II		UnitedHealth Group PA	AC)										
Full Name of Individual (Last, F CIAVOLA, LAURA, , ,	irst, Middle Initial) or Full C	Organization Name	D	Date of Receipt									
Mailing Address 1686 WILDFIR	E LANE			11 26 / Y Y Y Y 2018									
City FRISCO	State TX	Zip Code						82435261					
		75033-7325	Ai	mount	of	Each Re	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	C			576.90									
Name of Employer (for Individua United HealthCare Services Inc	,	upation (for Individual) Segment COO	70	Me	emo	Item							
Receipt For:	I	Year-to-Date ▼	_	-									
Primary General Other (specify) ▼		4422.90	P/F	R Dedu	uctio	on (\$192	.30 Bi-V	Veekly)					
Full Name of Individual (Last, F 3. BUSBEE, NATHANAEL,		Organization Name	D	ate of	Re	ceipt							
Mailing Address 611 ORPINGTO	ON RD			11 / D D / Y Y Y Y Y 11 26 2018									
City	State	Zip Code	-	Transa	acti	on ID : F	R2578	82675261	7				
BALTIMORE	MD	21229-2128	Ai	mount	of	Each Re	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	C			115.38									
Name of Employer (for Individu United HealthCare Services Inc	,	upation (for Individual) Bus Process		Memo Item									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, F C. MILLER, TRACI, , ,	irst, Middle Initial) or Full C	Organization Name	D	ate of	Re	ceipt							
Mailing Address 729 PINE TRA	IL			^M 11	/	26	/ Y	2018	Y				
City	State	Zip Code		Trans	acti	ion ID : F	PR2578	82995261	7				
ARNOLD	MD	21012-1628	Ai	mount	of	Each Re	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	C					,		115.	38				
Name of Employer (for Individua	al) Occ	upation (for Individual)	10	Me	emo	Item							
Optum Services, Inc	VPI	Med Clin Ops											
Receipt For:		Year-to-Date V											
Other (specify)		884.58	P/R Deduction (\$121.80 Bi-We										
SUBTOTAL of Receipts This Pag	e (optional)					,		807.	66				
TOTAL This Period (last page this	s line number only)	•	Ē			,	-,-						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	IEIVIIZED RECEIPIS		Detailed Summary Page			X 11a		11	b	11c		12				
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An or	y information copied from such Reports and St for commercial purposes, other than using the	atements m name and a	ay no addre	ot be sold or used by any pe ss of any political committee	ersor to s	n for the solicit cor	pur htrib	pos putic	e of s	solicitin om suc	g co ch co	ntribu ommitt	tions ee.			
$\langle \rangle$	NAME OF COMMITTEE (In Full)															
\rangle	UnitedHealth Group Incorporate	d PAC (Uni	edHealth Group PA	(C)											
١.	Full Name of Individual (Last, First, Middle Initi FARMER, RACHEL, , ,	al) or Full C	Drgan	ization Name		Date of	Re	ecei	pt							
	Mailing Address 1846 SOUTH COLUMBINE ST	REET				^M 11	1	Г	26			ү 018	Y			
	City	State		Zip Code		Transaction ID : PR2595208352617										
	BATON ROUGE	LA		70808-5227	_	_ Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						-		-9-		173.	07			
	Name of Employer (for Individual) United HealthCare Services Inc		cupati Govt	on (for Individual) Affs		M	emc	o Ite	əm							
	Receipt For:	Aggregate Year-to-Date ▼														
	Primary General Other (specify) ▼			1326.87		P/R Ded	uctio	on	(\$57.6	9 Bi-W	eekl	y)				
	Full Name of Individual (Last, First, Middle Initi ELLIS, DENNIS, , ,	al) or Full C	Drgan	ization Name		Date of	Re	ecei	pt							
	Mailing Address 6001 DRIPPING SPRINGS					M M / D D / Y Y Y Y 11 26 2018										
	City	State		Zip Code		Trans	acti	ion	ID : F	R2595	209 ⁻	15261	7			
	FRISCO	ТХ		75034-4039		Amount		-								
	FEC ID number of contributing federal political committee.	С				49.14							14			
	Name of Employer (for Individual) United HealthCare Services Inc	Occ KA		M	emc	o Ite	əm									
	Receipt For: Primary General Other (specify) ▼	Aggregate		P/R Deduction (\$16.38 Bi-Weekly)												
	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Drgan	ization Name												
	LONIGRO, ANTHONY, , , Mailing Address 3186 WEST CANYON AVE					Date of	Re		pt 26	/) 018	Y			
	City	State		Zip Code	\neg	1.00	act	ion		PR2595	1.0	1.00	7			
	SAN DIEGO	CA		92123-5426	F	Amount										
	FEC ID number of contributing federal political committee.	С						u				115.	38			
	Name of Employer (for Individual)	000	nunati	on (for Individual)	-	M	emo	o Ite	em							
	Optum Services, Inc		Gen l	()												
	Receipt For:	1		-to-Date V												
	Primary General Other (specify)			884.58	P/R Deduction (\$38.46 Bi-Weekly)											
	JBTOTAL of Receipts This Page (optional)				_		-	y	-			337.	59			

SCHEDULE A (FEC Form 3X) DEAEIDTA

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
> UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)						
 Full Name of Individual (Last, First, Middle BOWES, DOUGLAS, , , 	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 583 BATTERY STREET 9	08N		11 26 2018						
City	State	Zip Code	Transaction ID : PR2595226952617						
SEATTLE	WA	98121-1682	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		124.98						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Hlth	Plan CEO							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼		374.94	P/R Deduction (\$41.66 Bi-Weekly)						
			-						
Full Name of Individual (Last, First, Middle SNYDER, MARY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1075 BOSTON POST RD			11 26 2018						
City MADISON	State CT	Zip Code 06443-3363	Transaction ID : PR2595229352617						
		00443-3303	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date V	1						
Other (specify)		4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. DUCAYET, JULIA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5508 HARRIET AVE S			11 26 2018						
City	State	Zip Code	Transaction ID : PR2595232952617						
MINNEAPOLIS	MN	55419-1830	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) Optum Services, Inc	Occ Dir M	upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		744.00						
TOTAL This Period (last page this line numb	per only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)		adress of any political committee							
UnitedHealth Group Incorpora	ited PAC (UnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle SCOTT, WESTON, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 16333 VANCE JACKSON APT 1215			11 26 <u>2018</u>						
City	State	Zip Code	Transaction ID : PR2601125352617						
SAN ANTONIO	TX	78257-5090	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		92.31						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir	Memo Item						
Receipt For:	I	Year-to-Date ▼							
Primary General	Aggregate		P/R Deduction (\$30.77 Bi-Weekly)						
Other (specify) v	L	707.71							
Full Name of Individual (Last, First, Middle B. SHORT, MARIANNE, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 2215 SUMMIT AVENUE			11 26 2018						
City	State	Zip Code	Transaction ID : PR2601133552617						
SAINT PAUL	MN	55105-1002	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Gen Counsel	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		, 4422,90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. PATRICK, ALLEN, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 225 W ESCALONES			11 26 2018						
City	State	Zip Code	Transaction ID : PR2601136852617						
SAN CLEMENTE	CA	92672-5102	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt	Memo Item						
Receipt For:	I	Year-to-Date ▼							
Primary General Other (specify)		322.92	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			711.33						
TOTAL This Period (last page this line number	er only)	······							

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		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	× 11a 11b 11c 12					
			13 14 15 16 17 erson for the purpose of soliciting contributions a to collicit contributions from such committee					
or for commercial purposes, other than using t	me name and a	duress of any political committee	e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle SWANSON, AMY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 621 SPARROW WAY			M = M / D = D / Y = Y = Y = Y Y					
City WADSWORTH	State OH	Zip Code 44281-7716	Transaction ID : PR2601140752617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		288.45					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle OLDHAM, LORA, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 20039 E BRIGHTWAY			11 / D D / Y Y Y Y Y 26 2018					
City	State	Zip Code	Transaction ID : PR2601147652617					
		60448-1404	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.86					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg Dir of Brkr Sls	Memo Item					
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$9.62 Bi-Weekly)					
Other (specify) v	L	, 221.26						
Full Name of Individual (Last, First, Middle MCBRIEN, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 305 HONEYBEE DRIVE	State	Zip Code	11 26 2018 Transaction ID : PR2601148952617					
WEXFORD	PA	15090-8699	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.12					
Name of Employer (for Individual) United HealthCare Services Inc	Dir I		Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			359.43					
TOTAL This Period (last page this line number	er only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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			Detailed Summary Page	×	11a 13] 11 14		11c		12	17	
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pos	se of s	soliciti		ontribut	ons	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated												
A.	Full Name of Individual (Last, First, Middle Initial MOORE, DOUGLAS, , ,) or Full O	organization Name		Date of	Re	ecei	pt					
	Mailing Address 3900 BLACKJACK OAK LANE				11 26 / Y Y Y Y Y 11 26								
	City PLANO	State TX	Zip Code 75074-7790									,	
	FEC ID number of contributing federal political committee.	С			_		-		-,		42.1	2	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Hlthcare Econ		Me	emo	o Ite	əm					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/	P/R Deduction (\$14.04 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initial) LESTER, SHAUNA, , ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 1747 228TH PL SE	State	Zin Code	11 26						Y Y 2	018	Y	
	City SAMMAMISH	State WA	Zip Code 98075-7250	A	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			42.12							2	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgmt		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/	Date of Receipt 11 26 2018 Transaction ID : PR2601149652617 Amount of Each Receipt this Period 42.1 Memo Item P/R Deduction (\$14.04 Bi-Weekly) Date of Receipt 11 26 2018 Transaction ID : PR2601154752617 Amount of Each Receipt this Period 42.1 Memo Item P/R Deduction (\$14.04 Bi-Weekly) Date of Receipt 42.1 Memo Item P/R Deduction (\$14.04 Bi-Weekly) Date of Receipt Memo Item P/R Deduction (\$14.04 Bi-Weekly)								
c.	Full Name of Individual (Last, First, Middle Initial) PERERA, SUSAN, , ,) or Full O	organization Name		Date of	Re	ecei	ipt 26 / 2018 1D : PR2601154752617 ach Receipt this Period 42.12 em (\$14.04 Bi-Weekly) ipt 26 / 2018 1D : PR2601168852617 ach Receipt this Period 42.12 em (\$14.04 Bi-Weekly)					
	Mailing Address 1201 UNITY AVE N	04-4-			11	1	L	26	/	2	018		
	City GOLDEN VALLEY	State MN	Zip Code 55422-4735	A									
	FEC ID number of contributing federal political committee.	С										2	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel		Me	emo	o Ite	em					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)						y		,		126.3	6	
т	OTAL This Period (last page this line number onl	y)	•				-						

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check	eck only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12		
Any information copied from such Reports and or for commercial purposes, other than using the				he pu					
NAME OF COMMITTEE (In Full)		see of any pointour committee		201101	2010110			- • •	
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I RODRIGUEZ, ROGER, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt				
Mailing Address 4825 DAVIS ROAD				м 1	/ D 26		2018	Y	
City MIAMI	State FL	Zip Code 33143-6141				PR2601 1 Receipt th	17685261 is Period	7	
FEC ID number of contributing federal political committee.	С				-		576.9	90	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mem	io Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R D	educt	tion (\$19	2.30 Bi-W	/eekly)		
Full Name of Individual (Last, First, Middle I HUDSON, JEFFREY, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt				
Mailing Address 1536 BREWSTER DRIVE				·					
City	State TX	Zip Code				ID: PR2605703052617 ch Receipt this Period		7	
CARROLLTON		75010-6444	Amc	unt o	f Each F	Receipt th	this Period		
FEC ID number of contributing federal political committee.	С				-		42.(00	
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir SIs Ops			io Item				
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼		322.00	P/R D	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I MCBEATH, ROBERT, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt				
Mailing Address 2537 RED ARROW DRIVE			1	1 ^M	26		2018		
City LAS VEGAS	State NV	Zip Code 89135-1628				Receipt th	70895261 is Period	7	
FEC ID number of contributing federal political committee.	С				y	, ,	576.9	90	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual)) Med Grp Physn		Mem	io Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)					, .	. ,	1195.8	80	
TOTAL This Period (last page this line numbe	r only)				47. 1				

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FOR LINE NUMBER:

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171			Use separate schedule(s)	(ch	neck only	eck only one)					
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 11b 13 14			11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of				
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	NC)							
A.	Full Name of Individual (Last, First, Middle Initia HUTCHINS, LEIGH, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 16786 RAINY VALE AVE				M M 11	/	26) / Y	Y Y 2018	Ŷ	
	City RIVERSIDE	State CA	Zip Code 92503-6535						7 1785261 is Period	7	
	FEC ID number of contributing federal political committee.	С							272.	70	
	Name of Employer (for Individual) Primecare Medical Network, Inc		upation (for Individual)) Med Grp Non Physn		Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 727.20		P/R Dedu	uctio	on (\$90.	.90 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia RICKS, RHONDA, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt				
	Mailing Address 5084 JERICHO ROAD			M M	1	26	/ Y	2018	Y		
	City COLUMBIA	State MD	Zip Code 21044-5409	-					3345261	7	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 46.14							
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Mktg			Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 353.74	P/R Deduction (\$15.38 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia DAVIS, KELLY, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 905 N LEBANON ST	1			M M 11	1	26		ү ү 2018	Y	
	City ARLINGTON	State VA	Zip Code 22205-1433						73425261 is Period	7	
	FEC ID number of contributing federal political committee.	С					y .	. ,	288.	45	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Affs Dir		Me	emo	ttem				
	Receipt For: Primary General Other (specify)	Aggregate	te Year-to-Date ▼ 2211.45 P/R Deduction (\$96.15 Bi-Weekly)						eekly)		
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	.,	607.	29	
т	OTAL This Period (last page this line number or	ıly)	••••••	-			-				

SCHEDULE A (FEC Form 3X) DEAEIDTA

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ı ب			Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)								
Α.	Full Name of Individual (Last, First, Middle Init FINLAY, CHRISTOPHER, , ,	ial) or Full O	rganization Name	Data of Dessist								
А.	Mailing Address 3221 COLFAX AVE S			Date of Receipt								
				11 26 2018								
	City	State	Zip Code	Transaction ID : PR2605735152617								
	MINNEAPOLIS	MN	55408-3555	_ Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.97								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	United HealthCare Services Inc		Mktg									
	Receipt For:		Year-to-Date ▼									
	Primary General			P/R Deduction (\$13.99 Bi-Weekly)								
	Other (specify) V		322.98									
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name									
В.	MALONE, TRACY, , ,			Date of Receipt								
	Mailing Address 900 S 22ND ST			11 26 2018								
	City	State	Zip Code	Transaction ID : PR2605736952617								
	ARLINGTON	VA	22202-2625	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		576.90								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Init JAEGER, MICHELLE, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 14506 MCGINTY ROAD WES	т		11 26 2018								
	City	State	Zip Code	Transaction ID : PR2605753952617								
	WAYZATA	MN	55391-2541	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.97								
	Name of Employer (for Individual)		upation (for Individual)	Memo Item								
	United HealthCare Services Inc Receipt For:		Seg Growth Officer									
	Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$13.99 Bi-Weekly)								
	Other (specify)		322.98	P/K Deduction (\$13.99 BI-Weekly)								
⊢	UBTOTAL of Receipts This Page (optional)			660.84								

Use separate schedule(s)

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(check only one)

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporation	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I SMITH, LARRY, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 1164 RUE CHINON			11 / 26 / Y Y Y Y Y 2018									
City MANDEVILLE	State	Zip Code 70471-1213	Transaction ID : PR2605760652617									
		70471-1213	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		57.69									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc	Ass	c Dir Compli										
Receipt For:	Aggregate	Year-to-Date V										
Primary General Other (specify) ▼		442.29	P/R Deduction (\$19.23 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I B. WEISSEL, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 99 HAGEN ROAD			11 / 26 / Y Y Y Y 2018									
City	State	Zip Code	Transaction ID : PR2606842952617									
NEWTON	MA	02459-2731	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) :um Exec	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. SONSTEGARD, NATHAN, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 4216 ZENITH AVE S			11 26 / Y Y Y Y 11 26									
City	State	Zip Code	Transaction ID : PR2606844452617									
MINNEAPOLIS	MN	55410-1413	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) UHC International Services Inc	Occ VP I	upation (for Individual) Fin	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			676.71									
TOTAL This Period (last page this line numbe												

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle MATECZUN, JOHN, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 1908 HARBOURSIDE DR UNIT 403	IVE		11 26 Y Y Y Y Y
City LONGBOAT KEY	State FL	Zip Code 34228-4207	Transaction ID : PR2606845152617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s M&V	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle RAWLINSON, DORIEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 4795 W RED ROCK DRIV	State	Zip Code	11 26 / Y Y Y Y 2018
LARKSPUR	CO	80118-8413	Transaction ID : PR2606854652617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle EYER, JAN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 6241 CRESTBROOK DR			11 / D D / Y Y Y Y Y 26 2018
City MORRISON	State CO	Zip Code 80465-2225	Transaction ID : PR2606857552617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) n Exec Dir	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		661.14
TOTAL This Period (last page this line num	ber only)		

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•••	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
	/ information copied from such Reports and Sta for commercial purposes, other than using the r								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated								
<u></u>	Full Name of Individual (Last, First, Middle Initia MARGRITZ, CYNTHIA, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 16702 L STREET			M M / D D / Y Y Y Y 11 26 2018					
	City OMAHA	State NE	Zip Code 68135-1324	Transaction ID : PR2607806152617					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initia FICKER, MARK, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 173 LAURELWOOD DRIVE	11 / D D / Y Y Y Y Y 26 2018							
	City NOVATO	State CA	Zip Code 94949-8427	Transaction ID : PR2607806752617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		114.99					
	Name of Employer (for Individual) Optum Services, Inc	Occu	upation (for Individual) Ops	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.92	P/R Deduction (\$38.33 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initia SCHWARTZ, SHAWN, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 338 SNELLING AVE S	1		11 26 Y Y Y Y 2018					
	City SAINT PAUL	State MN	Zip Code 55105-2048	Transaction ID : PR2608059352617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Ntwk Prgms	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
s	JBTOTAL of Receipts This Page (optional)		•	199.23					

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)							
	ED RECEIPTS		for each category of the Detailed Summary Page	× 11		11b 14	11c	12	17		
	nation copied from such Reports and Sta mercial purposes, other than using the n			rson for t	he pu	rpose of		contribut	tions		
	of COMMITTEE (In Full) edHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)							
	me of Individual (Last, First, Middle Initia IO, LISA, , ,	l) or Full O	rganization Name	Date	e of R	eceipt					
Mailing	Address 60 PINEAPPLE STREET APT 3J				м 1	26	/ Y	2018	Y		
City BROO		State NY	Zip Code 11201-6839	Transaction ID : PR2608059552617 Amount of Each Receipt this Period							
	number of contributing political committee.	С				-		115.3	38		
United	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) Gen Mgmt		Mem	o Item					
	For: rimary General ther (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R [educt	tion (\$38.	46 Bi-We	eekly)			
	me of Individual (Last, First, Middle Initia IN, VIRGINIA, , ,	l) or Full O	rganization Name	Date	e of R	eceipt					
	Address 30 VAN TERRACE			м 1	/ D D D 26	/ Y	y y 2018	Y			
City SPARK		State NY	Zip Code 10976-1406					06125261	7		
FEC ID	number of contributing political committee.	С		Amount of Each Receipt this Period							
	of Employer (for Individual) HealthCare Services Inc	Occu Dir I	Memo Item								
	For: rimary General ther (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)							
	me of Individual (Last, First, Middle Initia GUSON, SANDRA, , ,	l) or Full O	rganization Name	Date	e of R	eceipt					
Mailing	Address 710 SOUTH SHERATON DRIVI	E			м 1	/ D D 26	/ Y	2018	Y		
City AKRO	N	State OH	Zip Code 44319-1918					06195261 iis Period	7		
	number of contributing political committee.	С				5	y	115.3	38		
United	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) c Dir Med Clin Ops		Mem	io Item					
	For: rimary General ther (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOT	AL of Receipts This Page (optional)		>			y		346. <i>*</i>	14		
TOTAL T	his Period (last page this line number on	ıly)	····· •				1 45				

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

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Midd A. HECK, ALLYN, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3233 BARHITE STREET	-		M M / D D / Y Y Y Y 11 26 2018					
City PASADENA	State CA	Zip Code 91107-1254	Transaction ID : PR2609810952617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		42.12					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Underwriting	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. BODELL, LESLIE, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 18710 34TH AVENUE N			11 / D D / Y Y Y Y 26 2018					
City PLYMOUTH	State MN	Zip Code 55447-1000	Transaction ID : PR2609811352617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. WRIGHT, NORMAN, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5205 KELSEY TERRAC	1		11 26 2018					
City EDINA	State MN	Zip Code 55436-1172	Transaction ID : PR2609812352617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of of Ops	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		1195.92					
TOTAL This Period (last page this line nur	nber only)							

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)		(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12			
Any information copied from such Reports and										
or for commercial purposes, other than using th	ie name and a	dudress of any political committee	e to solicit co	ontrib	outions t	rom such		ee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I STRAUSS, DAVID, , ,	nitial) or Full C	tial) or Full Organization Name			Date of Receipt					
Mailing Address 5000 FRANCE AVENUE S UNIT 33			11	M /	26) / Y	үүү 2018	Ŷ		
City MINNEAPOLIS	State MN	Zip Code 55410-2061					52185261 is Period	7		
FEC ID number of contributing federal political committee.	С						576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Total Rewards, HC Svs		Vemo	tem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R De	ducti	on (\$192	2.30 Bi-W	/eekly)			
Full Name of Individual (Last, First, Middle I B. PATEL, KETAN, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 4682 WARNER AVE #C304					11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City HUNTINGTON BEACH	State CA	Zip Code 92649-3990					23352617	7		
FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period					
Name of Employer (for Individual) Optum Services, Inc					tem					
Receipt For:	Aggregate	Year-to-Date ▼		-						
Other (specify) ▼		400.00	P/R De	P/R Deduction (\$200.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I PELUSO, JOSIANE, , ,	nitial) or Full C	organization Name	Date	of Re	eceipt					
Mailing Address 112 WITHERS STREET 1S		Zin Code	11		26		2018			
City BROOKLYN	State NY	Zip Code 11211-2314					52535261 is Period	1		
FEC ID number of contributing federal political committee.	С				y .		99.9	99		
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) C&S Medicr Dir NYC			tem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 399.96	P/R De	educti	on (\$33	.33 Bi-We	eekly)			
SUBTOTAL of Receipts This Page (optional)		•••••			, .	,	1076.8	9		
TOTAL This Period (last page this line numbe	r only)									

Use separate schedule(s)

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		Use separate schedule(s)		(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12	,			
Any information copied from such Reports an or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)				John							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle SMITH, MELANIE, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 15340 HIGHLAND PLACE			11		D D D 26) / Y	ү ү 2018	Y			
City MINNETONKA	State MN	Zip Code 55345-4613					52765261 is Period	7			
FEC ID number of contributing federal political committee.	С				- 1		115.3	38			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Recruit Ops		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R De	educt	ion (\$38.	.46 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle B. STEVENS, J, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 93 CONSERVATION ROA						11 / 26 / Y Y Y Y 2018					
City SUFFIELD	State CT	Zip Code 06078-2442					28552617	7			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Tech Proj-Prgm Mgmt			o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. BAKER, MICHAEL, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 2383 HIGHOVER TRAIL			11		26		y y 2018	Y			
City CHANHASSEN	State MN	Zip Code 55317-4744					53055261 is Period	7			
FEC ID number of contributing federal political committee.	С				y .	. ,	576.9	90			
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) SVP Ops									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R D	educt	ion (\$19	2.30 Bi-W	/eekly)				
SUBTOTAL of Receipts This Page (optional)					, .		807.6	6			
TOTAL This Period (last page this line numb	per only)				45.1	40					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a 13] 11k 14		11c 15	12 16	17
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose		oliciting	g contribu	tions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) RIVERS, CAROLINE, , ,	or Full O	rgan	nization Name		Date of Receipt						
	Mailing Address 6368 TIMBER TRACE					м м 11	1	D	26	/ Y	ү ү 2018	Ŷ
	City Stat			Zip Code		Trans	acti	ion	ID : P	R2612	53375261	7
	BROWNSBURG	IN		46112-8641	_ A	mount	of	Eac	h Re	ceipt th	is Period	
	FEC ID number of contributing federal political committee.	С						-		-17-	42.	03
Name of Employer (for Individual)COptum Services, IncE				ion (for Individual) r		Me	emo	b Ite	m			
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 323.05	P/	R Dedi	uctio	on (\$14.0	1 Bi-We	eekly)	
В.	Full Name of Individual (Last, First, Middle Initial) KIECKHAFER, REGINA, , ,		Date of	Re	eceip	ot						
	Mailing Address 30 SHATTUCK ROAD APT #242	1						11 26 2018				
	City	State		Zip Code		Transaction ID : PR261253625				53625261	7	
	ANDOVER	MA		01810-2477	A	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Gen Mgmt					42.12 Memo Item					
	Name of Employer (for Individual) Optum Services, Inc											
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year	P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial) HANSEN, KIMBERLY, , ,	or Full O	Organ	nization Name		Date of	Re	eceip	ot			
	Mailing Address 6227 UPLAND LN N					M M 11	1	D	26	/ Y	2018	Y
	City	State		Zip Code		Trans	acti	ion	ID : F	R2613	38325261	7
	MAPLE GROVE	MN		55311-4003	A	mount	of	Eac	h Re	ceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					_	7		y	41.	70
	Name of Employer (for Individual)	Occi	upati	ion (for Individual)		Me	emo	o Ite	m			
	United HealthCare Services Inc	Dir F	Prov	Data								
		Aggregate	Year	r-to-Date ▼								
	Primary General Other (specify)		Ţ	323.18	P/	R Ded	uctio	on (\$13.9	0 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)			•	[9		,	125.	85
т	OTAL This Period (last page this line number only	y)		••••••	ĺ			- -		-		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS for each category of the Detailed Summary Page		X 11a 11b 11c 12						
				13 14 15 16 17				
or for commercial p	ourposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.				
	MITTEE (In Full) th Group Incorporated	d PAC (l	JnitedHealth Group PA	(C)				
Full Name of Inc A. DEIDESHEIN	dividual (Last, First, Middle Initi IER, THERESA, , ,	al) or Full O	organization Name	Date of Receipt				
Mailing Address	6319 21 ST AVE NE			11 / D D / Y Y Y Y Y 26 2018				
City SEATTLE		State WA	Zip Code	Transaction ID : PR2613383452617				
		VVA	98115-6915	Amount of Each Receipt this Period				
FEC ID number federal political o	5	С		41.70				
Name of Employ United HealthCar	ver (for Individual) re Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For:			Year-to-Date ▼	—				
Other (spe	General ccify) ▼		323.18	P/R Deduction (\$13.90 Bi-Weekly)				
Full Name of Inc B. CORCORAN	dividual (Last, First, Middle Initi N, SUSAN, , ,	al) or Full O	organization Name	Date of Receipt				
Mailing Address	4 DONBUSH ROAD			M M / D D / Y Y Y Y 11 26 2018				
City		State	Zip Code	Transaction ID : PR2613385352617				
NORTH OAKS		MN	55127-2095	Amount of Each Receipt this Period				
FEC ID number federal political o	5	С		115.38				
Name of Employ Optum Services,	yer (for Individual) Inc		upation (for Individual) Acctng	Memo Item				
Receipt For: Primary Other (spe	General ccify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Inc	dividual (Last, First, Middle Initi N, DAVID, , ,	al) or Full O	organization Name	Date of Receipt				
Mailing Address	57 ATKINSON LANE			M M / D D / Y Y Y Y 11 26 2018				
City		State	Zip Code	Transaction ID : PR2613388952617				
SUDBURY		MA	01776-1938	Amount of Each Receipt this Period				
FEC ID number federal political o	5	С		171.42				
Name of Employ	ver (for Individual)	Occi	upation (for Individual)	Memo Item				
United HealthCa	re Services Inc	VP	Mktg Bus Dev					
Receipt For:		Aggregate	Year-to-Date V					
Primary Other (spe	cify) General		1328.50	P/R Deduction (\$57.14 Bi-Weekly)				
SUBTOTAL of Re	ceipts This Page (optional)		•••••	328.50				
TOTAL This Perio	d (last page this line number o	nly)	•••••	· · · · · · · · · · · · · · · · · · ·				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions				
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	AC)						
Α.	Full Name of Individual (Last, First, Middle Initial KREJCI, ANDREW, , ,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 19880 LAKEVIEW AVENUE	State	Zip Code	11 / D D / Y Y Y Y 26 2018				
	City EXCELSIOR	MN	55331-9352	Transaction ID : PR2614310752617				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 645.84	P/R Deduction (\$28.08 Bi-Weekly)				
В.	Full Name of Individual (Last, First, Middle Initial MEYER, RAYNEE, , ,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 6299 BELLEVUE LANE			11 26 Y Y Y Y Y 2018				
	City EDEN PRAIRIE	State MN	Zip Code 55344-5201	Transaction ID : PR2614314052617 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		157.89				
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	upation (for Individual) Fin	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 842.08	P/R Deduction (\$52.63 Bi-Weekly)				
C.	Full Name of Individual (Last, First, Middle Initial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1697 COUNCIL BLUFF DRIVE I			11 / D D / Y Y Y Y Y 26 / 2018				
	City ATLANTA	State GA	Zip Code 30345-4137	Transaction ID : PR2614322352617				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Dir SIs	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)			299.82				
Т	OTAL This Period (last page this line number on	ly)	•••••					

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		Use separate schedule(s)		(check only one)						
111			for each category of the Detailed Summary Page		X 11a		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia BURKHOLDER, CHAD, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 2423 DUBONNET DRIVE				M M 11	/	26	/ Y	y y 2018	Y
	City MACUNGIE	State PA	Zip Code 18062-8857						7345261	7
			10002-0037	_	Amount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С			Ľ.	_		-	576.	90
	Name of Employer (for Individual) Optum Services, Inc	Occu VP (upation (for Individual) Dps		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90]	P/R Dedu	uctio	on (\$192	2.30 Bi-W	′eekly)	
в.	Full Name of Individual (Last, First, Middle Initia OCONNOR, THOMAS, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 1510 JAMES STREET				11 / D / Y Y Y 2018					
<u> </u>	City	State Zip Code NC 27707-1514							8205261	7
		NC	_	Amount	of	Each R	eceipt th	is Period	_	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) HIth Plan CEO			576.90					
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emo	Item			
	Receipt For:	Aggregate	Year-to-Date 🔻		7					
	Other (specify) ▼] '	P/R Deduction (\$192.30 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia VANNORMAN, SAMUEL, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 6216 CONCORD AVE				M M 11	1	26	/ Y	2018	Y
	City EDINA	State MN	Zip Code 55424-1736	-					08605261 is Period	7
	FEC ID number of contributing federal political committee.	С					,	, j	42.	12
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) VP Prod			Me	emo	Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92		P/R Ded	uctio	on (\$14.	.04 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			, ,		1195.9	92
т	OTAL This Period (last page this line number or	nly)	••••••	- •				1.45		

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
	y information copied from such Reports and State for commercial purposes, other than using the na						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	(C)			
Α.	Full Name of Individual (Last, First, Middle Initial SOLOMON, RANDALL, , ,) or Full Oi	rganization Name	Date of Receipt			
	Mailing Address 760 HAIGHT STREET	1		11 / D D / Y Y Y Y Y 2018			
	City SAN FRANCISCO	State CA	Zip Code 94117-3317	Transaction ID : PR2615671552617			
	FEC ID number of contributing	С	94117-5317	Amount of Each Receipt this Period			
	federal political committee.	U					
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) ehvrl Med Dir	Memo Item			
	Receipt For:	Agaregate	Year-to-Date ▼	—			
	Primary General Other (specify) ▼		884.58	P/R Deduction (\$38.46 Bi-Weekly)			
В.	Full Name of Individual (Last, First, Middle Initial, BIRNBAUM, MICHAEL, , ,) or Full O	rganization Name	Date of Receipt			
	Mailing Address 55 DEAN STREET			11 / D D / Y Y Y Y Y 26 2018			
	City	State Zip Code		Transaction ID : PR2615671652617			
-	BROOKLYN	NY	11201-6245	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		576.90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIthcare Econ	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)			
С.	Full Name of Individual (Last, First, Middle Initial, KNUTSON, DIANE, , ,) or Full Oi	rganization Name	Date of Receipt			
	Mailing Address 701 Pennsylvania Avenue, NW Suite 200			M M / D D / Y Y Y Y Y 11 26 2018			
	City	State	Zip Code	Transaction ID : PR2615923952617			
	Washington	DC	20004-3610	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.38			
	Name of Employer (for Individual) UHC International Services Inc		ipation (for Individual) Itwk Pricing	Memo Item			
	Receipt For:			_			
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)			
	UBTOTAL of Receipts This Page (optional)						
Т	OTAL This Period (last page this line number onl	iy)	•••••••				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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ITEMIZED RECEIPTS	EWIZED RECEIPTS for each category of the Detailed Summary Page			
			13 14 15 16 17	
or for commercial purposes, other than u			erson for the purpose of soliciting contributions to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (Ur	nitedHealth Group PA	AC)	
Full Name of Individual (Last, First, M SCALLY, MICHAEL, , ,	iddle Initial) or Full Org	anization Name	Date of Receipt	
Mailing Address 601 PLYMOUTH RD		1	11 / D D / Y Y Y Y Y 26 2018	
City BALTIMORE	State MD	Zip Code 21229-2213	Transaction ID : PR2615929152617	
FEC ID number of contributing		21223-2213	Amount of Each Receipt this Period	
federal political committee.	C		84.21	
Name of Employer (for Individual) United HealthCare Services Inc		ation (for Individual) s Process	Memo Item	
Receipt For:				
Primary General Other (specify) ▼		280.70	P/R Deduction (\$28.07 Bi-Weekly)	
Full Name of Individual (Last, First, M B. YOUNG, JENNIFER, , ,	iddle Initial) or Full Org	anization Name	Date of Receipt	
Mailing Address 939 OCEAN BLVD UNIT 15			11 26 2018	
City	State	Zip Code	Transaction ID : PR2615929452617	
HAMPTON	NH	03842-1442	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		42.12	
Name of Employer (for Individual) Optum Services, Inc	Occup SVP S	ation (for Individual) Sales	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)	
Full Name of Individual (Last, First, M C. GARVEY, MARISA, , ,	iddle Initial) or Full Org	anization Name	Date of Receipt	
Mailing Address 1986 MABEL COURT	-		11 26 2018	
City	State	Zip Code	Transaction ID : PR2615937752617	
CHASKA	MN	55318-1241	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		346.14	
Name of Employer (for Individual)		ation (for Individual)	Memo Item	
United HealthCare Services Inc Receipt For:	Aggregate Ye	Strat Mkt Allis	_	
Primary General Other (specify)		1153.80	P/R Deduction (\$115.38 Bi-Weekly)	
SUBTOTAL of Receipts This Page (opti	onal)	b	472.47	
TOTAL This Period (last page this line	number only)			

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

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 1 erson for the purpose of soliciting contributions to solicit contributions from such committee						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. KIRBY, WESLEY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3213 SAGE BRUSH TRL			11 26 Y Y Y Y Y Y 2018						
City PLANO	State TX	Zip Code 75023-5631	Transaction ID : PR2615957052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			42.12						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nager, Advisory Svcs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. LONGORIA, PATRICIA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 906 BLUEBIRD			11 26 / Y Y Y Y 2018						
City	State TX	Zip Code	Transaction ID : PR2617361152617						
MANCHACA		78652-4154	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Mktg	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle PASSINEAU, MEGHAN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4 BUROAK DRIVE			11 / D D / Y Y Y Y 11 26 2018						
City HOPEWELL JUNCTION	State NY	Zip Code 12533-6434	Transaction ID : PR2617363652617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 294.84	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		126.36						
TOTAL This Period (last page this line numb	per only)	······							

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1 ¹					
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mather name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. TRAW, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 518 13TH ST			M M / D D / Y Y Y Y 11 26 2018					
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	Transaction ID : PR2617365652617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Process	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. CHERRY, MARK, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 612 BEMIS HEIGHTS PL			11 / 26 / Y Y Y Y 2018					
City SAINT CHARLES	State MO	Zip Code 63303-1752	Transaction ID : PR2617922852617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.12					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Analytics Svcs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322,92	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle BAUBLIT, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2201 RIDGEWIND WAY			11 / 26 / Y Y Y Y Y 2018					
City WINDERMERE	State FL	Zip Code 34786-5823	Transaction ID : PR2617927152617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.12					
Name of Employer (for Individual) Optum Services, Inc Receipt For:	VP	upation (for Individual) Gen Mgmt	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			199.62					
TOTAL This Period (last page this line numb	er only)							

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

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	4C)					
Full Name of Individual (Last, First, Middle A. PUTTERMAN, JAY, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7 SUNNY REACH DRIVE			11 26 2018					
City	State	Zip Code	Transaction ID : PR2617931352617					
WEST HARTFORD	СТ	06117-1531	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		42.12					
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
United HealthCare Services Inc		VP Clnt Dev						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General			P/R Deduction (\$14.04 Bi-Weekly)					
Other (specify) v		322.92						
Full Name of Individual (Last, First, Middle B. JOHNSON, MARK, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 8687 RILEY CURVE			11 26 2018					
City	State	Zip Code	Transaction ID : PR2617933952617					
CHANHASSEN	MN	55317-4822	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		138.45					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:	Aggregate	Year-to-Date V	1					
Primary General Other (specify) ▼		1061.45	P/R Deduction (\$46.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. MISKELLCLOUTIER, DOMINIC		rganization Name	Date of Receipt					
Mailing Address 12101 STRETFORD FOR	EST COURT		11 / D D / Y Y Y Y 11 26 2018					
City	State	Zip Code	Transaction ID : PR2618984952617					
BRISTOW	VA	20136-2078	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		41.70					
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item					
United HealthCare Services Inc	Dir N	/led Clin Ops						
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (specify)		323.18	P/R Deduction (\$13.90 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			222.27					
TOTAL This Period (last page this line numb	per only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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ITEIVIIZED RECEIPTS		Detailed Summer Dage	×	11a		11b	11c		12	
		Detailed Summary Page		13		14	15	$\mid \mid$	16	17
Any information copied from such Reports or for commercial purposes, other than us							soliciting		ntribut	ions
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorp	orated PAC (JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Mic BROWN, ROGER, , ,	dle Initial) or Full C	rganization Name		Date of	f Re	eceipt				
Mailing Address 512 EAST STATE AVE				M M 11	/	26) / Y) 18	Y
City	State	Zip Code		Trans	act	ion ID :	PR2622	5579	5261	7
PHOENIX	AZ	85020-4940		Amount	t of	Each F	Receipt th	is P	eriod	
FEC ID number of contributing federal political committee.	С							_	576.9	90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		M	emo	ltem				
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General	, iggi oguto		P P	/R Ded	ucti	on (\$19	2.30 Bi-V	Veek	ly)	
Other (specify) ▼		4422.90							.,	
Full Name of Individual (Last, First, Mic B. GARELLI, JOLENE, , ,	dle Initial) or Full C	rganization Name		Date of	f Re	eceipt				
Mailing Address 9 PROSPECT VIEW D	RIVE			M M 11	/	D 10) / Y)18	Y
City	State	Zip Code		Trans	acti	on ID :	PR2622	5592	52617	7
DUMMERSTON	VT	05301-8875		Amount	t of	Each F	Receipt th	is P	eriod	
FEC ID number of contributing federal political committee.	C							_	42.1	12
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Tech Proj-Prgm Mgmt		M	emo	ltem				
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		322.92	P	/R Ded	uctio	on (\$14.	04 Bi-We	ekly	′)	
Full Name of Individual (Last, First, Mic C. OLSON, MARK, , ,	dle Initial) or Full C	rganization Name		Date of	f Re	eceipt				
Mailing Address 891 14TH ST UNIT 1210				^M 11	/	26)18 [°]	Y
City	State	Zip Code		Trans	sact	ion ID :	PR2622	5616	5261	7
DENVER	CO	80202-3259	·	Amount	t of	Each F	Receipt th	is P	'eriod	
FEC ID number of contributing federal political committee.	С					,	. ,	_	115.3	38
Name of Employer (for Individual)	Occ	upation (for Individual)		М	emo	tem				
United HealthCare Services Inc		/P SIs Acct Mgmt								
Receipt For:	I	Year-to-Date ▼								
Primary General	, iggi oguto		P P	P/R Ded	lucti	on (\$38	.46 Bi-W	eekly	v)	
Other (specify)		884.58	4							
SUBTOTAL of Receipts This Page (option	nal)	•••••	•			,	, ,	_	734.4	ŀO
TOTAL This Period (last page this line nu	Imber only)		•							

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	★ 11a 11b 11c 12
			13 14 15 16 17 erson for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and a	ddress of any political committe	e to solicit contributions from such committee.
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middl A. CAMPBELL, THERESA, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 1117 XERXES AVENUE	SOUTH		11 26 / Y Y Y Y Y 11 26
City MINNEAPOLIS	State MN	Zip Code 55405-2128	Transaction ID : PR2622562152617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital Partner	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middl B. TROCINSKI, CAROL, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 1030 ROBIN COURT			11 / D D / Y Y Y Y Y 26 / 2018
City WEST SALEM	State WI	Zip Code 54669-1919	Transaction ID : PR2623691052617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 323.99	P/R Deduction (\$13.69 Bi-Weekly)
Full Name of Individual (Last, First, Middl C. MOURAS, DENNIS, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 6376 MARSH ROAD			11 26 / Y Y Y Y 11 26 2018
City COTTRELLVILLE	State MI	Zip Code 48039-1314	Transaction ID : PR2623702952617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	l)		275.49
TOTAL This Period (last page this line num	ber only)		

Use separate schedule(s)

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IT.			Use separate schedule(s)	(check only one)
	EWIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any po ddress of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\overline{)}$	NAME OF COMMITTEE (In Full)			
$\Big\rangle$	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	NC)
A.	Full Name of Individual (Last, First, Middle Initia CAMP, MELISSA, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 124 WOODFIELD BLVD			11 26 / Y Y Y Y Y 10 2018
	City MECHANICVILLE	State NY	Zip Code 12118-3038	Transaction ID : PR2624436852617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.12
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Ntwk Contrctng	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia MULES, REBECCA, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 660 DOVER STREET			11 26 / Y Y Y Y 2018
	City BALTIMORE	State MD	Zip Code 21230-2228	Transaction ID : PR2624442652617
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.60	P/R Deduction (\$192.30 Bi-Weekly)
С.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 829 CONCORDE CIRCLE APT # 4202	State	Zin Code	11 26 2018
	City LINTHICUM HEIGHTS	MD	Zip Code 21090-1778	Transaction ID : PR2624445952617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.97
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Practitioner 3	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$13.99 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			660.99
Т	OTAL This Period (last page this line number o	nly)	•••••	

SCHEDULE A (FEC Form 3X) _____ _

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IT.			Use separate schedule(s)	(ch	eck only	y or	ne)			
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12	_ _
	y information copied from such Reports and Si for commercial purposes, other than using the									
$\overline{\langle}$	NAME OF COMMITTEE (In Full)			, 10 00						
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)						
A.	Full Name of Individual (Last, First, Middle Init STALLWOOD, GREGG, , ,	ial) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 4842 JUNIPER DR				M M 11	1	D D D 26	/ Y	2018	Y
	City PALM HARBOR	State FL	Zip Code 34685-2688	_					19905261 is Period	7
	FEC ID number of contributing federal political committee.	С						-	576.9	90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs		M	emo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.60	F	P/R Ded	ucti	on (\$192	2.30 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Init COLLETTE, CHRISTOPHER, , ,	ial) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 4776 MANITOU ROAD				M M 11	1	26	/ Y	2018	Y
	City	State MN	Zip Code						9955261	7
	EXCELSIOR FEC ID number of contributing federal political committee.	C	55331-9400		Amoun	: Of	Each R	eceipt th	is Period 576.9	90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHIth Grp		M	emo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	F	P/R Ded	uctio	on (\$192	2.30 Bi-W	'eekly)	
С.	Full Name of Individual (Last, First, Middle Init RELLER, TAMI, , ,	ial) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 5120 MIRROR LAKES DRIVE				11 ^M	1	26		2018 Y	
	City EDINA	State MN	Zip Code 55436-1342						50195261 is Period	/
	FEC ID number of contributing federal political committee.	С			<u> </u>		, . , .	9	576.9	90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Mktg Off		М	emo	tem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	F	P/R Ded	ucti	on (\$19:	2.30 Bi-W	/eekly)	
⊢	UBTOTAL of Receipts This Page (optional)		r	- -		-	y 1	· · ·	1730.7	70

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				Detailed Summary Page	×	11a		11	- H	_	1c	12	47
	y information copied from such Reports and State for commercial purposes, other than using the na								e of		citing		
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated										2001		
A.	Full Name of Individual (Last, First, Middle Initial SMITH, LISA, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	pt				
	Mailing Address 5040 INTERLACHEN BLUFF					м м 11	/		26	/	Y	ү ү 2018	Y
	City EDINA	State MN		Zip Code 55436-1360	A							0375261 s Period	7
	FEC ID number of contributing federal political committee.	С						-			- -	1827.0	00
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		Me	emo) Ite	əm				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 3168.16	P/	R Dedi	uctic	on ((\$609	.00	Bi-We	eekly)	
B.	Full Name of Individual (Last, First, Middle Initial LAWTON, MICHAEL, , ,) or Full O	rgar	nization Name	C	Date of	Re	ecei	pt				
	Mailing Address 1720 CROSS PINES DR	1				™ _ M 11	/		26	/	Y	y y 2018	Y
	City FLEMING ISLAND	State FL		Zip Code 32003-4915								0545261 s Period	7
	FEC ID number of contributing federal political committee.	С				_		- -			- J	576.9	90
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo) Ite	əm				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 4422,90	P/	R Dedu	uctio	on ((\$192	.30	Bi-We	eekly)	
c.	Full Name of Individual (Last, First, Middle Initial HOMER, WILLIAM, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	pt				
	Mailing Address 3120 LAKE CENTER DR	04-4-		The October		M M 11	1	L	26		Y	2018	
	City SANTA ANA	State CA		Zip Code 92704-6917	A							0775261 s Period	/
	FEC ID number of contributing federal political committee.	С						,			,	41.9	97
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) pal Proj-Prgm Mgr		Me	emo	o Ite	əm				
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 322.98	P/	R Ded	uctio	on ((\$13.9	99 E	Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)			•	[,			,	2445.8	37
Т	OTAL This Period (last page this line number onl	y)		•••••							,		

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		Use separate schedule(s)	(check only one)
I EWILED KEVEILIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			erson for the purpose of soliciting contributions
or for commercial purposes, other than using t	me name and a	duress of any political committee	e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle LIVERS, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 402 DERBY COURT			M M / D D / Y Y Y Y Y 11 26 2018
City MEBANE	State NC	Zip Code 27302-9452	Transaction ID : PR2626346052617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle CULHANE, DEBORAH, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 100 COVE WAY UNIT 301 City	State	Zip Code	11 / D D / Y Y Y Y 126 / 2018
QUINCY	MA	02169-5857	Transaction ID : PR2626356052617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle TERRAL, RECCA, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 6828 SIMMONS RD			11 / 26 / Y Y Y Y Y 11 26 2018
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-4259	Transaction ID : PR2626359652617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.70
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Dir (upation (for Individual) Gen Mgmt	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			660.72
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	łC)
Full Name of Individual (Last, First, Middle Ir A. HINES, GREGORY, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 3660 SILVERWOOD RD			M M / D D / Y Y Y Y 11 26 2018
City WEST SACRAMENTO	State CA	Zip Code 95691-5403	Transaction ID : PR2626886552617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir B. BONAR, BRUCE, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 2589 HONEYBELL LANE			11 26 / Y Y Y Y 2018
City ESCONDIDO	State CA	Zip Code 92027-1847	Transaction ID : PR2626906852617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.70
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mgr, Software Engineering	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir c. STOCKSTAD, LYNNE, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 5190 MEADVILLE STREET			11 / D D / Y Y Y Y 26 / 2018
City EXCELSIOR	State MN	Zip Code 55331-8790	Transaction ID : PR2626915552617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Chief Mktg Off	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			1195.50
TOTAL This Period (last page this line number	r only)		

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EMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle SCHENCK, ERIK, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1 FLORENCE CT			11 26 / Y Y Y Y Y 11 26
City PALM COAST	State FL	Zip Code 32137-8305	Transaction ID : PR2627730452617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.70
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Clin Cnslt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)
Full Name of Individual (Last, First, Middle 3. SCOTT, NICOLE, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 29039 HOBBLEBUSH			11 26 / Y Y Y Y 2018
City SAN ANTONIO	State TX	Zip Code 78260-2249	Transaction ID : PR2627731952617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		322.92	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MORRIS, BARBARA, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1045 SWEET GUM WAY			11 26 / Y Y Y Y 2018
City MEBANE	State NC	Zip Code 27302-6511	Transaction ID : PR2627735552617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			125.94
TOTAL This Period (last page this line numb	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				or each category of the Detailed Summary Page	×	11] 1′ 14	1b 4		11c 15	12	17
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments ma me and a	ay n addre	ot be sold or used by any pe ess of any political committee	erson f to so	for t	he	pur ntrib	po	se of	f so fro	oliciting	contribu	itions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	Uni	itedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) LINDLEY, SHEILA, , ,	or Full C)rgai	nization Name	[Date	e of	Re	ece	eipt				
	Mailing Address 102 NORMANDY CT						™ 1	/	l	D 26		/ Y	y y 2018	Y
	City	State MS		Zip Code					-			-	′398526′	
	MADISON	IVIS		39110-6711	/	Amo	ount	of	Ea	ach F	Rec	ceipt thi	is Period	1
	FEC ID number of contributing federal political committee.	С							-			- T	41	.70
	Name of Employer (for Individual) United HealthCare Services Inc		upat d Dir	tion (for Individual)			Me	emo	o It	em				
	Receipt For:	aareaate	Yea	ar-to-Date ▼										
	Primary General Other (specify) ▼	99109410	-	323.18	P/	/R [Ded	uctio	on	(\$13	.90) Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initial) SENDEN, SCOTT, , ,	or Full C	Orgai	nization Name		Date	e of	Re	ece	eipt				
	Mailing Address 6285 BUTTERWORTH LANE						™ 1	/	ľ	D 26	- 1	/ Y	y y 2018	Y
	City CORCORAN	State MN		Zip Code 55340-9406									434526 1 is Period	
	FEC ID number of contributing federal political committee.	С							,			- T	42	.12
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Security Risk Mgmt			Me	emo	o It	em				
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 322.92	P/	/R D	Dedu	uctio	on	(\$14	.04	l Bi-We	ekly)	
	Full Name of Individual (Last, First, Middle Initial) RUSH, ROBERT, , ,	or Full C	Orgai	nization Name		Date	ə of	Re	ece	eipt				
	Mailing Address 4735 BYWOOD CT						 ∣1	/	ľ	26		/ Y	2018	Y
	,	State		Zip Code		Tr	ans	act	ior	n ID :	P	R26277	438526	17
	COLORADO SPRINGS	CO		80906-5936	/	Amo	ount	of	Ea	ach F	Rec	ceipt thi	is Perioc	1
	FEC ID number of contributing federal political committee.	С							,			y	166	.65
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual)			Me	emc	o It	tem				
	Receipt For: A Primary General Other (specify)	ggregate	Yea	ur-to-Date ▼ 833.25	P	/R [Ded	ucti	on	(\$55	5.5	5 Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)												250	47
T	OTAL This Period (last page this line number only)		·····	Í				-			-		

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		Use separate schedule(s)	(check only one)
II EIVIIZED RECEIFIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle I A. SEGUIN, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 3830 CALYPSO RD			M M / D D / Y Y Y Y 11 26 2018
City HOLT	State MI	Zip Code 48842-7704	Transaction ID : PR2627749252617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgr II	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle I NAKAJIMA, KENICHI, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 15822 BELFAST LANE			11 / D D / Y Y Y Y Y 26 2018
City HUNTINGTON BEACH	State CA	Zip Code 92647-3104	Transaction ID : PR2628319052617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.70
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Cnslt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)
Full Name of Individual (Last, First, Middle I MANNING, KIM, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 12703 DEER CREEK DRIV			M M / D D / Y Y Y Y 11 26 2018
City OMAHA	State NE	Zip Code 68142-1762	Transaction ID : PR2628331452617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Ass	upation (for Individual) c Dir Mktg	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			113.82
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Summary Page	×	11a		11	1b	1	1c	12	_	
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	y information copied from such Reports and Statem for commercial purposes, other than using the nam												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (I	UnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) o VANDERWALDE, LAMBERT, , ,	r Full C	Drganization Name		Date o	f Re	ece	eipt					
	Mailing Address 45 AUDUBON CAUSEWAY				M N 11	/		D D 26	/	Y	2018		
		tate L	Zip Code								32352		
		-	33462-4756	- 4	Amoun	it of	Ea	ach R	eceij	pt this	s Perio	bd	_
	FEC ID number of contributing federal political committee.	;			Ľ.		-	-		-	57	6.90	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P, Govt Research		N	lemc	o It	em					
	Receipt For: Age Primary General Other (specify) ▼	gregate	Year-to-Date ▼ 4422.90	P	P/R Dec	ductio	ion	(\$192	2.30	Bi-We	ekly)		
B.	Full Name of Individual (Last, First, Middle Initial) o	r Full C	Drganization Name		Date o	of Re	ece	eipt					
	Mailing Address 180 SUMMIT LANE				[™] 11	/		D D D 26	/	Y	y 2018	Y	
		tate PA	Zip Code 19004-2931		Trans Amoun						35752 8 Perio	-	
	FEC ID number of contributing federal political committee.	;					,			-	17	3.88	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) d Dir		N	lemc	o It	em					
	Receipt For: Age Primary General Other (specify) ▼	gregate	Year-to-Date ▼ 1333.08	P	/R Dec	luctio	on	(\$57.9	96 B	i-Wee	ekly)		
С.	Full Name of Individual (Last, First, Middle Initial) o BROERSE, DEBRA, , ,	r Full C	Drganization Name		Date o	of Re	ece	eipt					
	Mailing Address 443 FARLEY DR				^M 11	/	Γ	D D D 26	/	Y	2018	Y	
	5	tate N	Zip Code 46214-3572								91352		
	FEC ID number of contributing federal political committee.				Amoun	it of	Ea	ach R	eceij	pt this		od 2.12	
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual)		N	lemo	o It	tem					
	Receipt For: Age Primary General Other (specify)	gregate	Year-to-Date	P	P/R Dec	ducti	ion	(\$14.	.04 B	3i-Wee	əkly)		
s	UBTOTAL of Receipts This Page (optional)										79	2.90	
Т	OTAL This Period (last page this line number only).		····· •				-			-		-	

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			for each category of the Detailed Summary Page		× 11a	11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group	p PAC)				
A.	Full Name of Individual (Last, First, Middle Initia MALIK, SHKEELA, , ,	al) or Full O	rganization Name		Date of	Receipt			
	Mailing Address 4410 APPLE VALLEY LN				M M 11	/ D 26		ү ү 2018	Y
	City W BLOOMFIELD	State MI	Zip Code 48323-2804				: PR2628 Receipt th		
	FEC ID number of contributing federal political committee.	C					-	41.	70
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Clin Qlty		M	emo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.18	8	P/R Ded	uction (\$1	3.90 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initia ERICKSON, ALYSSA, , ,	al) or Full Oi	rganization Name		Date of	Receipt			
	Mailing Address 6430 POLARIS LANE N				M M 11	/ D		ү ү 2018	Ŷ
	City MAPLE GROVE	State MN	Zip Code 55311-4320	-			: PR26287 Receipt th		
	FEC ID number of contributing federal political committee.	С						200.	_
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp		M	emo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 481.3	4	P/R Ded	uction (\$17	72.89 Bi-W	/eekly)	
с.	Full Name of Individual (Last, First, Middle Initia KOSHY, MATHEW, , ,	al) or Full Oi	rganization Name		Date of	Receipt			
	Mailing Address 311 HAMLET DRIVE				11 ^M	/ D	6	ү 2018	
	City CHALFONT	State PA	Zip Code 18914-1847	-			: PR2628 Receipt th		
	FEC ID number of contributing federal political committee.	С						84.	45
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Iktg Rsch Cnslt		M	emo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 281.50		P/R Ded	uction (\$2	8.15 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)			►			. ,	326.	84
т	OTAL This Period (last page this line number or	nly)		····· Þ					

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TEMIZED RECEIPTS			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	1 17					
	nformation copied from such Reports and Sta commercial purposes, other than using the n				for the		oose of	soliciting	contrib	utions					
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	I PAC (L	JnitedHealth Group P/	AC)											
	II Name of Individual (Last, First, Middle Initia IANSEN, YVETTE, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt								
Ma	ailing Address 10524 MUIRFIELD DRIVE				M M / D D / Y Y Y Y 11 26 2018										
Cit N	ty APERVILLE	State IL		Transaction ID : PR2628807152617 Amount of Each Receipt this Period											
	EC ID number of contributing deral political committee.	С					-		42	2.12					
Op	ame of Employer (for Individual) otum Services, Inc		pation (for Individual) Recruit		Me	emo	Item								
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P	P/R Ded	uctio	on (\$14.	04 Bi-We	eekly)						
	III Name of Individual (Last, First, Middle Initia HOMPSON, BRUCE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt								
	ailing Address 2826 HEDGEROW DRIVE				M M 11	/	D D D 26	/ Y	ү ү 2018	Ŷ					
Cit	ty ALLAS	State TX	Zip Code 75235-7590	-			-	PR26288							
FE	EC ID number of contributing deral political committee.	C		Amount	OT	Each R	eceipt th	576							
	ame of Employer (for Individual) ited HealthCare Services Inc	Occu VP (Memo Item												
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)											
	III Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Re	ceipt								
	ailing Address 21066 ASHLEY LANE	1 -			M M 11	/	D 26	JL	2018 Y	_					
Cit _L/	ty AKE FOREST	State CA	Zip Code 92630-5867				-	PR2629							
	EC ID number of contributing deral political committee.	С					,	, <u>,</u>	180	0.00					
Ur	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) Ied Clin Ops		Me	emo	Item								
Re	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1380.00	P/R Deduction (\$60.00 Bi-Weekly)											
	TOTAL of Receipts This Page (optional)		•			_	y .		799	.02					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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ITEMIZED RECEIPTS		Detailed Summary Page	× 11a	11b	11c	12							
			13	14	15	16	17						
Any information copied from such Re or for commercial purposes, other the													
NAME OF COMMITTEE (In Full)	orporated PAC (Uni	tedHealth Group PA	AC)										
Full Name of Individual (Last, Firs	t, Middle Initial) or Full Organ	nization Name	Date of	Date of Receipt									
Mailing Address 16 BEACH WOO	D ROAD		11 26 2018										
City FERNANDINA BEACH	State FL	Zip Code 32034-6504		action ID : F of Each Re									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc	Occupat Dir Fin	ion (for Individual)	Me	mo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 884.58	P/R Dedu	uction (\$38.4	l6 Bi-We	ekly)							
Full Name of Individual (Last, Firs SAYEED, OMER, , ,		nization Name	Date of	Receipt									
	Mailing Address 2239 HOLLISTON AVE												
City ALTADENA	State CA	Zip Code 91001-3213		of Each Re									
FEC ID number of contributing federal political committee.	С			157.89									
Name of Employer (for Individual) Optum Services, Inc		ion (for Individual) isory Svc	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 842.08	P/R Deduction (\$52.63 Bi-Weekly)										
Full Name of Individual (Last, Firs OTTESON, WILLIAM, , ,		nization Name	Date of	Receipt									
Mailing Address 4545 OXFORD A			M M 11	/ D D 26	/ Y	ү ү 2018							
City EDINA	State MN	Zip Code 55436-1405		of Each Re									
FEC ID number of contributing federal political committee.	С			,	,	115.							
Name of Employer (for Individual) United HealthCare Services Inc	· · ·	ion (for Individual) Gen Counsel	Me	emo Item									
Receipt For: Primary General Other (specify)	Aggregate Yea	r-to-Date ▼ 884.58	P/R Dedu	uction (\$192	.30 Bi-V	/eekly)							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle I MILLIGANJR, CHARLES, , ,	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address 6901 RIM ROCK CIRCLE N	W		11 26 2018										
City ALBUQUERQUE	State NM	Zip Code 87120-3196	Transaction ID : PR2632083552617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		120.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I HIBBERT, LINDA, , ,	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address 924 BENTLEY COURT			M M / D / Y										
City CHALFONT	State PA	Zip Code 18914-3762	Transaction ID : PR2632085352617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.66										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		846.59	P/R Deduction (\$38.33 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I NAPOLITANO, DIANE, , ,	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9 CHESTNUT COURT	-		11 / D D / Y Y Y Y Y 11 26 / 2018										
City BASKING RIDGE	State NJ	Zip Code 07920-3100	Transaction ID : PR2632087752617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.12										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			238.78										
TOTAL This Period (last page this line number	er only)												

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middl GORSUCH, KIRSTEN, , , Mailing Address 2780 COUNTRYSIDE DF	RIVE WEST	-	Date of Receipt
City ORONO	State MN	Zip Code 55356-9676	Transaction ID : PR2632087852617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	VP	upation (for Individual) Comm Year-to-Date 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle TUFFIN, MICHAEL, , , Mailing Address 5904 ASHBY MANOR PL		rganization Name	Date of Receipt
City ALEXANDRIA FEC ID number of contributing federal political committee.	State VA	Zip Code 22310-2267	11 26 2018 Transaction ID : PR2632087952617 Amount of Each Receipt this Period 576.90 576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Public Affairs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middl BARTEN, TIMOTHY, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 2294 164TH AVE NW	State	Zip Code	11 26 2018 Transaction ID : PR2632854952617
ANDOVER FEC ID number of contributing federal political committee.	C	55304-2156	Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc Receipt For: Primary General Other (specify)	Dir f	upation (for Individual) Fin Year-to-Date ▼ 221.26	P/R Deduction (\$9.62 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	l)		1182.66
TOTAL This Period (last page this line num	ber only)		

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		Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle ORRICK, VERONICA, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 10403 SANTA RITA ST			M M / D D / Y Y Y Y 11 26 2018										
City CYPRESS	State CA	Zip Code 90630-4221	Transaction ID : PR2632858552617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		42.12										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Itwk Prgm Mgr	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. TEMPLE, MARTHA, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 194 LITTLE LANE			11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City DURHAM	State CT	Zip Code 06422-1303	Transaction ID : PR2632873652617										
FEC ID number of contributing		00422-1303	Amount of Each Receipt this Period										
federal political committee.	C		576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. WALTHOUR, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5049 COLFAX AVE S			M M / D D / Y Y Y Y 11 26 2018										
City MINNEAPOLIS	State MN	Zip Code 55419-1145	Transaction ID : PR2632877052617 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		115.38										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Rsch	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			734.40										
TOTAL This Period (last page this line number	er only)												

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	y information copied from such Reports and Staten for commercial purposes, other than using the nam						for	the		005	se of		liciting	contril	outio	าร
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (I	Unit	edHealth G	roup PAC	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) of KRUPNICK, BRUCE, , ,	or Full C	Organi	zation Name			Date	e of	Re	cei	ipt					
	Mailing Address 5616 GATE PARK RD	State		Zip Code	11 / 26 / Y Y Y Y 2018 Transaction ID : PR2632878052617											
		MN	1	55436-2208						-					-	
	FEC ID number of contributing federal political committee.				Amount of Each Receipt this Period											
	Name of Employer (for Individual) Optum Services, Inc		·	on (for Individual) ctitioner 3				Me	emo	o Ite	em					
	Receipt For: Ag Primary General Other (specify) ▼	igregate	Year-	-to-Date ▼ 3	22.98	P	/R [Dedu	uctic	on	(\$13.	.99	Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initial) o PLATT, LAWRENCE, , ,	or Full C	Organi	zation Name			Dat	e of	Re	cei	ipt					
	Mailing Address 3830 KING STREET								11 26 / Y Y Y Y 2018							
	City S ALEXANDRIA		Zip Code 22302-1906		Transaction ID : PR26328807520 Amount of Each Receipt this Period								-			
	FEC ID number of contributing federal political committee.	C							576.90							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	Memo Item													
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Year-	-to-Date ▼ 44	22,90	P/	/R [Dedu	uctic	on ((\$192	2.30	0 Bi-We	eekly)		
с.	Full Name of Individual (Last, First, Middle Initial) of PARR, MICHAEL, , ,	or Full C	Organi	zation Name		1	Date	e of	Re	cei	ipt					
	Mailing Address 2625 LEROY LANE							11 ^M	/	Ľ	26		/ Y	2018	Y]
	5	State MI	4	Zip Code 48324-2237									26328 eipt thi			
	FEC ID number of contributing federal political committee.							_		9			y	4	1.70	
	Name of Employer (for Individual) United HealthCare Services Inc		cupatio c Dir	on (for Individual)			μ	Me	emo	o Ite	em					
	Receipt For: Ag Primary General Other (specify)	igregate	Year		23.18	P	/R	Dedi	uctio	on	(\$13.	.90	Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)				····· •					,		l	,	66	0.57	
Т	OTAL This Period (last page this line number only)									-					-	

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. SARGENT, GLORIA, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 3659 HEMPSTEAD			11 26 2018									
City SAINT CHARLES	State MO	Zip Code 63301	Transaction ID : PR2634119352617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. HAYES, TREVOR , , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 3108 SONIA DRIVE			11 / D D / Y Y Y Y Y 26 2018									
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2634166852617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		41.61									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sc Dir Comm	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.39	P/R Deduction (\$13.87 Bi-Weekly)									
Full Name of Individual (Last, First, Middle HAPGOOD, WADE, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 330 NW 82ND			11 26 Y Y Y Y Y 2018									
City TOPEKA	State KS	Zip Code 66617-2223	Transaction ID : PR2634167052617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		173.07									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1326.87	P/R Deduction (\$57.69 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			256.80									
TOTAL This Period (last page this line numb	er only)											

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the	purp	ose of	soliciting	contrib	utions				
$\overline{\ }$	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Initia ROALDI, MICHAEL, , ,	al) or Full Oi	rganization Name		Date of	Bec	ceint							
	Mailing Address 4720 HARRIET AVE			11 26 2018										
	City	State	Zip Code	-		actio		PR26341		17				
	MINNEAPOLIS	MN	55419-5434				-	eceipt th						
	FEC ID number of contributing federal political committee.	C					,		115	5.50				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.50	P	/R Ded	uctio	n (\$38.	50 Bi-We	ekly)					
B.	Full Name of Individual (Last, First, Middle Initia PRIBLE, JOHN, , ,	al) or Full Oi	rganization Name		Date of	Rec	ceipt							
	Mailing Address 1923 SHIVER DR				M M	/	D D 26	/ Y	2018	Y				
	City ALEXANDRIA	State VA	Zip Code 22307-1629	-				PR26346						
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		, 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name		Date of	Rec	ceipt							
	Mailing Address 2915 CATHEDRAL AVENUE N	W			^M 11	/	D D D 26	/ Y	2018	Ŷ				
	City WASHINGTON	State DC	Zip Code 20008-3406					PR2634						
	FEC ID number of contributing federal political committee.	С			Amount					6.90				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs		Me	emo	ltem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			,		1269	0.30				
т	OTAL This Period (last page this line number or	nly)		-			,							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
	for commercial purposes, other than using the r			person for the purpose of soliciting contributions					
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	UnitedHealth Group F	PAC)					
Α.	Full Name of Individual (Last, First, Middle Initia LARAMEE, CHRISTINE, , ,	al) or Full C	Drganization Name	Date of Receipt					
	Mailing Address 2902 S ESPERANZA AVENUE		11 26 / Y Y Y Y Y 11 26 2018						
	City TAMPA	State FL	Zip Code 33629-7119	Transaction ID : PR2634881552617					
		' -	55029-7119	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		138.45					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) d Dir	Memo Item					
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼		1061.45	P/R Deduction (\$46.15 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia CRAWFORD, KIMBERLY, , ,	al) or Full C	Drganization Name	Date of Receipt					
	Mailing Address 309 NE DREAMWEAVER AVE	11 26 2018							
	City LEES SUMMIT	State MO	Zip Code 64086-8445	Transaction ID : PR2634884552617 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		78.21					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) sc Dir Mktg	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 286.77	P/R Deduction (\$26.07 Bi-Weekly)					
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia PESCATELLO, SARA, , ,	al) or Full C	Drganization Name	Date of Receipt					
	Mailing Address 2149 CALIFORNIA STREET N APT #D	W		11 26 2018					
	City	State	Zip Code	Transaction ID : PR2634888552617					
	WASHINGTON	DC	20008-1834	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		576.90					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Govt Affs	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			▶ 793.56					
т	OTAL This Period (last page this line number of	nly)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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ITEMIZED RECEIPTS				for each category of the Detailed Summary Page		×	-		11	-	11c	F	12		٦
	y information copied from such Reports and Stateme for commercial purposes, other than using the name									se of					17 S
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (Un	itedHealth Group	PAC	;)									
Α.	Full Name of Individual (Last, First, Middle Initial) or POWER, ROBERT, , ,	r Full C	Drga	nization Name	Date of Receipt										
	Mailing Address 20 SMITH LANE	tate		Zip Code		11 26 2018 Transaction ID : PR2634892852617									
	5	IY		11780-3810			Amount								
	FEC ID number of contributing federal political committee.	;					Anoun		1		eceipt	u iis		5.38	
	Name of Employer (for Individual) Optum Services, Inc		cupa Fin	tion (for Individual)			M	emo	o Ite	em					
	Receipt For: Agg Primary General Other (specify) ▼	pregate	Yea	ar-to-Date ▼ 884.58		P	/R Ded	uctio	on	(\$38.	46 Bi-\	Nee	kly)		
в.	Full Name of Individual (Last, First, Middle Initial) or REED, PAM, , ,	r Full C	Drga	nization Name			Date of	Re	ecei	ipt					
	Mailing Address 2983 BLACKSTONE						^M ^M 11	/	Ľ	26	/		y y 2018	Y	
		tate TX		Zip Code 75033-7389			Trans		-		PR263 eceipt				
	FEC ID number of contributing federal political committee.	C						57.69							
	Name of Employer (for Individual) United HealthCare Services Inc		•	ition (for Individual) r Acct Mgmt			M	emo	o Ite	em					
	Receipt For: Agg Primary General Other (specify) ▼	pregate	Yea	ar-to-Date ▼ 442.29		P	'R Ded	uctic	on ((\$19.:	23 Bi-V	Veel	kly)		
C.	Full Name of Individual (Last, First, Middle Initial) or GILREATH, BRIAN, , ,	r Full C	Drga	nization Name			Date of	Re	ecei	ipt					
	Mailing Address 236 JERRY ROAD			1			M M 11	/	L	26	JЦ		2018 Y	_	
	5	tate CT		Zip Code 06118-3124			Trans				PR263				
	FEC ID number of contributing federal political committee.	;					inouri		u		J			a 3.86	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) p Cons			Μ	emo	o Ite	em					
	Receipt For: Agg Primary General Other (specify)	gregate	Yea	ar-to-Date ▼ 221.26		P	/R Ded	uctio	on	(\$9.6	2 Bi-W	/eek	ly)		
s	UBTOTAL of Receipts This Page (optional)				►				,		. ,		201	.93	
Т	OTAL This Period (last page this line number only)				▶				-						

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. PAYET, KEITH, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 405 ENCLAVE CT			M M / D D / Y Y Y Y Y 11 26 2018								
City BRENTWOOD	State TN	Zip Code 37027-7894	Transaction ID : PR2635440052617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3076.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. NGUYEN, ANTHONY, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 17816 PORTO MARINA		M M / D D / Y Y Y Y Y 11 26 2018									
City PACIFIC PALISADES	State CA	Zip Code 90272-4154	Transaction ID : PR2635444052617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		157.89								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Population HIth	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 842.08	P/R Deduction (\$52.63 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. ELLER, JESSE, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 28108 N 17TH DR	1		11 26 / Y Y Y Y Y								
City PHOENIX	State AZ	Zip Code 85085-5352	Transaction ID : PR2635445152617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.12								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			776.91								
TOTAL This Period (last page this line numb	per only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle EICHENLAUB, MANDIE, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 6607 CINDY LANE			M M / D D / Y Y Y Y 11 26 2018									
City HOUSTON	State TX	Zip Code 77008-5110	Transaction ID : PR2635448552617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		214.26									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 785.62	P/R Deduction (\$71.42 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. ROOS, THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 3199 KAGEN AVE NE			11 / D D / Y Y Y Y Y 26 2018									
City SAINT MICHAEL	State MN	Zip Code 55376-3416	Transaction ID : PR2635451252617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Chief Acctng Off	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle NELSON, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 3253 MARSCHALL RD			11 26 2018									
City SHAKOPEE	State MN	Zip Code 55379-3337	Transaction ID : PR2636719352617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Ass	upation (for Individual) c Dir Recruit Global	Memo Item									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			833.28									
TOTAL This Period (last page this line number	er only)											

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	NC)						
Full Name of Individual (Last, First, Middl GRIMES, MATT, , ,		rganization Name	Date of Receipt						
Mailing Address 136 SOUTH PERKINS R	1	The Octo	11 / 26 / Y Y Y Y 2018						
City MEMPHIS	State TN	Zip Code 38117-3233	Transaction ID : PR2636733352617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. SMITH, KENNETH, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1200 WASHINGTON ST	1		11 26 Y Y Y Y Y 2018						
City BOSTON	State MA	Zip Code 02118-2132	Transaction ID : PR2636734552617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. QUICK, JAMES, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 114 MOUNTAIN RIDGE			11 26 / Y Y Y Y 2018						
City JONESBOROUGH	State TN	Zip Code 37659-6382	Transaction ID : PR2637679552617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		64.41						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Cust Service	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.58	P/R Deduction (\$21.47 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	al)		221.91						
TOTAL This Period (last page this line nun	nber only)								

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	ted PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle In PEDERSEN, NICHOLAS, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1862 CLOVER MEADOW D	R		M M / D D / Y Y Y Y Y 11 26 2018							
City CHASKA	State MN	Zip Code 55318-5400	Transaction ID : PR2637684752617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comp	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle II LARSON, CHRISTINE, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3360 VISTA COURT			11 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State MN	Zip Code	Transaction ID : PR2637688752617							
		55033-3347	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Anlys Cnslt	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻	1							
Primary General Other (specify) ▼		322,92	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In FLOOD, ANDREW, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4833 TOWNES ROAD	1		11 26 / Y Y Y Y Y 2018							
City EDINA	State MN	Zip Code 55424-1239	Transaction ID : PR2637693252617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) cipal Data Scientist	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			126.36							
TOTAL This Period (last page this line numbe	r only)									

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	I ay not be sold or used by any puddress of any political committe	erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P/	λC)						
Full Name of Individual (Last, First, Middle I A. LIST, CHRISTINE, , ,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 340 DAVIS ST			M M / D D / Y Y Y Y Y 11 26 2018						
City NORTHBOROUGH	State MA	Zip Code 01532-2420	Transaction ID : PR2637694652617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. SIVLEYIII, HARRY, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 12020 WEXFORD OVERLC			11 / D D / Y Y Y Y Y 26 2018						
City ROSWELL	State GA	Zip Code 30075-1454	Transaction ID : PR2638106652617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		57.69						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) cc Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I LOGAN, BRETT, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 121 3RD STREET NE			11 / D D / Y Y Y Y 11 26 2018						
City WASHINGTON	State DC	Zip Code 20002-7313	Transaction ID : PR2638112752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		114.30						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Ass	upation (for Individual) c Dir Regl Affs	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 885.81	P/R Deduction (\$38.10 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			287.37						
TOTAL This Period (last page this line numbe	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 person for the purpose of soliciting contributions per to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	porated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, M A	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 111 4TH AVE N UNIT 703			11 26 2018						
City MINNEAPOLIS	State MN	Zip Code 55401-1538	Transaction ID : PR2638114752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		115.38						
Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, M ZEGLINSKI, MICHAEL, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1 TRIMONT LANE 	State	Zip Code	11 26 Y Y Y Y Y 2018						
PITTSBURGH	PA	15211-1206	Transaction ID : PR2639701852617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, M C. EDWARDS, MICHAEL, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 379 DURHAM ROAD			11 / D D / Y Y Y Y 26 2018						
City WYCKOFF	State NJ	Zip Code 07481-1018	Transaction ID : PR2639702052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (opti-	onal)		1269.18						
TOTAL This Period (last page this line r	number only)								

Use separate schedule(s)

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			Use separate schedule(s)		(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12	<u> </u>	
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full)		duress of any political committee	10 50					i commu		
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia CALABRESE, DAVID, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 85 LITTLE POND RD				M M 11	/	D D 26	/ Y	y y 2018	Y	
	City NORTHBOROUGH	State MA	Zip Code 01532-1686	_					70835261 is Period	7	
	FEC ID number of contributing federal political committee.	С							715.	50	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharmacy Programs		Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4285.26	F	P/R Dedu	uctio	on (\$238	3.50 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initia KAHL, ROBERT, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 28101 W SONOMA PASS				M M 11	/	D D D 26	/ Y	2018	Y	
	City LAKEMOOR	State IL	Zip Code 60051-6673						2615261	7	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 42.12								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia MESSING, KEITH, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 9 BUTTERFIELD DR	1			M M 11	/	D D D 26	/ Y	2018 Y	Y	
	City GREENLAWN	State NY	Zip Code 11740-2001						73495261 is Period	7	
	FEC ID number of contributing federal political committee.	C					y .	y	42.7	12	
Name of Employer (for Individual) Optum Services, Inc			Occupation (for Individual) Lead Software Engineer								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	F	P/R Dedu	uctio	on (\$14.	.04 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)		•••••				, .	,	799.7	74	
т	OTAL This Period (last page this line number or	nly)	••••••	-				1. ap.			

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		Use separate schedule(s)	(check only one)						
IIEIWIIZED KEGEIPIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)		·····							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle SMITH, ANTHONY , , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1 ROCKAWAY AVE			M M / D D / Y Y Y Y 11 26 2018						
City MARBLEHEAD	State MA	Zip Code 01945-1726	Transaction ID : PR2639746252617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		130.41						
Name of Employer (for Individual) Optum Services, Inc	Dir	upation (for Individual) Clnt Svc Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 869.40	P/R Deduction (\$43.47 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SURRELL, CHRISTOPHER, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 620 DARTINGTON WAY	1-		11 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	State GA	Zip Code	Transaction ID : PR2639758152617						
JOHNS CREEK	GA	30022-8045	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		218.16						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Other (specify) ▼		1535.52	P/R Deduction (\$72.72 Bi-Weekly)						
Full Name of Individual (Last, First, Middle . HEPLER, CAREY, , ,	,	organization Name	Date of Receipt						
Mailing Address 2936 RIVERSIDE AVENUE APT 3			11 / D D / Y Y Y Y 26 2018						
City JACKSONVILLE	State FL	Zip Code 32205-8133	Transaction ID : PR2639760752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		41.70						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			390.27						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

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			Use separate schedule(s)	(ch	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	47		
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
\setminus	NAME OF COMMITTEE (In Full)	//										
]	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Initia JENSENMOORE, KIMBERLY, , ,	ll) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 230 ROSE AVENUE				M M 11	/	D D D 26	/ Y	ү ү 2018	Y		
	City MILL VALLEY	State CA	Zip Code 94941-1728						7035261 is Period	7		
	FEC ID number of contributing federal political committee.	С				U			74.	28		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	Item					
Boogint For:			Year-to-Date ▼ 575.67		P/R Dedu	uctio	on (\$24.	76 Bi-We	eekly)			
B.	Full Name of Individual (Last, First, Middle Initia BIGHAM, ANNE, , ,	ll) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 2610 HOLLY LANE NORTH	Otata	Zin Oode	11 / 26 / Y Y Y Y 11 26								
	City PLYMOUTH	State MN	Zip Code 55447-1727		Transaction ID : PR2639771452617 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С	192.30									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4038.30	l f	P/R Dedu	uctic	on (\$192	2.30 Bi-W	'eekly)			
C.	Full Name of Individual (Last, First, Middle Initia FLEMING, SUSAN, , ,	ll) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 2336 W MEDILL AVE	1			M M 11	/	D D D 26	/ Y	ү ү 2018	Y		
	City CHICAGO	State IL	Zip Code 60647-3234						77375261 is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		666.	66		
	Name of Employer (for Individual) Optum Services, Inc	Occu VP M		Me	ema	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1333.32		P/R Ded	uctio	on (\$222	2.22 Bi-W	/eekly)			
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,	9	933.:	24		
т	OTAL This Period (last page this line number or	וy)	••••••	-					4			

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)
Full Name of Individual (Last, First, Middle A. DUTTA, SUMIT, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 1112 W WRIGHTWOOD A	VE		M M / D D / Y Y Y Y Y 11 26 2018
City CHICAGO	State IL	Zip Code 60614-1315	Transaction ID : PR2639773852617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		576.90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg Chief Med Off	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. KETTLEWELL, KELLY, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 457 N OAK ST			11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ELMHURST	State IL	Zip Code 60126-2215	Transaction ID : PR2639774152617
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	P/R Deduction (\$0.10 Bi-Weekly)
Full Name of Individual (Last, First, Middle FITZGERALD, JAMES, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 6206 CLIFTON COURT			M M / D D / Y Y Y Y 11 26 2018
City PLAINFIELD	State IL	Zip Code 60586-1761	Transaction ID : PR2639783052617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		46.14
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Sr N	upation (for Individual) Igr I O Engineering	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 353.74	P/R Deduction (\$15.38 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			623.14
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(che	(check only one)								
			for each category of the Detailed Summary Page	×	11a	\vdash	11b	11c	12	— 1 – 1		
	formation copied from such Reports and Sta commercial purposes, other than using the n					purp						
	ME OF COMMITTEE (In Full) nitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)								
A . NE	Name of Individual (Last, First, Middle Initia ELSON, ELLEN, , ,	l) or Full Oi	rganization Name		Date of	Rec	ceipt					
Mai	ling Address 11882 TILDEN PLACE				M M 11	/	D D D 26	/ Y	y y 2018	Ŷ		
City	, ELLINGTON	State FL	Zip Code 33414-6056					PR26397 eceipt th				
	C ID number of contributing eral political committee.	С					y		576.	90		
Opt	ne of Employer (for Individual) um Services, Inc		upation (for Individual) Clnt Svc Acct Mgmt		Me	emo	Item					
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P	P/R Dedu	uctio	ın (\$192	2.30 Bi-W	/eekly)			
B. SI	Name of Individual (Last, First, Middle Initia MITH, DELYLE, , ,	l) or Full Oi	rganization Name		Date of	Rec	ceipt					
Mai City	ling Address PO BOX 447	State	Zip Code		11 ^M	/	26	L	2018			
	PROSPECT	L 20 Code IL 60056-0447				Transaction ID : PR2639801552617 Amount of Each Receipt this Period						
FEC	C ID number of contributing eral political committee.					111.99						
	ne of Employer (for Individual) um Services, Inc		upation (for Individual) Director Technology		Me	emo	Item					
Rec	eeipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 887.92	P/R Deduction (\$37.33 Bi-Weekly)								
	Name of Individual (Last, First, Middle Initia	l) or Full Oi	rganization Name		Date of	Rec	ceipt					
	ling Address 812 BARNES STREET				11 ^M	/	26		2018			
City MC	, CKINNEY	State TX	Zip Code 75069-5549		Transaction ID : PR2640450152617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.		С			<u> </u>		9		57.	69		
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) Dir Acct Mgmt		Me	emo	Item					
	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 442.29]	P/R Ded	uctio	on (\$19.2	23 Bi-We	ekly)			
SUBT	OTAL of Receipts This Page (optional)			•			,		746.	58		
	TOTAL of Receipts This Page (optional)			•			5	· · ·	746.	5		

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			13 14 15 16 17 person for the purpose of soliciting contributions per to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle GALLOWAY, MERCEDEIS, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 6737 LANCER DRIVE			11 / D D / Y Y Y Y 11 26 2018					
City CHARLOTTE	State NC	Zip Code 28226-7729	Transaction ID : PR2640452052617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		41.97					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$13.99 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. MOHORIC, MARGARET, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 6000 REDONDO SIERRA	1		11 26 / Y Y Y Y 2018					
City RIO RANCHO	State NM	Zip Code 87144-0606	Transaction ID : PR2640460052617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.12					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle . JOSEPH, TAYLOR, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 2077 BERKELEY AVE		7.0.1	M M / D D / Y Y Y Y 11 26 2018					
City SAINT PAUL	State MN	Zip Code 55105-1203	Transaction ID : PR2640462452617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.86					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 221.26	P/R Deduction (\$9.62 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)		112.95					
TOTAL This Period (last page this line num	ber only)							

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			Use separate schedule(s)	(ch	(check only one)						
116	MIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12		
	r information copied from such Reports and Stat or commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
	Full Name of Individual (Last, First, Middle Initia STOW, CHRISTINA, , ,) or Full Or	rganization Name		Date of	Re	ceipt				
I	Mailing Address 4709 ALTON PL NW				м м 11	/	26) / Y	y y 2018	Ŷ	
	City WASHINGTON	State DC	Zip Code 20016-2041					PR26404 Receipt th			
	FEC ID number of contributing rederal political committee.	С							576	90	
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) External Affs		Me	emo	Item				
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 4422.90	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)		
	Full Name of Individual (Last, First, Middle Initia WILJANENHATHAWAY, AMY, , ,) or Full Or	rganization Name		Date of	Re	ceipt				
I	Mailing Address 369 135TH AVE	1			м м 11	1	26		2018	Y	
	City WAYLAND	State MI	Zip Code 49348-9402				-	PR26408 leceipt th			
	FEC ID number of contributing rederal political committee.	С							41	_	
	Name of Employer (for Individual) Dptum Services, Inc		upation (for Individual) Dvlp Cons		Me	emo	Item				
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ , 323.47	F	P/R Dedu	uctic	on (\$13.	83 Bi-We	ekly)		
	Full Name of Individual (Last, First, Middle Initia SCHMIDT, BURT, , ,) or Full Or	rganization Name		Date of	Re	ceipt				
-	Mailing Address 1810 STATESMAN DR				M M 11	/	26		2018		
	City WAUSAU	State WI	Zip Code 54403-5125					PR26408 leceipt th			
	FEC ID number of contributing ederal political committee.	С			<u> </u>		y .	. ,	36	93	
Name of Employer (for Individual) Optum Services, Inc			ipation (for Individual) olution Sales Executive		Me	emo	ltem				
I	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 283.13	F	P/R Ded	uctio	on (\$12	.31 Bi-We	eekly)		
รเ	JBTOTAL of Receipts This Page (optional)		•	·			,	.,	655.	32	
тс	TAL This Period (last page this line number on	ly)	•	-			.	. .			

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions are to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. SHARKEY, S PAUL, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8607 ELLISTON DRIVE			M M / D D / Y Y Y Y 11 26 2018							
City WYNDMOOR	State PA	Zip Code 19038-7957	Transaction ID : PR2640845452617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs SB KA	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. BRISSON, SAMUEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3408 YUKON AVENUE			M M / D D / Y Y Y Y 11 26 2018							
City ST LOUIS PARK	State MN	Zip Code 55426-3840	Transaction ID : PR2640854552617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Tech Proj-Prgm Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.02	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle). PIERCEHARRIS, PHELISHA,		rganization Name	Date of Receipt							
Mailing Address 3041 DEE ANN DRIVE			11 / D D / Y Y Y Y 26 / 2018							
City MEMPHIS	State TN	Zip Code 38119-9132	Transaction ID : PR2640866352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.70							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) oc Dir Clin Pract Perf	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	l)		125.82							
TOTAL This Period (last page this line num	ber only)									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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		Use separate schedule		(cheo	eck only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	,			
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
	NAME OF COMMITTEE (In Full)		duress of any political commute	, 10 301					r commu				
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Initia WAGNER, JOSEPH, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 3405 MEREDITH RIDGE ROAD)											
	City PHOENIX	State MD	Zip Code 21131-1456						87585261 is Period	7			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	upation (for Individual) Fin		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 962.46	P/F	R Dedu	uctio	on (\$44.	00 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initia WITT, JULIE, , ,	al) or Full O	rganization Name	D	ate of	Re	ceipt						
	Mailing Address 155 TALBERT TOWN LOOP			™ M 11	/	D D D 26	/ Y	y y 2018	Ŷ				
	City	State				-		7605261	7				
	MOORESVILLE	NC	28117-8069	A	mount	of	Each R	eceipt th	is Period				
	FEC ID number of contributing federal political committee.	C	42.12										
	Name of Employer (for Individual) Optum Services, Inc	Occu Sr D	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/F	R Dedu	uctic	on (\$14.0	04 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	D	ate of	Re	ceipt						
	Mailing Address 128 ASHBROOKE TRAIL			_ L	^M 11	1	D D D 26		2018				
	City MADISON	State MS	Zip Code 39110-6855						37655261 is Period	7			
	FEC ID number of contributing federal political committee.	С		ļ			y =	. <u>,</u>	115.3	38			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	upation (for Individual) ïn		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 884.58	P/F	R Dedi	uctio	on (\$38.	46 Bi-We	ekly)					
s	UBTOTAL of Receipts This Page (optional)			. [289.5	50			
т	OTAL This Period (last page this line number or	וy)		<u></u>			,	, ,					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12					
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or for commercial purposes, other than using t	he name and a	ddress of any political committee	e to solicit	contri	butions	from such	n committe	90.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle WONG, PAMELA, , ,	Initial) or Full C	organization Name	Date	Date of Receipt								
Mailing Address 575 WARWICK AVENUE			M m / D D / Y Y Y Y Y 11 26 2018 2018 Transaction ID : PR2640876952617 Amount of Each Receipt this Period									
City SAN LEANDRO	State CA	Zip Code 94577-1943										
FEC ID number of contributing federal political committee.	С				-		42.1	2				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Clnt Relationship		Mem	io Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 294.84	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. METKO, SARA , , ,	Initial) or Full C	organization Name	Date	e of R	eceipt							
Mailing Address 23665 HIGHVIEW LANE				™ 1	/ D 26		2018	Y				
City LAKEVILLE	State MN	Zip Code 55044-6025				PR26408 Receipt th		,				
FEC ID number of contributing federal political committee.	C		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax		Mem	o Item							
Receipt For:	Aggregate	Year-to-Date V										
Other (specify) ▼		884.58	P/R D	educt	ion (\$38	.46 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle STEGMAN, PAM, , ,	Initial) or Full C	organization Name	Date	e of R	eceipt							
Mailing Address 401 2ND STREET NORTH #110			1	^M	26		2018					
City MINNEAPOLIS	State MN	Zip Code 55401-1578				Receipt th		7				
FEC ID number of contributing federal political committee.	С				y	9	41.7	0				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Prod Mgr		Mem	io Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R [Deduc	tion (\$13	3.90 Bi-W€	ekly)					
SUBTOTAL of Receipts This Page (optional).					, .	. ,	199.2	0				
TOTAL This Period (last page this line number	er only)											

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a 13		11b	11c		12 16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	g con	tributi	ons	
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	(C)								
A.	Full Name of Individual (Last, First, Middle Initia MINTO, RYAN, , ,	l) or Full Oi	rganization Name		Date of Receipt							
	Mailing Address 7500 WINGFOOT DRIVE				M M / D D / Y Y Y Y 11 26 2018							
	City RALEIGH	State NC	Zip Code 27615-5476	Transaction ID : PR2640882452617 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С								143.8	8	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1106.08	P	/R Ded	uctio	on (\$47.	96 Bi-We	eekly))		
в.	Full Name of Individual (Last, First, Middle Initia ADVANI, PROTIMA, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 7618 BRITTANY PARC CT			M M 11	1	D D D 26	/ Y	201	Y 18	Y		
	City FALLS CHURCH	State VA	Zip Code 22043-2907					PR26420			,	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P	/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly	y)		
С.	Full Name of Individual (Last, First, Middle Initia DASTVAR, DEAN, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 212 ROSS DR	1			^M 11	1	26		20 ⁻	18 [°]	Y	
	City VIENNA	State VA	Zip Code 22180-6720					PR2642			7	
	FEC ID number of contributing federal political committee.	С					,	, ,		42.1	2	
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) c Gen Counsel		Me	emc	tem					
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		••••••				, .	. ,		762.9	0	
т	OTAL This Period (last page this line number or	lly)		-			-	- 415		_		

SCHEDULE A (FEC Form 3X) DEOFIDTO

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 11c 13 14 15	12 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting	contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	NC)								
Full Name of Individual (Last, First, Middle BRUECKMAN, BRIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4601 PARK COMMONS D #417	RIVE		M M / D D / Y Y Y Y 11 26 2018								
City SAINT LOUIS PARK	State MN	Zip Code 55416-4993	Transaction ID : PR26420 Amount of Each Receipt th								
FEC ID number of contributing federal political committee.	С			576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHC Operations	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-W	/eekly)							
Full Name of Individual (Last, First, Middle B. MARTIN, STEPHANIE , , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7002 N VIA DE MANANA			11 / D / Y	2018							
City SCOTTSDALE	State AZ	Zip Code 85258-3951	Transaction ID : PR26428 Amount of Each Receipt th								
FEC ID number of contributing federal political committee.	С			115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Strat Accts	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle YOUNG, ALLISON, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 15222 ALMA MATER CT			11 26	2018 Y							
City BATON ROUGE	State LA	Zip Code 70810-8389	Transaction ID : PR26428 Amount of Each Receipt th								
FEC ID number of contributing federal political committee.	С			352.20							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2147.62	P/R Deduction (\$117.40 Bi-W	/eekly)							
SUBTOTAL of Receipts This Page (optional)				1044.48							
TOTAL This Period (last page this line numb	er only)										

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. LONG, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2900 THOMAS AVE S UNIT 1623			11 26 Y Y Y Y Y Y								
City MINNEAPOLIS	State MN	Zip Code 55416-4474	Transaction ID : PR2642831252617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle FOX, ELIZABETH, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1021 NORTH GARFIELD # #308		Zie Oode	11 / D D / Y Y Y Y 2018								
City ARLINGTON	State VA	Zip Code 22201-2559	Transaction ID : PR2642832052617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		288.45								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. KEISERJENKINS, KAREN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9325 MARTINS LAKE DR		Zin Code	11 / D D / Y Y Y Y Y 11 26 2018								
City ROSWELL	State GA	Zip Code 30076-2865	Transaction ID : PR2642834452617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		41.91								
Name of Employer (for Individual) United HealthCare Services Inc	Dir I	upation (for Individual) /Iktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.20	P/R Deduction (\$13.97 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			445.74								
TOTAL This Period (last page this line numb	per only)										

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		for each category of the Detailed Summary Page		11a 13		11b	11c	12	17			
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements mang the name and a	ay not be sold or used by any pe ddress of any political committee	erson for	r the p	ourp trib	ose of	soliciting	g contribu	tions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Midd CRESTA, BRIAN, , ,	lle Initial) or Full C	rganization Name	Da	Date of Receipt								
Mailing Address 5 OGDEN LANE			ľ	M M / D D / Y Y Y Y 11 26 2018								
City	State	Zip Code		Fransa	acti	on ID :	PR2642	83755261	7			
MIDDLETON	MA	01949-1669	An	nount	of	Each R	eceipt th	nis Period				
FEC ID number of contributing federal political committee.	C			115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	- C	Me	mo	ltem						
Receipt For:	I	Year-to-Date ▼	_									
Primary General Other (specify) ▼		884.58	P/R	R Dedu	ictic	on (\$38.	46 Bi-We	eekly)				
Full Name of Individual (Last, First, Midd B. WILLENBRING, LYNN, , ,	lle Initial) or Full C	rganization Name	Da	ate of	Re	ceipt						
Mailing Address 935 FERNDALE STREE UNIT 318			ľ	11 ^M	/	D D D 26	/ Y	2018	Y			
City MAPLEWOOD	State MN	Zip Code 55119-4145						33935261 nis Period				
FEC ID number of contributing federal political committee.	С			652.17								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	10	Me	mo	ltem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4347.80	P/R	Dedu	ctio	on (\$217	7.39 Bi-W	/eekly)				
Full Name of Individual (Last, First, Midd C. SIVERTSEN, DARREN, , ,	lle Initial) or Full C	rganization Name	Da	ate of	Re	ceipt						
Mailing Address 11632 SLEEPY HEAVE				^M 11	/	D D D 26	/ Y	2018	Y			
City LAS VEGAS	State NV	Zip Code 89138-7557						13265261 his Period				
FEC ID number of contributing federal political committee.	С					y	, y	115.	38			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R	R Dedu	uctio	on (\$38.	46 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional	al)							882.	93			
TOTAL This Period (last page this line nur	mber only)	·····										

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12	<u> </u>				
Any information copied from such Reports and or for commercial purposes, other than using t				he pu								
NAME OF COMMITTEE (In Full)	name anu a	and the arry political committee		JUIL		Suci						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle SOCZYNSKI, PAUL, , ,	,	rganization Name	Date	Date of Receipt								
Mailing Address 915 SOUTH 91ST STREET				M M / D D / Y Y Y Y 11 26 2018								
City WEST ALLIS	State WI	Zip Code 53214-2848				: PR2643 [,] Receipt th	19775261 his Period	7				
FEC ID number of contributing federal political committee.	С						112.5	50				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir		Merr	no Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 887.50	P/R I	Deduc	tion (\$37	7.50 Bi-We	eekly)					
Full Name of Individual (Last, First, Middle CRAGLE, STEVE, , ,	nitial) or Full C	rganization Name	Date	e of F	leceipt							
Mailing Address 6604 MOHAWK TRAIL			11 26 2018 Transaction ID : PR2643200652617									
City EDINA	State MN	Zip Code 55439-1030						7				
	_	00400-1000	Amo	ount o	i ⊨ach I	Receipt th	iis Period	_				
FEC ID number of contributing federal political committee.	С		745.50									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO		Merr	no Item							
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		4245.22	P/R D	Deduct	tion (\$24	l8.50 Bi-W	/eekly)					
Full Name of Individual (Last, First, Middle NEELY, MARC, , ,	nitial) or Full C	rganization Name	Date	e of F	leceipt							
Mailing Address 1159 BUFFALO RIDGE RD				[™]	/ 26		2018 Y	Y				
City CASTLE PINES	State CO	Zip Code 80108-8190				: PR26432 Receipt th	20315261 nis Period	7				
FEC ID number of contributing federal political committee.	С				y .	y	1113.0	00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Men	no Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3877.44	P/R [Deduc	tion (\$3	71.00 Bi-W	Veekly)					
SUBTOTAL of Receipts This Page (optional).					1		1971.0	00				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Uni	itedHealth Group PA	C)															
A.	Full Name of Individual (Last, First, Middle Initial) HAMMOND, MICHAEL, , ,	or Full O	Orgar	nization Name	[Date of Receipt														
	Mailing Address 244 NE 59TH TERR				11 26 / Y Y Y Y Y 11 26															
	3	State KS		Zip Code		Tr	ans	acti	ion	ID :	PR	26446	448526	17						
	ТОРЕКА	N3		66617-1661	_ /	٩mo	ount	of	Ea	ach R	ec	eipt thi	s Period	1						
	FEC ID number of contributing federal political committee.	0										115	.38							
	Name of Employer (for Individual) Optum Services, Inc		upat d Dii	ion (for Individual) r			Me	emo) It	em										
	Receipt For: Ad	gregate	Yea	ur-to-Date ▼																
	Primary General Other (specify) ▼		-	884.58	P	/R I	Ded	uctio	on	(\$38.	46	Bi-We	ekly)							
	Full Name of Individual (Last, First, Middle Initial) WINNEROSKI, KEVIN, , ,	or Full O	Drgar	nization Name		Dat	e of	Re	ece	ipt										
	Mailing Address 5100 ABBOTT AVE S											11 / D D / Y Y Y Y 2018								
	City : MINNEAPOLIS	State MN					-				471526 1 s Period									
	FEC ID number of contributing federal political committee.								-			-gr-	41	.97						
	Name of Employer (for Individual) Optum Services, Inc		upat Mktę	tion (for Individual) g			Me	emo) It	em										
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 322.98	P/	/R [Dedu	uctic	on	(\$13.	99	Bi-Wee	ekly)							
	Full Name of Individual (Last, First, Middle Initial)	or Full O	Drgar	nization Name		Dat	e of	Re	ece	ipt										
	Mailing Address 927 LINCOLN AVE						11 [™]	/	Ľ	26		/ Y	2018 Y	Y						
	City SAINT PAUL	State MN		Zip Code 55105-3149									516526							
			-			۹mo	ount	of	Ea	ach R	ec	eipt thi	s Perioo	1						
	FEC ID number of contributing federal political committee.						_	_	9	_		y	576	.90						
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Mkt	•	ion (for Individual) CIO		μ	Me	emo	b lt	em										
	Receipt For: Ag Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 4422.90	P	/R	Ded	uctio	on	(\$19	2.3	0 Bi-W	eekly)							
S	JBTOTAL of Receipts This Page (optional)			••••••					1		Ţ	9	734	25						
т	OTAL This Period (last page this line number only)			····· •					-			-95-								

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma	L ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle CONTRERAS, LISA, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 11065 E SUNRISE VIEW D	RIVE		Min M / D / Y									
City TUCSON	State AZ	Zip Code 85748-7768										
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. JEZARIAN, WENDY, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 5251 HUMBOLDT AVE S			11 / D D / Y Y Y Y Y 2018									
	State MN	Zip Code	Transaction ID : PR2644659652617									
MINNEAPOLIS		55419-1121	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		57.69									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /Iktg Rsch Cnslt	Memo Item									
Receipt For:	Aggregate	Year-to-Date 🔻										
Other (specify) ▼		442.29	P/R Deduction (\$19.23 Bi-Weekly)									
Full Name of Individual (Last, First, Middle ZIRKELBACH, ANGELA, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1615 Q ST NW APT #1110			11 / D D / Y Y Y Y Y 2018									
City WASHINGTON	State DC	Zip Code 20009-6349	Transaction ID : PR2644660252617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rnal Affs Dir	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			141.93									
TOTAL This Period (last page this line number	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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				or each category of the Detailed Summary Page	×	_	11a 13] 11 14	ŀ		11c 15	12	17					
or f	v information copied from such Reports and State for commercial purposes, other than using the na					for	the		pos	se of		oliciting	contrib	utions					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group P/	AC)														
	Full Name of Individual (Last, First, Middle Initial) COOPER, NICOLE, , ,	or Full O	Drgan	ization Name		Date of Receipt													
	Mailing Address 401 S 1ST STREET UNIT 612 City	State		Zip Code		11 26 2018 Transaction ID : PR2645166052617													
	MINNEAPOLIS	MN		55401-2564					-										
	FEC ID number of contributing rederal political committee.	С				Amount of Each Receipt this Period 84.21													
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Id/Social Resp		C	Me	emo	b It	em									
ļ	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 280.70]	P/R	Dedu	uctio	on	(\$28	.07	' Bi-We	ekly)						
	Full Name of Individual (Last, First, Middle Initial) MISTRY, RASHMITA, , ,	or Full O	Drgan	ization Name		Da	ate of	Re	ece	ipt									
l	Mailing Address 6658 WATERTON CIRCLE											11 26 Y Y Y Y Y Y 2018							
	City MUKILTEO	State WA					-				691526 s Perio								
	FEC ID number of contributing ederal political committee.	С		576.90							6.90								
	Name of Employer (for Individual) Jnited HealthCare Services Inc			ion (for Individual) ment COO			Me	emo	b It	em									
Ì	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 4422,90	P	P/R	Dedu	uctic	on	(\$192	2.3	0 Bi-W	eekly)						
	Full Name of Individual (Last, First, Middle Initial)	or Full O	Drgan	ization Name		Da	ate of	Re	ece	ipt									
	Mailing Address 11380 WILD HERON PT					N	11 ^M	/	C	D 26		/ Y	y y 2018	Y					
(City EDEN PRAIRIE	State MN		Zip Code 55347-4729									752526						
	FEC ID number of contributing rederal political committee.	С					iount	U	J		100	,eipt till	s Perio 115	5.38					
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	•	on (for Individual)			Me	emo	o It	em									
Ì	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 884.58							P/R Deduction (\$38.46 Bi-Weekly)										
รเ	JBTOTAL of Receipts This Page (optional)				•								776	6.49					
тс	TAL This Period (last page this line number onl	y)			•	Ĺ			-			-							

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full)		, periodi committe										
UnitedHealth Group Incorporation	ted PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle II MAHRT, JONATHAN, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4035 W 65TH ST APT 127			M M / D D / Y Y Y Y 11 26 2018									
City EDINA	State MN	Zip Code 55435-1749	Transaction ID : PR2645176952617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		833.31									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? Ops	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4166.55	P/R Deduction (\$277.77 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In B. HOFFMAN, SHERRI, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3409 DEEP WILLOW AVEN	UE		11 26 / Y Y Y Y									
City PIKESVILLE	State MD	Zip Code 21208-3116	Transaction ID : PR2646294652617									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		, 884.58	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In ARNESON, TED, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4402 E MONTEROSA ST			M M / D D / Y Y Y Y Y 11 26 2018									
City PHOENIX	State AZ	Zip Code 85018-4336	Transaction ID : PR2646295852617 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		84.21									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) OUHCG NAS	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.70	P/R Deduction (\$28.07 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			1032.90									
TOTAL This Period (last page this line numbe	r only)											

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Stat for commercial purposes, other than using the na			erson for the purpose of soliciting contributions							
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	NC)							
A.	Full Name of Individual (Last, First, Middle Initial ALEXANDER, BRADLEY, , ,) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1700 COACHLITE DRIVE	1		11 / 26 / Y Y Y Y 2018							
	City RICHMOND	State VA	Zip Code 23238-4440	Transaction ID : PR2646298652617							
			23230-4440	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		41.61							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm	Memo Item							
	Poppint For:	Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼		323.39	P/R Deduction (\$13.87 Bi-Weekly)							
В.	Full Name of Individual (Last, First, Middle Initial STANKIEWICZ, DENNIS, , ,) or Full O	rganization Name	Date of Receipt							
	Mailing Address 17761 WEAVER LAKE DRIVE										
	City	State	Zip Code	Transaction ID : PR2646304052617							
	MAPLE GROVE	MN	55311-1328	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		0.10							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	P/R Deduction (\$0.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial ROBERTS, RENEE, , ,) or Full O	rganization Name	Date of Receipt							
	Mailing Address 10000 TOWN CENTER AVE # 2	:69		M M / D D / Y Y Y Y 11 26 2018							
	City	State	Zip Code	Transaction ID : PR2698345152617							
	COLUMBIA	MD	21044-5432	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		42.12							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /Ied Clin Ops	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	P/R Deduction (\$14.04 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number on		· · ·	83.83							

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I A	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10006 FOX SPRING COUR	:Т		11 26 Y Y Y Y Y 11 26 2018						
City OAKTON	State VA	Zip Code 22124-2657	Transaction ID : PR2698404252617						
			Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		13.87						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dvlp Sr Cons	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 295.65	P/R Deduction (\$13.87 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name							
B. ROSENHAUS, MORGANNE, , , Mailing Address 3801 GEORGIA AVE NW APT 506			Date of Receipt						
City	State	Zip Code	Transaction ID : PR2698409852617						
WASHINGTON	DC	20011-5938	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.97						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		322.98	P/R Deduction (\$13.99 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. ZENICK, GEOFFREY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7714 TWISTED OAKS CIR	CLE		11 / D D / Y Y Y Y 11 26 2018						
City DALLAS	State TX	Zip Code 75231-4711	Transaction ID : PR2698410852617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			171.22						
TOTAL This Period (last page this line number	er only)								

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

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112			for each category of the Detailed Summary Page	×	11a 13] 11k		11c 15	12	17			
or fo	information copied from such Reports and State or commercial purposes, other than using the na				or the		pose	e of s	oliciting	contribu	tions			
	IAME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)										
	ull Name of Individual (Last, First, Middle Initial) GROSSMAN, BEVERLY, , ,) or Full O	Organization Name	D	ate of	Re	eceip	ot						
_	lailing Address 5 BROOKSIDE AVE		11 26 Y Y Y Y Y 12 2018											
	Sity	State	Zip Code		Transaction ID : PR2699179852617									
ľ	MENANDS	NY	12204-2301	Amount of Each Receipt this Period										
	EC ID number of contributing ederal political committee.	С					-		-11-	130.	41			
	lame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Govt Affs	1	Me	emo	b Ite	m						
-	Poppint For:			-										
	Primary General Other (specify) ▼	Primary General Aggregate Tear-to-Date V							P/R Deduction (\$43.47 Bi-Weekly)					
	ull Name of Individual (Last, First, Middle Initial)) or Full O	Organization Name	D	ate of	Re	eceip	ot						
	Mailing Address 6406 WESTMINSTER						11 26 2018							
C	lity	State	Zip Code		Trans	acti	ion I	ID : PI	R26991	8465261	7			
E	BENTON	AR	72019-6682	Amount of Each Receipt this Period										
	EC ID number of contributing ederal political committee.	ů l						230.76						
	lame of Employer (for Individual) ptum Services, Inc							Memo Item						
R	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1769.16	P/R Deduction (\$76.92 Bi-Weekly)										
	ull Name of Individual (Last, First, Middle Initial)) or Full O	Organization Name	D	ate of	Re	eceip	ot						
N	Iailing Address 3421 OAKWOOD TERRACE				11 26 2018									
		State DC	Zip Code				-			8715261	7			
_	WASHINGTON		20010-1819	A	mount	of	Eac	ch Red	ceipt th	is Period				
	EC ID number of contributing ederal political committee.	С			_		y		y	115.	08			
	lame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) t Affs Dir		M	emo	o Ite	em						
R	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 882.28	P/I	R Ded	uctio	on (\$38.3	6 Bi-We	eekly)				
SU	BTOTAL of Receipts This Page (optional)		•	ſ						476.	25			
то	TAL This Period (last page this line number onl	y)		Ē			-		-					

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	▲ 11a 11b 11c 12 13 14 15 16 1'						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle Ir A. ZHOU, JINGXIN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12011 FAIRVIEW CT			11 26 2018						
City MINNETONKA	State MN	Zip Code 55343-4516	Transaction ID : PR2699187852617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir 3. EDSON, BARBARA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6609 DENNY PEAK DRIVE			11 / 26 / Y Y Y Y 2018						
City SNOQUALMIE	State WA	Zip Code 98065-8996	Transaction ID : PR2699702252617						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CMO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3333.30	P/R Deduction (\$555.55 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir C. FARRELL, ELIZABETH, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9917 TRAILS END ROAD			11 26 2018						
City CHANHASSEN	State MN	Zip Code 55317-4592	Transaction ID : PR2699980052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			2358.93						
TOTAL This Period (last page this line number	r only)								

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions							
or for commercial purposes, other than using t	he name and a	address of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I HECK, DARRYL, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 9801 DORSET LANE			M M / D D / Y Y Y Y 11 26 2018							
City EDEN PRAIRIE	State MN	Zip Code 55347-3139	Transaction ID : PR2700831952617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.70							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) e Practitioner 3	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I BOOGERD, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 1595 SUMMIT SHORES CI			M = M / D = D / Y = Y = Y Y 11 26 2018							
City BURNSVILLE	State MN	Zip Code 55306-5817	Transaction ID : PR2700842352617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.70							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ncipal Proj-Prgm Mgr	Memo Item							
Receipt For:		Year-to-Date ▼	-							
Primary General Other (specify) ▼		323.18	P/R Deduction (\$13.90 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I TERRANOVA, THOMAS, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 18 DANEMAR DRIVE			11 / D D / Y Y Y Y Y 26 2018							
City MIDDLETOWN	State NJ	Zip Code 07748-3625	Transaction ID : PR2700843652617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.70							
United HealthCare Services Inc M		upation (for Individual) R Agnt Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			125.10							
TOTAL This Period (last page this line number	er only)									

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
Any information copied from such Reports	and Statements many	ay not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	ig the name and a		to solicit contributions from such committee.						
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Mide TAGGART, ELIZABETH, , ,	lle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7134 BRUNSWICK CIR	CLE		M M / D D / Y Y Y Y 11 26 2018						
City BOYNTON BEACH	State FL	Zip Code 33472-2534	Transaction ID : PR2700846552617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.91						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Agnt Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.20	P/R Deduction (\$13.97 Bi-Weekly)						
Full Name of Individual (Last, First, Mide B. OFFIELD, MIRANDA, , ,	lle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2240 N COUNTRY VIST	11 26 Y Y Y Y 2018								
City LIBERTY LAKE	State WA	Zip Code 99019-5071	Transaction ID : PR2700857552617						
	WA	99019-5071	Amount of Each Receipt this Period						
federal political committee.	FEC ID number of contributing federal political committee.								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		353.74	P/R Deduction (\$15.38 Bi-Weekly)						
Full Name of Individual (Last, First, Mide STEARNS, SALLIE, , ,	lle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 211 COLONIAL HOME #1505			11 / D D / Y Y Y Y Y 11 26 2018						
City ATLANTA	State GA	Zip Code 30309-1293	Transaction ID : PR2700861752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.70						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nt Executive II	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)		129.75						
TOTAL This Period (last page this line nu	mber only)								

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

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	EIVIZED RECEIPTS		Detailed Summary Page	×	11a		11	b	11	c	12	
			Dotation outfinitary 1 age		13		14	.	15	5	16	17
	y information copied from such Reports and Statem for commercial purposes, other than using the nam											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	PAC (I	UnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) c FULBRIGHT, JOHN, , ,	or Full C	Organization Name	[Date of	Re	cei	pt				
	Mailing Address 47-645 UAKEA PLACE		11 26 2018									
		State		Transaction ID : PR2700865852617								
		-11	96744-5427	_ /	_ Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.						,			,	36	84
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Agnt Mgr		Me	emo	lte	əm				
	Receipt For: Ag	Year-to-Date ▼										
	Primary General Other (specify) ▼	282.44	P	P/R Deduction (\$12.28 Bi-Weekly)								
В.	Full Name of Individual (Last, First, Middle Initial) c WARNER, JONATHAN, , ,	or Full C	Organization Name		Date of	Re	cei	pt				
	Mailing Address 258 CAMBRIDGE DRIVE						11 26 2018					
	,	State	1	Trans	actio	on	ID :	PR27	70087	355261	7	
	RAMSEY	NJ 07446-1260					Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C					41.70					70
	Name of Employer (for Individual) Optum Services, Inc							əm				
	Receipt For: Ag Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 323.18							90 Bi	-Wee	kly)	
С.	Full Name of Individual (Last, First, Middle Initial) c PERRY, KIMBERLY, , ,	or Full C	Organization Name		Date of	Re	cei	pt				
	Mailing Address 5045 LINDELL BLVD				^M ^M 11	1		26	/	Y	y 2018	Y
	5	State MO	Zip Code	\vdash							80526	
			63108-1219	- /	Amount	of	Ea	ch R	eceip	ot this	Period	
	FEC ID number of contributing federal political committee.)					y			,	41	70
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄led Dir		Memo Item							
	Receipt For: Ag Primary General Other (specify)	gregate	P	/R Ded	uctic	on	(\$13.	90 B	i-Wee	ekly)		
	UBTOTAL of Receipts This Page (optional)		r				9	-		9 - I	120.	24
	OTAL This Period (last page this line number only).						and a			11 A		e

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle MCSWEENEY, ERIN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10 NOUVELLE WAY SUITE	805		11 26 / Y Y Y Y 2018						
City NATICK	State MA	Zip Code 01760-1570	Transaction ID : PR2701818052617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FRINGER, TRICIA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2809 STANFORD AVE	1-		11 / D D / Y Y Y Y Y 26 2018						
City DALLAS	State TX	Zip Code 75225-7917	Transaction ID : PR2701818652617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Underwriting	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. OCONNELL, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3325 W 18TH AVENUE			11 / D D / Y Y Y Y 11 26 2018						
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819652617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		380.40						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2370.10	P/R Deduction (\$126.80 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1534.20						
TOTAL This Period (last page this line number	er only)								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 1 erson for the purpose of soliciting contributions a to collicit contributions from such committee							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle BRUCE, JAMIE, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 336 THOREAU BLVD			11 26 2018							
City O FALLON	State MO	Zip Code 63366-7451	Transaction ID : PR2701823052617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. SPARKS, KEVIN , , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 10681 S CEDAR NILES BL			11 26 2018							
City OLATHE	State KS	Zip Code 66061-7415	Transaction ID : PR2701825552617							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. UNGAR, ELIZABETH, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 10115 48TH AV N			11 / 26 / Y Y Y Y 2018							
City PLYMOUTH	State MN	Zip Code 55442-2521	Transaction ID : PR2702474952617 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		41.70							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir HRIS	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.18	P/R Deduction (\$13.90 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			907.05							
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (I	JnitedHealth Group PA	(C)									
Α.	Full Name of Individual (Last, First, Middle Init MILLER, CORA, , ,	ial) or Full C	organization Name	Date of Receipt									
	Mailing Address 813 PILOT MOUNTAIN WAY			11 / D D / Y Y Y Y Y 26 2018									
	City MABLETON	State GA	Zip Code 30126-2678	Transaction ID : PR2702484452617									
	FEC ID number of contributing	C	30120-2070	Amount of Each Receipt this Period 84.21									
	federal political committee.	U											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item									
	Receipt For:		Year-to-Date ▼										
	Primary General Other (specify) ▼	Aggregate	280.70	P/R Deduction (\$28.07 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Init BREDOW, ANDREA, , ,	ial) or Full C	Prganization Name	Date of Receipt									
	Mailing Address 3906 THOMAS AVE S			Image: Market									
	City MINNEAPOLIS	State MN	Zip Code 55410-1236										
	FEC ID number of contributing federal political committee.	С		47.58									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) cc Dir Comm	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 317.20	P/R Deduction (\$15.86 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init KRAMER, NANCY, , ,	ial) or Full C	Prganization Name	Date of Receipt									
	Mailing Address 9661 WATERFORD PL APT 102			M M / D D / Y Y Y Y 11 26 2018									
	City	State	Zip Code	Transaction ID : PR2702501452617									
	LOVELAND	OH	45140-4600	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual) Optum Services, Inc	Occ Dir I	upation (for Individual) RN	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•	247.17									
т	OTAL This Period (last page this line number of	only)											

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle A. ALLEN, RONALD, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1245 4TH ST SW			M M / D D / Y Y Y Y Y							
APT E709 City	State	Zip Code	11 26 2018 Transaction ID : PR2702503852617							
WASHINGTON	DC	20024-2318	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		57.69							
·										
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For:		rt Affs Dir	_							
Primary General	Aggregate	Year-to-Date ▼	P/P Doduction (\$10.23 Ri Wookhy)							
Other (specify) ▼		442.29	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name								
B. BRENNER, JEFFREY, , ,			Date of Receipt							
Mailing Address 4610 CEDAR AVE APT 301			11 26 2018							
City	State	Zip Code	Transaction ID : PR2702506352617							
PHILADELPHIA	PA	19143-2118	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		696.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Integrated HIth Human Svs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		, 4290.14	P/R Deduction (\$232.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. CHURCHES, KATHRYN, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 713 WEALD BRIDGE RD			M = M / D = D / Y = Y = Y							
City	State	Zip Code	11 26 2018 Transaction ID : PR2702506752617							
COTTAGE GROVE	WI	53527-8310	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.70							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Dir E	Bus Process								
Receipt For:	Aggregate	Year-to-Date V								
Other (specify)		323.18	P/R Deduction (\$13.90 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			795.39							
TOTAL This Period (last page this line number	er only)	· · · · · · · · · · · · · · · · · · ·								

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			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full)		duress of any political committee			JIII SUCI	1 Commute			
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)						
Α.	Full Name of Individual (Last, First, Middle Initia MORRIS, MITCHELL, , ,	l) or Full O	organization Name	Date of	Receipt					
	Mailing Address 200 CONGRESS AVE 47Y			M M 11	/ D D 26	/ Y	2018	Y		
	City	State TX	Zip Code		action ID : P			7		
	AUSTIN		78701-4507	Amount	of Each Re	ceipt th	is Period			
	FEC ID number of contributing federal political committee.	С			- 195-	- 19-	0.1	0		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc	Me	mo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	P/R Dedu	uction (\$0.00	Bi-Wee	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia MERZLICKER, CAREY, , ,	l) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 950 BENTLEY PARK CIRCLE	11 26 / Y Y Y Y Y 2018								
	City	State	Zip Code		action ID : P			,		
	O FALLON	MO	63368-8022	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.		-		108.0	0				
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Fin			mo Item					
	Receipt For:	Aggregate	Year-to-Date V	1						
	Primary General Other (specify) ▼		892.00	P/R Deduction (\$36.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia BROWN, DIANE, , ,	ll) or Full O	organization Name	Date of	Receipt					
	Mailing Address 502 BERRYMANS LANE			M M 11	/ D D 26	/ Y	2018	Y		
	City REISTERSTOWN	State MD	Zip Code 21136-6003		action ID : F			7		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 84.2				21		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Pract Perf	Me	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.70	P/R Dedu	uction (\$28.0)7 Bi-W€	eekly)			
s	UBTOTAL of Receipts This Page (optional)						192.3	1		
т	OTAL This Period (last page this line number or	וy)			-	-				

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		Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIP13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle VENNERSTROM, EMILY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 179 MEADOW LANE			11 26 2018						
City LONG LAKE	State MN	Zip Code 55356-9493	Transaction ID : PR2703253752617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.22						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.75	P/R Deduction (\$13.74 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. HARVEY, CATHERINE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 541 E ERIE ST UNIT 602	1-		11 / D D / Y Y Y Y Y 26 2018						
	State WI	Zip Code	Transaction ID : PR2703637052617						
MILWAUKEE	VVI	53202-6251	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		288.45						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		2019.15	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. CRIPPIN, TODD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1309 RUSTICVIEW DRIVE			11 26 / Y Y Y Y Y 11 26 2018						
City BALLWIN	State MO	Zip Code 63011-4266	Transaction ID : PR2703639552617 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.07						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 323.99	P/R Deduction (\$13.69 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			370.74						
TOTAL This Period (last page this line number	er only)								

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			Detailed Summary Page	×			11b	11c		12					
Δn	y information copied from such Reports and S	tatemente m	av not be sold or used by any n	erson	13 for the	pur	14 nose of	15 soliciting		16 ntribut	17 ions				
	for commercial purposes, other than using the														
\setminus	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Ini SABASTEANSKI, LISA, , ,	tial) or Full C	organization Name		Date of	f Re	eceipt								
	Mailing Address 4307 FALLGOLD PARKWAY	Ń			11 26 2018										
	City	State	Zip Code		Trans	act	ion ID :	PR2703	6520	05261	7				
	BROOKLYN PARK	MN	55443-1889		Amount	t of	Each F	Receipt th	nis F	'eriod					
	FEC ID number of contributing federal political committee.	С					-	1 - 3F		40.8	39				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nan Capital Partner		M	emo	o Item								
	Receipt For:		· ·												
	Primary General	Ayyreyale	Year-to-Date ▼	P	/R Ded	ucti	on (\$13	.63 Bi-We	eekl	y)					
	Other (specify) v		324.19	4			. (• -			,,					
	Full Name of Individual (Last, First, Middle Ini YOUNG, DAVID, , ,	tial) or Full C	organization Name		Date of	f Re	eceint								
	Mailing Address 654 CHISWELL CT					/	D) / Y	Y	Y	Y				
				11 26 2018											
	City	State	Zip Code		Trans	acti	ion ID :	PR27036	6554	152617	,				
	BRENTWOOD	TN	37027-3109		Amount	t of	Each F	Receipt th	nis F	'eriod					
	FEC ID number of contributing	С								789.4	15				
	federal political committee.	U													
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo Item										
	Receipt For:	Aggregate	Year-to-Date V												
	Primary General Other (specify) ▼		4210.40	P/R Deduction (\$263.15 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Ini ROLLINS, CARISSA, , ,	tial) or Full C	organization Name		Date of	f Re	eceipt								
	Mailing Address 6805 CHEYENNE TRAIL				^M 11	/	26) 18	Y				
	City	State	Zip Code		Trans	act	ion ID :	PR2704	1889	95261	7				
	EDINA	MN	55439-1158	<u> </u>	Amount	t of	Each F	Receipt th	nis F	'eriod					
	FEC ID number of contributing federal political committee.	С				_	,	,	_	576.9	90				
	Name of Employer (for Individual)	Occ	upation (for Individual)		Μ	emo	o Item								
	United HealthCare Services Inc	VP I	т												
	Receipt For:	Aggregate	Year-to-Date 🔻												
	Primary General		4422.90	1 P	P/R Ded	lucti	ion (\$19	2.30 Bi-V	Veel	<ly)< td=""><td></td></ly)<>					
	Other (specify)		4422.90	1											
s	UBTOTAL of Receipts This Page (optional)			•		-	7	9	-	1407.2	24				
т	OTAL This Period (last page this line number	only)		•			-								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (UnitedHealth Group PA	4C)
Full Name of Individual (Last, First, Middle HOROHO, PATRICIA, , ,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 13516 COMPTON ROAD			11 26 / Y Y Y Y Y 11 26
City CLIFTON	State VA	Zip Code 20124-1203	Transaction ID : PR2704194652617
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3999.96	P/R Deduction (\$333.33 Bi-Weekly)
Full Name of Individual (Last, First, Middle DELANY, ANDREW, , ,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 209 GARLAND AVENUE			11 26 Y Y Y Y Y 2018
City DECATUR	State GA	Zip Code 30030-4940	Transaction ID : PR2704196352617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. HAYEK, ANDREW, , ,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 500 ADAMS AVENUE			11 26 / Y Y Y Y Y 2018
City GLENCOE	State IL	Zip Code 60022-1865	Transaction ID : PR2705063452617
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 2692.20	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		2153.79
TOTAL This Period (last page this line numl	ber only)		

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIWIIZED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mide A. ROBERTS, CORY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 45 BRIGHTON RD NE			M M / D D / Y Y Y Y 11 26 2018								
City ATLANTA	State GA	Zip Code 30309-1518	Transaction ID : PR2705063552617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		2142.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Bus Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2856.00	P/R Deduction (\$714.00 Bi-Weekly)								
Full Name of Individual (Last, First, Mide SHARFF, RICHARD, , , Mailing Address 508 RUMSON ROAD	dle Initial) or Full O	rganization Name	Date of Receipt								
City	State	Zip Code	11 26 2018								
BIRMINGHAM	AL	35209-4312	Transaction ID : PR2705063652617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mide JOHAR, RAVI , , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 405 ARGUS MANOR C			M M / D D / Y Y Y Y 11 26 2018								
City CHESTERFIELD	State MO	Zip Code 63017-2469	Transaction ID : PR2705065152617 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		109.50								
Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	upation (for Individual) Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 255.50	P/R Deduction (\$36.50 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nu	,		2828.40								

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11			for each category of the Detailed Summary Page		1 1a		11b	11c	12	□		
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
	NAME OF COMMITTEE (In Full)			: 10 50					r commu			
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initia FELLENBAUM, DANIEL, , ,	l) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 9125 FRIARS ROAD				M M 11	/	D D 26) / Y	2018	Y		
	City BETHESDA	State MD	Zip Code 20817-3329						06595261 is Period	7		
	FEC ID number of contributing federal political committee.	С					7		42.7	12		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Assc Dir		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.92	F	P/R Dedu	uctio	on (\$14.	.04 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia BUNTEN, BRIAN, , ,	l) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 401 TATLOW DR				M M	/	D D D 26	/ Y	2018	Y		
	City COLUMBIA	State MO	Zip Code 65203-6130						7055261	7		
	FEC ID number of contributing federal political committee.	С			Amount	U			178.2	29		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1321.50	F	P/R Dedu	uctic	on (\$59.	43 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initia ZELLER, TRISHA, , ,	ll) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 9230 SHETLAND ROAD				11 ^M	/	26		2018 Y	Ŷ		
	City EDEN PRAIRIE	State MN	Zip Code 55347-3747						97145261 is Period	7		
	FEC ID number of contributing federal political committee.	С					y	. y	42.7	2		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Anlys		Me	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.92	F	P/R Dedu	uctio	on (\$14.	.04 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)						9	. ,	262.5	53		
т	OTAL This Period (last page this line number or	ıly)	••••••	-				-				

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			Use separate schedule(s)	(cheo	(check only one)								
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		Г	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the p		oose of	soliciting	contr	ributio	ons		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia SPADE, NATHAN, , ,	al) or Full O	rganization Name	D	Date of Receipt								
	Mailing Address 12 WARWICK CIRCLE			1 F	11 26 2018								
	City MECHANICSBURG	State PA	Zip Code 17050-2643					PR27059 eceipt th			_		
	FEC ID number of contributing federal political committee.	С			_		7		2	30.76	5		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1769.16	P/f	R Dedu	uctic	on (\$76.9	92 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia BARBARO, PHILIP, , ,	al) or Full O	rganization Name	D	Date of	Re	ceipt						
	Mailing Address 670 ARBUTUS STREET	01-1-			™M 11	/	26	/ Y	2018				
	City MIDDLETOWN	State CT	Zip Code 06457-7106					PR27059		-			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/F	R Dedu	uctio	on (\$100	.00 Bi-W	/eekly))			
с.	Full Name of Individual (Last, First, Middle Initia STILLO, KATHLEEN, , ,	al) or Full O	rganization Name	D	ate of	Re	ceipt						
	Mailing Address 15 HENDERSON AVE				^M 11	/	D D D 26	/ Y	2018				
	City PRINCETON	State NJ	Zip Code 08540-2607					PR27064 eceipt th					
	FEC ID number of contributing federal political committee.	C			_		y	y	1	50.00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 850.00	P/I	R Dedi	uctio	on (\$50.	00 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		••••••	[,	. ,	6	80.76			
т	OTAL This Period (last page this line number or	nly)	••••••							-			

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116	MIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16								
	r information copied from such Reports and Stat or commercial purposes, other than using the n			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full)											
\	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	NC)								
	Full Name of Individual (Last, First, Middle Initia BARTHOLET, DANIEL, , ,) or Full Or	ganization Name	Date of Receipt								
-	Mailing Address 5918 VALEWOOD DRIVE			11 26 / Y Y Y Y 2018								
	City MINNETONKA	State MN	Zip Code 55345-6545	Transaction ID : PR2706451152617 Amount of Each Receipt this Period								
	FEC ID number of contributing rederal political committee.	С		576.90								
	Name of Employer (for Individual) Jnited HealthCare Services Inc	Occu VP T	pation (for Individual) ax	Memo Item								
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia MULDOON, ALLISON, , ,) or Full Or	ganization Name	Date of Receipt								
I	Mailing Address 2500 CLARENDON BLVD APT 129			11 26 / Y Y Y Y 2018								
		State VA	Zip Code	Transaction ID : PR2706452752617								
-	ARLINGTON	VA	22201-3835	Amount of Each Receipt this Period								
	FEC ID number of contributing rederal political committee.	С		180.00								
	Name of Employer (for Individual) Jnited HealthCare Services Inc		ipation (for Individual) t Affs Assc Dir	Memo Item								
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 580.00	P/R Deduction (\$140.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia MADRID, MERLE, , ,) or Full Or	ganization Name	Date of Receipt								
-	Mailing Address 514 SOUTH 3RD STREET	1		11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City COLUMBUS	State OH	Zip Code 43215-5756	Transaction ID : PR2740510352617 Amount of Each Receipt this Period								
	FEC ID number of contributing ederal political committee.	С		288.00								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Govt Affs	Memo Item								
Ī	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2208.00	P/R Deduction (\$96.00 Bi-Weekly)								
รเ	JBTOTAL of Receipts This Page (optional)			1044.90								
тс	TAL This Period (last page this line number on	ly)										

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	LIVITZED RECEIPTS			Detailed Summary Page		X 11a		1	1b 🗌	<u>-</u>	11c		12		
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or	y information copied from such Reports and S for commercial purposes, other than using the													ions	
$\langle \rangle$	NAME OF COMMITTEE (In Full)														
\rangle	UnitedHealth Group Incorporate	ed PAC (l	Un	itedHealth Group PA	NC)										
۹.	Full Name of Individual (Last, First, Middle Ini KORPMAN, RALPH, , ,	tial) or Full C	Orga	nization Name		Date of	Re	ece	eipt						
	Mailing Address 102 WOODMONT BLVD SUI	TE 200				M M / D D / Y Y Y Y Y 11 26 2018									
	City	State		Zip Code		Trans	act	ior	n ID :	PR	27405	146	5261	7	
	NASHVILLE	TN		37205-2216	_	Amount	of	Ea	ach R	ece	eipt thi	is P	eriod		
	FEC ID number of contributing federal political committee.	С						,			-		0.1	0	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) cientific Officer		Me	emo	o It	tem						
	Receipt For:	Aggregate	Yea	ur-to-Date ▼											
	Primary General Other (specify) ▼		-	5000.00		P/R Ded	ucti	on	(\$0.1	0 B	i-Wee	kly)			
	Full Name of Individual (Last, First, Middle Ini MATHIS, BRIAN, , ,	tial) or Full C	Orga	nization Name		Date of	Re	ece	eipt						
	Mailing Address 4632 RESERVOIR ROAD NW	1				M M 11	/	l	26	1	/ Y	ү 20	18 18	Y	
	City	State		Zip Code		Trans	acti	ior	ו ID : I	PR	27407	587	5261	,	
	WASHINGTON	DC		20007-1917		Amount	of	Ea	ach R	ece	eipt thi	is P	eriod		
	FEC ID number of contributing federal political committee.	С						-			-		745.	50	
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Is Dev		Me	emc	o It	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 4245.22		P/R Dedu	uctio	on	(\$248	3.50) Bi-W	eekl	ly)		
<u>.</u>	Full Name of Individual (Last, First, Middle Ini MUHLBAUER, CYNTHIA, , ,	tial) or Full C	Orga	nization Name		Date of	Re	ece	eipt						
	Mailing Address 5211 TIMBERRIDGE DR					M M 11	/	I	D D D 26	1	/ Y		18	Y	
	City	State		Zip Code		Trans	act	ior	n ID :	PR	27480)195	5261	7	
	PAPILLION	NE		68133-2781	_	Amount	of	Ea	ach R	ece	eipt thi	is P	eriod		
	FEC ID number of contributing federal political committee.	С						9			9		157.8	39	
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)		M	emo	o li	tem						
	United HealthCare Services Inc		•	Mgmt											
	Receipt For:	Aggregate	Yea	ur-to-Date ▼											
	Primary General Other (specify)		-	842.08		P/R Ded	ucti	ion	(\$52.	.63	Bi-We	ekly	/)		
	JBTOTAL of Receipts This Page (optional)			•	 	Ľ.	-	,	-	-	5		903.4	9	

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12
Any information copied from such Reports and S	Statemente m		13 14 15 16 17
or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	ιC)
Full Name of Individual (Last, First, Middle In A. FEHR, STEPHANIE, , ,	iitial) or Full C	Organization Name	Date of Receipt
Mailing Address 6601 BLACKFOOT PASS			M M / D D / Y Y Y Y Y 11 26 2018
City	State	Zip Code	Transaction ID : PR2748020552617
EDINA	MN	55439-1103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		789.45
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item
Receipt For:	Aggregate	Year-to-Date V	_
Primary General Other (specify) ▼		4210.40	P/R Deduction (\$263.15 Bi-Weekly)
Full Name of Individual (Last, First, Middle In B. ATCHLEY, JODELL, , ,	iitial) or Full C	Organization Name	Date of Receipt
Mailing Address 2055 SIDEWINDER COURT			M M / D D / Y Y Y Y 11 26 2018
City	State	Zip Code	Transaction ID : PR2749688652617
GRAND JUNCTION	CO	81507-8791	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		91.23
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 273.69	P/R Deduction (\$30.41 Bi-Weekly)
Full Name of Individual (Last, First, Middle In c. KIM, KARLTON, , ,	itial) or Full C	Organization Name	Date of Receipt
Mailing Address 11052 HARDING ROAD			M M / D D / Y Y Y Y 11 26 2018
City	State	Zip Code	Transaction ID : PR2749705552617
LAUREL	MD	20723-2034	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		199.98
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For:		Year-to-Date ▼	-
Primary General Other (specify)		799.92	P/R Deduction (\$66.66 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			1080.66
TOTAL This Period (last page this line number			

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	EMIZED RECEIPTS		for each cate		×	11a		11b		11c	12	
	y information copied from such Reports and Stater for commercial purposes, other than using the nar											
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	JnitedHealt	h Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initial) CHECKA, SREENIVAS, , ,	or Full O	rganization Name	9	[Date of	f Re	ceipt				
	Mailing Address 11049 JAMES CURVE					м м 11	/		D 26	/ Y	ү ү 2018	Y
	5	State MN	Zip Code	7				-			28555261	
			55129-626		/	Amount	t of	Each	ו Re	ceipt th	is Period 78.	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Indiv Prod Mgr	idual)		M	emo	lten	n			
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Year-to-Date ▼	286.77	P	/R Ded	uctio	on (\$	26.0	7 Bi-We	eekly)	
B.	Full Name of Individual (Last, First, Middle Initial) ROBINO, STEVEN, , ,	or Full O	rganization Name	Э		Date of	f Re	ceipt				
	Mailing Address 11207 NE 127TH AVE					™ 11	/		26	/ Y	ү ү 2018	Y
	City VANCOUVER	State WA	Zip Code 98682-178	3				-			29095261 is Period	
	FEC ID number of contributing federal political committee.	0						7		-9-	84.	21
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Indiv Regl Affs	idual)		M	emo	Iten	n			
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼	280.70	P/	'R Ded	uctic	on (\$2	28.0	7 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial) MUNSONREGALA, EMMANUEL, , ,	or Full O	rganization Name	Э	[Date of	f Re	ceipt	:			
	Mailing Address 969 FAIRMOUNT AVENUE					[™] 11			26		ү 2018	
	City SAINT PAUL	State MN	Zip Code 55105-3120	h							21065261	
	FFC ID number of contributing					Amouni	t of	Each	n Re	ceipt th	is Period 84.	
	Name of Employer (for Individual)		upation (for Indiv	idual)		М	emo	lten	n			
	United HealthCare Services Inc Receipt For: A Primary General Other (specify) I		C Gen Counsel Year-to-Date ▼	280.70	P/	/R Ded	luctio	on (\$	28.0	7 Bi-W€	eekly)	
s	UBTOTAL of Receipts This Page (optional)							7		9	246.	63
т	OTAL This Period (last page this line number only))						7		-		

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	WIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or fo	nformation copied from such Reports and Stater commercial purposes, other than using the nar			rson for the purpose of soliciting contributions
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated I	PAC (L	JnitedHealth Group PA	C)
A	II Name of Individual (Last, First, Middle Initial) AIT, ROBYN, , ,	or Full O	rganization Name	Date of Receipt
Mi Ci	ailing Address 31 LIPTON LANE	State	Zip Code	11 / 26 / 2018
	ANGHORNE	PA	19047-5782	Transaction ID : PR2754215952617 Amount of Each Receipt this Period
FE	C ID sumber of contribution	C		84.21
U	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item
	eceipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 280.70	P/R Deduction (\$28.07 Bi-Weekly)
	III Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name	Date of Receipt
M	ailing Address 5692 STAGECOACH DRIVE			11 26 Y Y Y Y Y 11 26 2018
Ci W	ty /EST DES MOINES	State IA	Zip Code 50266-3866	Transaction ID : PR2754240852617 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		84.21
	ame of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) g Cnslt	Memo Item
Re	eceipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 280.70	P/R Deduction (\$28.07 Bi-Weekly)
	III Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name	Date of Receipt
M	ailing Address 1388 DIAMOND COURT			11 / D D / Y Y Y Y 26 / 2018
Ci	ty ITTSBURGH	State PA	Zip Code 15241-1220	Transaction ID : PR2754663252617 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.			789.45
0	ame of Employer (for Individual) ptum Services, Inc		upation (for Individual) Advisory Svc	Memo Item
Re	Primary General Other (specify)	ggregate	Year-to-Date ▼ 4210.40	P/R Deduction (\$263.15 Bi-Weekly)
SUE	TOTAL of Receipts This Page (optional)			957.87
тот	AL This Period (last page this line number only)	•••••	

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle HOFFMAN, DOROTHY, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 618 E 48TH STREET			11 / D D / Y Y Y Y Y 26 2018
City INDIANAPOLIS	State IN	Zip Code 46205-1846	Transaction ID : PR2754665252617
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$250.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. BOTHRA, SIDDHARTH, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 17200 SE 45TH STREET			11 / D D / Y Y Y Y Y 2018
City BELLEVUE	State WA	Zip Code 98006-6510	Transaction ID : PR2754720752617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1249.98
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 3749.94	P/R Deduction (\$416.66 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. EHLERT, KENNETH, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 10431 TOLEDO DR N			11 / D D / Y Y Y Y Y 26 2018
City BROOKLYN PARK	State MN	Zip Code 55443-4501	Transaction ID : PR2755316152617 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		0.10
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00	P/R Deduction (\$0.10 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			1500.08
TOTAL This Period (last page this line number	er only)	••••••	

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111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	3	K 11a		11b	11c	12				
	y information copied from such Reports and Sta												
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	name and a	ddress of any political committee	to s	olicit con	itrid	utions 1	from suci	n commit	iee.			
	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	(C)									
A.	Full Name of Individual (Last, First, Middle Initia SEVILLE, KATHERINE, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 333 ADAMS ST				M M 11	/	26) / Y	2018	Y			
	City DECATUR	State GA	Zip Code 30030-5205						31725261 nis Period				
	FEC ID number of contributing federal political committee.	С							107.	13			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prod		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 392.81		P/R Dedu	uctio	on (\$35	.71 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia WEILER, KATHY, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 1250 CANTON AVENUE				M M 11	/	26) / Y	2018	Y			
	City MILTON	State MA	Zip Code 02186-2414	\vdash					34765261 his Period				
	FEC ID number of contributing federal political committee.	С				U			1666.	_			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CMO	_	Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3333.30	F	P/R Dedu	uctic	on (\$55	5.55 Bi-W	/eekly)				
с.	Full Name of Individual (Last, First, Middle Initia ABRAHAM, SANTIAGO, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 2637 ARCOLA LANE				M M 11	/	26		2018	Y			
	City WAYZATA	State MN	Zip Code 55391-9703						65215261 his Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y .	, ,	1153.	83			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	upation (for Individual) T		Me	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3846.10		P/R Dedu	uctio	on (\$38	4.61 Bi-V	Veekly)				
s	UBTOTAL of Receipts This Page (optional)		••••••				,	. ,	2927.	61			
т	OTAL This Period (last page this line number or	nly)		-									

SCHEDULE A (FEC Form 3X) _____ _

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	I ay not be sold or used by any p uddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle I AWHITNEY, DEVIN, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 718 LONG BRIDGE STREE UNIT 302	Т		M M / D D / Y Y Y Y 11 26 2018					
City SAN FRANCISCO	State CA	Zip Code 94158-2448	Transaction ID : PR2755932352617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		272.70					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 727.20	P/R Deduction (\$90.90 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I GJETSON, MATHEW, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1699 STIEGER LAKE LANE APARTMENT #102			11 / D D / Y Y Y Y Y 26 2018					
City VICTORIA	State MN	Zip Code 55386-5803	Transaction ID : PR2755932952617 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		99.54					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) nan Capital Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 265.44	P/R Deduction (\$33.18 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I c. ASHENHURST, KARLA, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 4000 SOUTH AVON DRIVE	State	Zip Code	M M / D D / Y					
	WI	53151-6213	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		468.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item					
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 593.00	P/R Deduction (\$156.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			840.24					
TOTAL This Period (last page this line numbe	r only)							

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		Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17		
Any information copied from such Reports a or for commercial purposes, other than usin				or the		pose d		oliciting	contribu	itions		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	-											
Full Name of Individual (Last, First, Midd HERMELING, THEODORE, , ,	rganization Name	Date of Receipt										
Mailing Address 117 5TH STREET				м м 11	1	D 2		/ Y	ү ү 2018	Y		
City WILMETTE	State IL	Zip Code 60091-3405	A						5216526 is Perioc			
FEC ID number of contributing federal political committee.	C			_		-		-	833	.33		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Me	emc	ltem						
Receipt For: Primary General Other (specify) ▼	Primary General Agglegate Teal-to-Date V						33.:	33 Bi-W	/eekly)			
Full Name of Individual (Last, First, Midd	le Initial) or Full C	rganization Name		Date of Receipt								
Mailing Address	ailing Address											
City	State	Zip Code	A	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.							7					
Name of Employer (for Individual)	e of Employer (for Individual) Occupation (for Individual)				Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]									
Full Name of Individual (Last, First, Midd	le Initial) or Full C	rganization Name		Date of	Re	eceipt						
Mailing Address				M – M	1	D	D	/ Y	YY	Y		
City	State	Zip Code	A	Amount	of	Each	Re	ceipt th	is Period			
FEC ID number of contributing federal political committee.												
Name of Employer (for Individual)	ame of Employer (for Individual) Occupation (for In				Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼]									
SUBTOTAL of Receipts This Page (optional	al)				1	,		9	833	33		
TOTAL This Period (last page this line nur	nber only)							_	234544	.65		

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 315 OF 323			
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Ur	nitedHealth G	Froup PAC)			
Full Name (Last, First, Middle Initial) A. Castro For Congress				Date of Disbursement			
Mailing Address PO Box 544				10 22 2018			
San Antonio	State TX	Zip Code 78292		FEC Identification Number			
Purpose of Disbursement Contribution Candidate Name			011	C C00497933 Transaction ID : 42758951			
Castro, Joaquin, , Rep.,	ment For:	2018	Category/ Type	Amount of Each Disbursement this Period 2000.00			
Senate President	Primary Other (spe	X General		Contribution Memo Item			
Full Name (Last, First, Middle Initial)	State: TX District: 20 Full Name (Last, First, Middle Initial) Texans For Henry Cuellar Congressional Campaign						
Mailing Address 1519 Washington Street Suite 200				10 / D / Y Y Y Y 10 22 2018			
City Laredo Purpose of Disbursement	StateZip CodeTX78040			FEC Identification Number			
Contribution Candidate Name				C C00371302 Transaction ID : 42758952 Amount of Each Disbursement this Period			
Cuellar, Henry, , Rep., Office Sought:	ment For: Primary Other (spe	x General	Category/ Type	Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. Shelby For U S Senate				Date of Disbursement			
Mailing Address Post Office Box 1091				10 / D D / Y Y Y Y Y 22 2018			
City Tuscaloosa Purpose of Disbursement	State AL	Zip Code 35403		FEC Identification Number			
Void - Shelby For U S Senate; check dated 4/16/18 Candidate Name Shelby, Richard, , Sen.,	3		011 Category/ Type	Transaction ID : 42762176 Amount of Each Disbursement this Period			
• · · · · · · · · · · · · · · · · · · ·	ment For: ; Primary Other (spe	General		- 2500.00 Void - Shelby For U S Senate check dated 4/16/18			
SUBTOTAL of Disbursements This Page (optional)				2000.00			
TOTAL This Period (last page this line number only							

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 316 OF 323						
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	ly one)						
		Summary Page	21b	22 X 23 26 27 28b 28c 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na			ed by any perso	on for the purpose of soliciting contributions						
				,						
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Froup PAC)						
Full Name (Last, First, Middle Initial) A. Defend America PAC				Date of Disbursement						
Mailing Address PO Box 2626				10 22 2018						
City	State AL	Zip Code		FEC Identification Number						
Tuscaloosa Purpose of Disbursement Contribution	AL	35403	011	С сооз25993						
Candidate Name			Category/ Type	Transaction ID : 42762177 Amount of Each Disbursement this Period						
Senate President	ement For: Primary Other (spe	General ecify) ▼		2500.00 Contribution Memo Item						
State: District: Full Name (Last, First, Middle Initial) B. Evergreen PAC Mailing Address 499 S Capitol St, SW Suite 422				Date of Disbursement						
City Washington Purpose of Disbursement Contribution Candidate Name	State DC	Zip Code 20003	011 Category/ Type	FEC Identification Number C C00576090 Transaction ID : 42804449 Amount of Each Disbursement this Period						
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ccify)		2500.00 Contribution Memo Item						
Full Name (Last, First, Middle Initial) C. Connecticut Republican Party - Fe	ederal			Date of Disbursement						
Mailing Address 176 Laning St				11 02 Y Y Y Y 2018						
City Southington Purpose of Disbursement	State CT	Zip Code 06489		FEC Identification Number						
Void - Connecticut Republican Party - Federal; ch	Void - Connecticut Republican Party - Federal; check dated 9/25/18									
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ccify) ▼		– 5000.00 Void - Connecticut Republica Party - Federal; check dated 9/25/18						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only				0.00						

SCHEDULE B (FEC Form 3X)			-	R LINE			:			PA	GE	317 OF 323
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(ch	eck on 21b 28a	y one	e) 22 28b	×	23 28c		26 29		27 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	roup	o PA	C)							
Full Name (Last, First, Middle Initial) A. Connecticut Democratic State Cel	iddle Initial) ocratic State Central Committee - Federal							Date of Disbursement				
Mailing Address 30 Arbor St Suite 103						11			2			018
City Hartford	State CT	Zip Code 06106			F	EC Id	lent	ificatio	n N	umbei	r	
Purpose of Disbursement Void - Connecticut Democratic State Central Com dated 0/25/18 Candidate Name	mittee - Fede	ral; check		gory/	1.1			action f Each				2 : this Period
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼	Iy	pe					Voic	d - Co	nnec	5000.00 ticut Democratic Committee - Fede
State: District: Full Name (Last, First, Middle Initial) Connecticut Democratic State Central Committee - Federal							f Di	isburse	che eme	ck dat	ed 9	/25/18
Mailing Address 30 Arbor St Suite 103									D)2			018
City Hartford	State CT	Zip Code 06106			F	EC Id	lent	ificatio	n N	umbei	r	
Purpose of Disbursement Contribution Candidate Name				11 gory/	1.1			action f Each				this Period
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General Cify)	Ту	pe		Me	emo) Item	Cor	ntributi	1.0	5000.00
Full Name (Last, First, Middle Initial)	ederal					Date o	f Di	isburse	emei	nt		
Mailing Address 176 Laning St									D 2	/		018
City Southington Purpose of Disbursement	Southington CT 06489								n N	umbei	r	
Contribution Candidate Name	01 Cate	gory/	1.1			action f Each				5 this Period		
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼	Ту	pe		Ме	emo) Item	Cor	ntribut	1	5000.00
SUBTOTAL of Disbursements This Page (optional)				···· ►			Ì	-g		-		5000.00
TOTAL This Period (last page this line number only	y)			▶								

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 318 OF 323					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	y one)					
		Summary Page	21b	22 X 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may	not be sold or use	ed by any perso	on for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)		ress of any politica							
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Group PAC)					
Full Name (Last, First, Middle Initial)									
A. Pallone For Congress				Date of Disbursement					
Mailing Address PO Box 3176				11 02 2018					
City	State	Zip Code		FEC Identification Number					
Long Branch Purpose of Disbursement	NJ	07740							
Contribution			011	C C00226928					
Candidate Name			Category/	Transaction ID : 42816827 Amount of Each Disbursement this Period					
Pallone, Frank, , Rep.,			Type	Amount of Each Disbursement this renou					
	ement For:	2018		2500.00					
Senate	Primary	X General		Contribution					
State: NJ District: 06	Other (spe	cify) 🔻		Memo Item					
State: NJ District: 06 Full Name (Last, First, Middle Initial)									
	ete Stauber For Congress Volunteer Committee								
Mailing Address 23 Central Entrance Box 333									
City Duluth	State MN	Zip Code 55811		FEC Identification Number					
Purpose of Disbursement Contribution			011	С сооб5об97					
Candidate Name			Category/	Transaction ID : 42817428 Amount of Each Disbursement this Period					
Stauber, Pete, , ,			Type						
	ement For:			2500.00					
President	Primary	General		Contribution					
State: MN District: 08	Other (spe	city)		Memo Item					
Full Name (Last, First, Middle Initial)				Date of Disbursement					
C. Armstrong For Congress									
Mailing Address 1515 Burnt Boat Drive Box 112				11 02 2018					
City Bismarck	State ND	Zip Code 58503		FEC Identification Number					
Purpose of Disbursement		00000		C C00670547					
Contribution			011	Transaction ID : 42817429					
Candidate Name			Category/	Amount of Each Disbursement this Period					
Armstrong, Kelly, , ,			Туре	2500.00					
Office Sought: K House Disburse	ement For:								
President	Other (spe	••		Contribution					
State: ND District: 00		,, , ,		Memo Item					
SUBTOTAL of Disbursements This Page (optional)			····· ►	7500.00					
TOTAL This Period (last page this line number only	/)		••••••	, ,					

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER PAGE 319 OF 323
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				X
UnitedHealth Group Incorporated	PAC (Un	litedHealth G	Froup PAC)
Full Name (Last, First, Middle Initial) A. Stanton For Congress				Date of Disbursement
Mailing Address 4340 E Indian School Road Suite 21-518				11 02 2018
City Phoenix	State AZ	Zip Code 85018		FEC Identification Number
Purpose of Disbursement Contribution		0.0010	011	C C00657304 Transaction ID : 42817430
Candidate Name			Category/	Amount of Each Disbursement this Period
Stanton, Greg, , , Office Sought:	ment For: 2 Primary Other (spe	🗶 General	Туре	2500.00 Contribution
State: AZ District: 09				Memo Item
Full Name (Last, First, Middle Initial) B. Mailing Address				Date of Disbursement
		1		
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ment For: Primary	General		
State: District:	Other (spec	спу)		Memo Item
Full Name (Last, First, Middle Initial)				Date of Disbursement
Mailing Address				
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For: Primary	General		
State: District:	Other (spec	cify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional).			····· ►	2500.00
TOTAL This Period (last page this line number only	/)		••••••	17000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for eac	eparate schedule(s) ch category of the ed Summary Page	(check only 21b	22 23 26 27			
Any information copied from such Reports and St or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporate	d PAC (l	JnitedHealth G	Group PAC				
Full Name (Last, First, Middle Initial) A. American Insurance Association	Full Name (Last, First, Middle Initial) American Insurance Association ARK PAC						
Mailing Address 425 West Capitol 37th Floor				10 19 / Y Y Y Y 2018			
City Little Rock	State AR	Zip Code 72201		FEC Identification Number			
Purpose of Disbursement Void - American Insurance Association ARK PA	C; check dat	ed 9/25/18	011	C Transaction ID : 42748711			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbu Senate President	Primary Other (s	General		- 1000.00 Void - American Insurance Memo Item Association ARK PAC; check date			
State: District:				9/25/18			
Full Name (Last, First, Middle Initial) B. ARKPAC Mailing Address 11300 Cantrell Road							
Ste 301	State	Zip Code		FEC Identification Number			
Little Rock Purpose of Disbursement	AR	72212		С			
Contribution Candidate Name			011 Category/ Type	Transaction ID : 42748747 Amount of Each Disbursement this Period			
Senate President	rsement For: Primary Other (s	General		1000.00 Contribution Memo Item			
State: District: Full Name (Last, First, Middle Initial) C. Doug Burgum for North Dakota				Date of Disbursement			
Mailing Address 2938 Marina Rd SE			M M / D D / Y Y Y Y 10 22 2018				
City Mandan	State ND	Zip Code 58554		FEC Identification Number			
Purpose of Disbursement Contribution			011	C Transaction ID : 42758953			
Candidate Name Burgum, Doug, , ,			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbu Senate President State: District:	Primary Other (s	General		Contribution Memo Item			
SUBTOTAL of Disbursements This Page (option	al)		••••••	2500.00			
TOTAL This Period (last page this line number of	only)		•••••	, ,			

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 321 OF 323			
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a				
	y information copied from such Reports and State for commercial purposes, other than using the na							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group PAC	;)			
Α.	Full Name (Last, First, Middle Initial) Citizens for Gavarone				Date of Disbursement			
	Mailing Address 1537 Cedar Lane				11 02 2018			
	City Bowling Green	State OH	Zip Code 43402		FEC Identification Number			
	Purpose of Disbursement Contribution			011	C Transaction ID : 42816829			
	Gavarone, Theresa, , OH Rep.,	ment For:		Category/ Type	Amount of Each Disbursement this Period 1000.00			
	State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item			
в.	Full Name (Last, First, Middle Initial) Citizens for Scott Ryan				Date of Disbursement			
	Mailing Address 612 Lena Lane PO Box 4605		11 02 2018					
	City Heath Purpose of Disbursement		FEC Identification Number					
	Contribution Candidate Name Ryan, Scott, , OH Rep., Office Sought: House Senate President	t, , OH Rep., House Disbursement For:		011 Category/ Type	Transaction ID : 42816832 Amount of Each Disbursement this Period 1250.00 Contribution			
	State: District:	Other (spec	siry)		Memo Item			
C.	Full Name (Last, First, Middle Initial) Re-Elect Leon Howard				Date of Disbursement			
	Mailing Address 2425 Barhamville Rd.		_		11 02 2018			
	City Columbia Purpose of Disbursement	State SC	Zip Code 29204		FEC Identification Number			
	Contribution Candidate Name Howard, Leon, , SC Rep.,			011 Category/ Type	C Transaction ID : 42816833 Amount of Each Disbursement this Period			
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼		Contribution Memo Item			
s	UBTOTAL of Disbursements This Page (optional).			····· ►	3250.00			
т	OTAL This Period (last page this line number only	/)		••••••	, ,			

SCHEDULE B (FEC Form 3X)	11		FOR LI	NE NUMBER: PAGE 322 OF 323				
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		only one) 1b 22 23 26 27 8a 28b 28c x 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group P	AC)				
Full Name (Last, First, Middle Initial) A. Rutherford for House				Date of Disbursement				
Mailing Address 2321 Lincoln St	<u></u>			11 02 2018				
City Columbia Purpose of Disbursement	State SC	Zip Code 29201		FEC Identification Number				
Contribution Candidate Name			011 Category/	Transaction ID : 42816834 Amount of Each Disbursement this Period				
Rutherford, J. Todd, , SC Rep., Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General cify) ▼	Type	Contribution Memo Item				
Full Name (Last, First, Middle Initial) B. Setzler for Senate Mailing Address PO Box 6036				Date of Disbursement				
City West Columbia Purpose of Disbursement	West Columbia SC 29171							
Contribution Candidate Name Setzler, Nikki, , SC Sen., Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify)	011 Category/ Type	C Transaction ID : 42816835 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item				
Full Name (Last, First, Middle Initial) C. Verdin for Senate				Date of Disbursement				
Mailing Address Post Office Box 272				11 02 2018				
City Laurens Purpose of Disbursement Contribution	State SC	Zip Code 29360	011	FEC Identification Number				
Candidate Name Verdin, Daniel, , SC Sen., III Office Sought: House Disburse	ment For:		Category/ Type	Transaction ID : 42816836 Amount of Each Disbursement this Period				
State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item				
SUBTOTAL of Disbursements This Page (optional).								

SC	HEDULE B (FEC Form 3X)			FC	DR LI		NUMBER: PAGE 323 OF 323				
ITI	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(cł		only 1b	one) 22 23 26 27				
		Botanou	ounnary r ago		2	8a	28b 28c x 29 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na										
$\left \right $	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Grou	р Р.	AC))				
Α.	Full Name (Last, First, Middle Initial) SC Senate Republican Caucus						Date of Disbursement				
	Mailing Address P.O Box 12012						11 02 2018				
	City Columbia	State SC	Zip Code 29211				FEC Identification Number				
	Purpose of Disbursement Contribution			0	11	1	С				
	Candidate Name			Cate	gory		Transaction ID : 42816837 Amount of Each Disbursement this Period				
		ment For:		13	/pe		3500.00				
	Senate President	Primary Other (spec	General cify) ▼				Contribution Memo Item				
	State: District: Full Name (Last, First, Middle Initial)										
B.							Date of Disbursement				
	Mailing Address										
	City	State	Zip Code				FEC Identification Number				
	Purpose of Disbursement			· · · ·]		1	С				
	Candidate Name			Category/ Type			Amount of Each Disbursement this Period				
	Office Sought: House Disburse	ement For: Primary	General				1 1 9 1 1 9 1 1 1 1				
	State: District:	Other (spec					Memo Item				
_	Full Name (Last, First, Middle Initial)						Date of Disbursement				
C.											
	Mailing Address										
	City	State	Zip Code				FEC Identification Number				
	Purpose of Disbursement	<u> </u>		_		1	C				
	Candidate Name				egory. /pe	'	Amount of Each Disbursement this Period				
	Office Sought: House Disburse Senate	ement For: Primary	General								
	State: District:	Other (spec					Memo Item				
							3500.00				
\vdash	UBTOTAL of Disbursements This Page (optional).						12250.00				
[T]	OTAL This Period (last page this line number only	/)		•••••	·····)						