Image# 201807179115746802				PAGE 1 / 226
FEC AN	EPORT OF R ND DISBURS Other Than An Autho	SEMENTS		Office Use Only
1. NAME OF TYP COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M:	
UnitedHealth Group Incor	porated PAC (Unite	dHealth Group F	PAC)	
ADDRESS (number and street)	01 Pennsylvania Ave, NW			
Check if different	Vashington			20004
2. FEC IDENTIFICATION NUMB	ER V CITY		STATE 🔺	ZIP CODE ▲
C C00274431	3. IS 1 REF	THIS NEW PORT X (N)	OR (A)	ENDED
 (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 	(b) Monthly Report Due On: Mar 20 Apr 20 (C) 12-Day PRE-Election Report for the:	0 (M3) Jun (M4)	20 (M6) Sep 2 20 (M7) Oct 2 General (2S) in the
Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(d) 30-Day POST-Election Report for the: Election	General (30G)	Runoff (3)	DR) State of Special (30S) in the State of
5. Covering Period	01 / Y Y Y Y 01 2018	through	M M / D D / 06 30	2018
I certify that I have examined this R S Type or Print Name of Treasurer Signature of Treasurer	Sherwood, Susan, , ,	y knowledge and belie [Electronically Fil	M = M	complete.
NOTE: Submission of false, erroneous	, or incomplete information r	nay subject the person	signing this Report to th	e penalties of 52 U.S.C. § 3010
Office Use Only				FEC FORM 3X Rev. 05/2016

07/17/2018 18 : 04

X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	Report Covering the Period: From: 06		: 06 / D D / Y Y Y Y Y 30 2018
		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	797553.45	
	(c) Total Receipts (from Line 19)	211537.99	955561.07
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	1009091.44	1576641.42
7.	Total Disbursements (from Line 31)	202010.00	769559.98
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	807081.44	807081.44
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)

I. Receipts COLUMN A Total This Period COLUMN B Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Policial Committees () Itemized (use Schedule A)	Report Covering the Period: From: 06		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
(a) Individuals/Prosone Other Than Political Committees (i) Iumized (use Schedule A) (ii) Uniternized (use Schedule A) (iii) Uniternized (use Schedule A) (iii) TOTAL (add Lines 11(a)(i) and (ii)	I. Receipts		
Than Political Committees 194878.76 820461.65 (i) Unternized 16669.23 129468.59 (ii) Uniternized 16669.23 129468.59 (iii) CTAL (add Lines 11(a)(i) and (ii) 16659.23 129468.59 (b) Political Party Committees 0.00 0.00 (c) Other Political Committees 0.00 0.00 (c) Other Political Committees 0.00 0.00 (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 11137.99 952011.07 12. Transfers From Affiliated/Other Party Committees 0.00 0.00 0.00 13. All Loans Received 0.00 0.00 0.00 14. Loan Repayments Received 0.00 0.00 0.00 15. Offsets To Ontributions Made to Foderal Candidates and Other Political Committees 0.00 0.00 0.00 17. Other Federal Receipts (Dividends, Interest, etc.) 0.00 0.00 0.00 0.00 18. Transfers from Schedule H3) 0.00 0.00 0.00 0.00 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 211537.99 9555551.07 211537.99 955555			
(i) Itemized (use Schedule A)			
(i) Unitemized (use Schedule A)		404070 70	
(ii) TOTAL (add Lines 11(a)(i) and (ii)	(i) Itemized (use Schedule A)	194878.76	820461.65
Lines 11(a)(i) and (ii)		16659.23	129468.59
(c) Other Political Committees 0.00 2080.83 (d) Total Contributions (add Lines 0.00 2080.83 (d) Total Contributions (add Lines 0.00 2080.83 (d) Total Contributions (add Lines 0.00 2080.83 11 (a)(iii), (b), and (c)) (Carry 0.00 0.00 7 Transfers From Affiliated/Other 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 0.00 0.00 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 0.00 0.00 16. Refunds of Contributions Made to Federal Account (Dividends, Interest, etc.) 0.00 2500.00 1050.00 17. Other Federal Account (from Schedule H3) 0.00 0.00 0.00 0.00 18. Transfers from Non-Federal Account (from Schedule H3) 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 0.00 (c) Total Transfers (add 18(a) and 18(b)) 0.00 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))		211537.99	949930.24
(such as PACs)		0.00	0.00
(d) Total Contributions (add Lines 11(d), ind (c)) (Carry Totals to Line 32, page 5)		0.00	2080.83
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)			
Totals to Line 33, page 5) 211537.99 952011.07 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 0.00 0.00 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 0.00 0.00 16. Refunds and Chter Political Committees 0.00 0.00 0.00 17. Other Federal Receipts (Dividends, Interest, etc.) 0.00 2500.00 1050.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 211537.99 955561.07 20. Total Federal Receipts 211537.99 955561.07			
Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 0.00 0.00 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 0.00 0.00 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees 0.00 0.00 17. Other Federal Receipts (Dividends, Interest, etc.) 0.00 1050.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total 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))		211537.99	952011.07
 13. All Loans Received 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	12. Transfers From Affiliated/Other		
 10. All Loais Freceived	Party Committees	0.00	0.00
 10. All Loais Freceived			
 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	13. All Loans Received	0.00	
 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		0.00	0.00
(Carry Totals to Line 37, page 5) 0.00 0.00 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
 16. Refunds to Entropy Bage 67, bage 67		0.00	0.00
to Federal Candidates and Other Political Committees			0.00
Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		0.00	2500.00
(Dividends, Interest, etc.)		0.00	2500.00
 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)) 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))		0.00	1050.00
(a) Non-Federal Account 0.00 0.00 (from Schedule H3)		0.00	1050.00
(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))			
(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))		0.00	0.00
 (c) Total Transfers (add 18(a) and 18(b)) 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))			
 (c) Total Transfers (add 18(a) and 18(b)) 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	(b) Locia E vala (for a Ochodula LIE)	0.00	0.00
 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	(b) Levin Funds (from Schedule H5)		
12, 13, 14, 15, 16, 17, and 18(c))	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
20. Total Federal Receipts	19. Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	211537.99	955561.07
(subtract Line 18(c) from Line 19) 211537.99 955561.07	20. Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	211537.99	955561.07

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 516500.00 180500.00 and Other Political Committees... 24. Independent Expenditures (use Schedule E)..... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 549.98 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 549.98 29. Other Disbursements (Including Non-Federal Donations)..... 252510.00 21510.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share 0.00 0.00 (ii) "Levin" Share..... 0.00 0.00 (b) Federal Election Activity Paid Entirely With Federal Funds 0.00 0.00 Total Federal Election Activity (add (C) Lines 30(a)(i), 30(a)(ii) and 30(b)) 0.00 0.00 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 202010.00 769559.98 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 202010.00 769559.98

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FFC	Form	3X	(Rev	05/2016)
I LO	1 01111	JA	(1100.	03/2010	,

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			-7	211537.99
	1					0.00
		-1	1		-7-	0.00
	1					211537.99
		-7			-7	
1.1						0.00
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_	÷			-		1
L		-7-			-7-	0.00

952011.07 549.98 951461.09 0.00 0.00 0.00

COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

		Detailed Summary Page														
						13		14	H	_	15	16	17			
	y information copied from such Reports and Stater for commercial purposes, other than using the nar															
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (L	Jnited	Health Group P	AC)											
Α.	Full Name of Individual (Last, First, Middle Initial) GAUDIO, JOSEPH, , ,	or Full O	rganizatio	on Name		Date of Receipt										
	Mailing Address 4842 E MOUNTAIN VIEW RD															
	5	State		Code		Trans	sacti	ion	ID :	PR [*]	11598	118504	92			
	PARADISE VALLEY	AZ	85	253-1539		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	0						-			-g	576	.90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (1 Plan CE	or Individual) O		М	emo	o Ite	em							
	Receipt For: A	ggregate	Year-to-D	Date 🔻												
	Primary General Other (specify) ▼			2499.90] F	P/R Dec	luctio	on	(\$192	2.30) Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initial) WICHMANN, DAVID, , ,	or Full O	rganizatio	on Name		Date of Receipt										
	Mailing Address 7000 ANTRIM ROAD			M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y												
	City	State														
	EDINA	MN	55	439-1708		Amount of Each Receipt this Period							ł			
	FEC ID number of contributing federal political committee.	C			576.90											
	Name of Employer (for Individual) United HealthCare Services Inc	Occu CEC		Memo Item												
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Year-to-E	Date ▼ 2499.90] P	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) MEAD, BRUCE, , ,	or Full O	rganizatio	on Name		Date o	f Re	ecei	ipt							
	Mailing Address 1232 GRAY BRANCH RD				^M 06	/	ľ	30		/ Y	y y 2018	Y				
	3	State	· · ·	Code		Trans	sact	ion	ID :	PR	11598	161504	92			
	MCKINNEY	ТХ	750	071-6495		Amoun	t of	Ea	ich R	ece	ipt thi	s Period	ł			
	FEC ID number of contributing federal political committee.	0						y		_	9	576	.90			
	Name of Employer (for Individual) Optum Services, Inc	Occu SVP	• •	or Individual)		N	lemc	o It	em							
	Receipt For:	gregate	Year-to-F)ate ▼												
	Primary General Other (specify)	<u></u>] 「	P/R Deduction (\$0.00 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)				•			,			,	1730	.70			
T	OTAL This Period (last page this line number only))			•			,			-9					

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

PAGE 7 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
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 PENSHORN, JOHN , , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 120 BLACK OAKS LANE			M M / D D / Y Y Y Y 06 30 2018								
City WAYZATA	State MN	Zip Code 55391-1363	Transaction ID : PR1159816950492 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) P UnitedHlth Group	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle KALLMEYER , PAUL , , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 468 HERALD DR			06 / D D / Y Y Y Y Y 2018								
City AMBLER	State PA	Zip Code 19002-1530	Transaction ID : PR1159817450492								
FEC ID number of contributing federal political committee.	C	19002-1930	Amount of Each Receipt this Period 392.85								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1297.60	P/R Deduction (\$130.95 Bi-Weekly)								
Full Name of Individual (Last, First, Middle QUIRK, THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 6458 ORCHID LANE			06 / D D / Y Y Y Y Y 2018								
City DALLAS	State TX	Zip Code 75230-4121	Transaction ID : PR1159819150492 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 Receipt For:		upation (for Individual) Care Initiv	Memo Item								
Primary General Other (specify)	rimary General P/R Deduction										
SUBTOTAL of Receipts This Page (optional)			1018.20								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

		Use separate schedule(s)			(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	-	_	11b	11c	12				
Any information copied from such Reports and or for commercial purposes, other than using			erson foi		ourp							
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle MIGLIORI, RICHARD, , ,	Initial) or Full O	rganization Name	Da	ate of	Rec	ceipt						
Mailing Address PO BOX 72				06 30 Y Y Y Y Y 2018								
City WAYZATA	State MN	Zip Code 55391-0072						32745049 is 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		Me	mo	Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. RIVET, JEANNINE, , ,	Initial) or Full O	rganization Name	Da	ate of	Rec	ceipt						
Mailing Address 4305 TRILLIUM WAY				06 / 30 / Y Y Y Y 2018								
City MINNETRISTA	State MN	Zip Code 55364-7708						3005049				
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) EVP UnitedHIth Grp			mo	ltem						
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		2499.90	P/R	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MATTEO, MICHAEL, , ,	Initial) or Full O	rganization Name	Da	ate of	Rec	ceipt						
Mailing Address 25 JEREMIAHS WAY	01-1-	7. 0.4	_ L	06	/	30		2018				
City SOUTH GLASTONBURY	State CT	Zip Code 06073-3621						13345049 is Period				
FEC ID number of contributing federal political committee.	С			_		y .	. y	346.	14			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) If Growth Off		P/R Deduction (\$115.38 Bi-Weekly)								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1499.94	P/F									
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Use separate schedule(s)

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PAGE 9 OF

		Use separate schedule(s)	(check only	one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11c	12	_				
Any information copied from such Reports and or for commercial purposes, other than using t				ourpose of sol							
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. CARR, ANTHONY, , ,	Initial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 5400 THOROUGHBRED LI	N		06								
City SOUTHWEST RANCHES	State FL	Zip Code 33330-2411		action ID : PR of Each Rece			2				
FEC ID number of contributing federal political committee.	С					576.9	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP PEOs Trusts	Me	emo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Dedu	uction (\$192.30	0 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle B. MILLER, KATHERINE, , ,	Initial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 2321 HARBOR LAKE DRIV			м м 06								
City ORANGE PARK	State FL	Zip Code 32003-7799		of Each Rece							
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	Me	emo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Dedu	iction (\$192.30) Bi-We	ekly)					
Full Name of Individual (Last, First, Middle ANDERSON, CRAIG, , ,	Initial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 47 AMATO CIRCLE			06	/ D D 30		2018	Y				
City WETHERSFIELD	State CT	Zip Code 06109-3971		of Each Rece			2				
FEC ID number of contributing federal political committee.	С			-	, .	576.9	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt	Me	emo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Dedu	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).					, ,	1730.7	0				
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

FOR LINE NUMBER:

PAGE 10 OF

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 11								
			13 14 15 16 1 berson 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, Mid ERICKSON, KAREN, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 15348 RED OAKS RO	AD SE		06 30 2018								
City PRIOR LAKE	State MN	Zip Code 55372-1834	Transaction ID : PR1575957650492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mid MONFILETTO, ERNEST, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3062 COMFORT ROA	1		M = M / D = D / Y = Y = Y Y 06 30 2018								
City NEW HOPE	State PA	Zip Code 18938-5622	Transaction ID : PR1575958150492 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 ▼ 999.96	P/R Deduction (\$76.92 Bi-Weekly)								
Full Name of Individual (Last, First, Mid VALENTA, LEE, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5033 PARK TERRACE	1		06 / D D / Y Y Y Y 2018								
City EDINA	State MN	Zip Code 55436-1098	Transaction ID : PR1575958550492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	nal)		1384.56								
TOTAL This Period (last page this line n	umber only)										

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17				te schedule(s)	(ch	neck only	one	e)						
111	EMIZED RECEIPTS			tegory of the mmary Page		× 11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the r						ourpo							
$\overline{)}$	NAME OF COMMITTEE (In Full)		1.14.11.1.1		\sim									
/	UnitedHealth Group Incorporated		JnitedHea	Ith Group PA	(C)									
Α.	Full Name of Individual (Last, First, Middle Initia KELLY, JOHN, , ,	ll) or Full O	rganization Na	me		Date of	Rec	eipt						
	Mailing Address 341 PLEASANT AVENUE					06 30 2018								
	City SAINT PAUL	State MN	Zip Code 55102-2	333						35975049 is Period				
	FEC ID number of contributing				_	Amount			ceipt ti					
	federal political committee.	С				<u> </u>		p	-9-	576.	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ind ? Tax	ividual)		Me	emo	Item						
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻			P/R Dedu	uctio	n (\$192	.30 Bi-W	/eekly)				
	Other (specify)	L	-1jn1jn	2499.90										
в.	Full Name of Individual (Last, First, Middle Initia WEBB, ROBERT, , ,	l) or Full O	rganization Na	me		Date of	Rec	eipt						
	Mailing Address 4516 DREXEL AVENUE			06 / Y Y Y Y 2018										
	City	State	· ·							36535049				
	EDINA					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 Inc P UnitedHIth Gr	,		Me	emo	Item						
	Receipt For: Primary General	Aggregate	Year-to-Date V	7				(*						
	Other (specify) ▼		* • • *	2499.90		P/R Dedu	ictior	ו (\$192.	30 BI-W	(eekly)				
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia HUGHES, RICHARD, , ,	l) or Full O	rganization Na	me		Date of	Rec	eipt						
	Mailing Address 3905 COUNTY ROAD 44					M M	1	D D D 30	/ Y	2018	Y			
	City MINNETRISTA	State MN	Zip Code 55364-95	70	_					30415049				
	FEC ID number of contributing	_	55564-95	072	_	Amount	of E	Each Re	eceipt th	is Period				
	federal political committee.	С				Ļ.			9	678.	00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ind COO of Huma	,		Me	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼		P/R Deduction (\$226.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			••••••	<u> </u>				.,	1831.	80			
т	OTAL This Period (last page this line number or	וy)		••••••	•				-					

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TEMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using 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 JOHNSON, THAD, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9741 GLACIER BAY			M M / D D / Y Y Y Y 06 30 2018					
City	State	Zip Code	Transaction ID : PR1596304350492					
EDEN PRAIRIE	MN	55347-2615	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
United HealthCare Services Inc	Mkt	Group Gen Counsel	—					
Receipt For:	Aggregate	Year-to-Date 🔻						
Primary General		2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify) v		2493.30						
Full Name of Individual (Last, First, Middle B. SCHUMACHER, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5401 LARADA LANE			06 30 / Y Y Y Y 06 30 2018					
City	State	Zip Code	Transaction ID : PR1596305450492					
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) United HealthCare Services Inc		upation (for Individual) Grp Pres & COO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Primary General Other (specify) ▼		, 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. THEISEN, SCOTT, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1950 MEADOWWOODS TR	RAIL		06 30 2018					
City	State	Zip Code	Transaction ID : PR1596305650492					
LONG LAKE	MN	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) 9 Bus Ops	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			1730.70					
TOTAL This Period (last page this line number	er only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)					
II EIVILED RECEIPIO		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			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 OBERRENDER, ROBERT, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 4505 MOORLAND AVENU	E		06 30 Y Y Y Y Y 06 30 2018					
City State EDINA MN FEC ID number of contributing C federal political committee. C		Zip Code 55424-1158	Transaction ID : PR1596307050492 Amount of Each Receipt this Period					
			576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Treas & Chief Invstmnt Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle ANDERSON, KENNETH, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 12700 NE 245TH AVE								
City BRUSH PRAIRIE	State WA	Zip Code 98606-7761	Transaction ID : PR1596309250492					
FEC ID number of contributing federal political committee.	C	30000-7701	Amount of Each Receipt this Period					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item					
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 258.83	P/R Deduction (\$19.91 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. FLYNN, DIANE, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 3318 FOXRIDGE CIRCLE	1		06 / D D / Y Y Y Y 2018					
City TAMPA	State FL	Zip Code 33618-2149	Transaction ID : PR1596309750492 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) n Exec Dir	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			753.63					
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				
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. DAVIDSON, TRACY, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 6058 HARBOUR TOWN CI	R		06 30 2018				
City	State	Zip Code	Transaction ID : PR1596311650492				
WESTERVILLE	OH	43082-8144	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		576.90				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
United HealthCare Services Inc	Hlth	Plan CEO					
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
		<u></u>	-				
Full Name of Individual (Last, First, Middle DUNLOP, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 2964 WYSE COURT			06 / D D / Y Y Y Y Y 2018				
City	State	Zip Code	Transaction ID : PR1596312350492				
	OH	43035-8253	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		300.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$100.00 Bi-Weekly)				
Primary General Other (specify) ▼		, 1300.00					
Full Name of Individual (Last, First, Middle C. GARCIA, STEVAN, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 1375 GRAYHAWK PLACE			06 30 2018				
City	State	Zip Code	Transaction ID : PR1596312950492				
LARKSPUR	СО	80118-8623	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		0.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops	Memo Item				
Receipt For:	1	Year-to-Date ▼					
Primary General Other (specify)		4999.90	P/R Deduction (\$0.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			876.90				
TOTAL This Period (last page this line number	er only)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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 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 (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle A. HEUMANN, KURT, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9825 GERALD DR			06 30 2018					
City SAINT LOUIS	State MO	Zip Code 63128-1767	Transaction ID : PR1596313750492 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) Plan CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. MALLATT, KATHLEEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4304 SOUTH 167 AVENU	1		06 / D D / Y Y Y Y Y Y 2018					
City OMAHA	State NE	Zip Code 68135-1353	Transaction ID : PR1596315450492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. ROSENTHAL, DANIEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 8 VIA HERMOSA			06 / Y Y Y Y 2018					
City ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR1596317350492 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) Ntwk	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)		1269.18					
TOTAL This Period (last page this line numl	ber 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				
			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 PA	AC)				
Full Name of Individual (Last, First, Middle A. RUTH, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 16621 ALEXANDER MAN	OR DRIVE		06 30 / Y Y Y Y Y				
City SILVER SPRING	State MD	Zip Code 20905-5028	Transaction ID : PR1596317450492 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, Hlth Advancement	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle STURKEY, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 1941 MARINA ROAD	Chata	Zin Oode	06 30 2018 Transaction ID : PR1596318450492 Amount of Each Receipt this Period				
City IRMO	State SC	Zip Code 29063-8579					
FEC ID number of contributing federal political committee.	С		117.00				
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 ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle TODD, JEFFREY, , ,	,	rganization Name	Date of Receipt				
Mailing Address 467 PRAIRIE WAY SOUT		7. 0.4	06 / D D / Y Y Y Y 2018				
City BAYPORT	State MN	Zip Code 55003-1607	Transaction ID : PR1596319050492 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) Jnderwriting	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional))		768.90				
TOTAL This Period (last page this line numb	per 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 to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	UnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle A. WASSERSTEIN, M LAURIE, , ,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 92 GOODWIN CIRCLE			06 / D D / Y Y Y Y Y 2018
City HARTFORD	State CT	Zip Code 06105-5205	Transaction ID : PR1596319550492
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) Ntwk Prgms	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)
Full Name of Individual (Last, First, Middle DODDY, JOHN, , ,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 50 WALSINGHAM ROAD			06 / D D / Y Y Y Y 2018
City MENDHAM	State NJ	Zip Code 07945-1827	Transaction ID : PR1600597350492 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 ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MICHAUX, MICHAEL, , ,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 742 GOODRICH AVE			06 30 / Y Y Y Y 2018
City SAINT PAUL	State MN	Zip Code 55105-3343	Transaction ID : PR1600598550492
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 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 ▼ 1300.00	P/R Deduction (\$100.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	l)		474.69
TOTAL This Period (last page this line num	ber only)	•••••	

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IT.	EMIZED RECEIPTS		Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page		× 11a		11b	11c	12	,	
Ar	y information copied from such Reports and S	tatements ma	ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting	16 contribu	ions	
or	for commercial purposes, other than using the	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 (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Init SANDY, LEWIS, , ,	tial) or Full C	rganization Name		Date of	f Re	eceipt				
	Mailing Address 4800 SUNNYSLOPE ROAD E				м м 06	1	D 30) / Y	Y Y 2018	Y	
	City EDINA	State MN	Zip Code 55424-1163	_					59875049 iis Period	2	
	FEC ID number of contributing federal political committee.	С							576.	90	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Clin Advancement		Μ	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 2499.90				P/R Deduction (\$192.30 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initer PETERSON, MATTHEW, , ,	tial) or Full C	al) or Full Organization Name			f Re	eceipt				
	Mailing Address 2260 FOX STREET				06 / 0 / Y Y Y Y Y 06 / 30 / 2018				Y		
	City ORONO	State Zip Code MN 55356-8316			Transaction ID : PR1602669950492				2		
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) CEO Ancillary & Ind/Sgt CAO Aggregate Year-to-Date 2499.90			Amount of Each Receipt this Period				90		
	Name of Employer (for Individual) United HealthCare Services Inc				М	emo	tem				
	Receipt For: Primary General Other (specify) ▼				P/R Deduction (\$192.30 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Inite MALONEY, JEFFREY, , ,				Date of Receipt						
	Mailing Address 6327 PASADENA POINT BLV	/D S			^M 06	/	D 30		2018	Y	
	City GULFPORT	State FL	Zip Code 33707-3867						24355049 iis Period	2	
	FEC ID number of contributing federal political committee.	С			288.45				45		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo Item						
Receipt For: Aggreen and and and and and and and and and an			ggregate Year-to-Date ▼ 1249.95			P/R Deduction (\$96.15 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		••••••	•			, .	. ,	1442.:	25	
Г	OTAL This Period (last page this line number	only)		-	Γ.						

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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 Incorpo	rated PAC (I	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middl A. CELLI, PAT, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1210 COUNTRY CLUB E	DR		06 30 2018				
City CUTCHOGUE	State NY	Zip Code 11935-1728	Transaction ID : PR1613243750492 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:	Hlth	upation (for Individual) Plan CEO	Memo Item				
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middl B. KENNEDY , WILLIAM, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 14 MYRA LN			06 / 0 / Y Y Y Y 06 2018				
City BURLINGTON	State CT	Zip Code 06013-1327	Transaction ID : PR1653443150492 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		60.00				
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 ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middl C. BELLAMY, THOMAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 2743 THOMAS AVENUE			06 / D D / Y Y Y Y 2018				
City MINNEAPOLIS	State MN	Zip Code 55416-4346	Transaction ID : PR1653444350492 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) SIs Ops	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optiona	l)		1213.80				
TOTAL This Period (last page this line num	nber only)						

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171			Use separate schedule(s)	(check only one)					
11			for each category of the Detailed Summary Page	X 11a 11b 11c 12					
An	y information copied from such Reports and SI for commercial purposes, other than using the	atements ma	ay not be sold or used by any p	erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)	name anu a							
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P/	4C)					
A.	Full Name of Individual (Last, First, Middle Init SULLIVAN, DANIEL, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 57 QUORN HUNT ROAD			06 / D D / Y Y Y Y 2018					
	City WEST SIMSBURY	StateZip CodeCT06092-2524		Transaction ID : PR1653445850492 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	Occi VP I	upation (for Individual) IT	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Init EMERSON, PAUL, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 18855 MEADOW VIEW BLVD		- 1	06 / D D / Y Y Y Y Y 06 2018					
	City PRIOR LAKE	State Zip Code MN 55372-3133		Transaction ID : PR1806750350492 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		576.90					
	Name of Employer (for Individual) Optum360 Services Inc	Occ	upation (for Individual) O	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
С.	Full Name of Individual (Last, First, Middle Init ANDERSON, CATHERINE, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 57 SIMMONS LANE	01-1-		M M / D D / Y Y Y Y Y 06 30 2018					
	City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550750492 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) 9 Strat Initiv	Memo Item					
Receipt For: Agg Primary General Other (specify) Image: Constraint of the specify in the specify in the specify in the specify in the specific of the specific			Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			1269.18					
т	OTAL This Period (last page this line number of	only)							

SCHEDULE A (FEC Form 3X) - DEAEIDTA

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)				
II EIVIIZED RECEIFIJ		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)	oorated PAC (l	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Mi ADUFEK, ROBERT, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 816 PROMONTORY F	PLACE		06 30 / Y Y Y Y 2018				
City EAGAN	State MN	Zip Code 55123-2297	Transaction ID : PR1903577150492 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		75.00				
Name of Employer (for Individual) Optum Services, Inc	Occi Dir I	upation (for Individual) T	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)				
Full Name of Individual (Last, First, Mi B. JOHNSON, CHRISTOPHER,		rganization Name	Date of Receipt				
Mailing Address 12880 53RD STREET	NORTH		06 / D D / Y Y Y Y Y 2018				
City STILLWATER	State MN	Zip Code 55082-1063	Transaction ID : PR1903591150492 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) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)				
Full Name of Individual (Last, First, Mi C. SANTELLI, JOHN, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 25510 BIRCH BLUFF			M M / D D / Y Y Y Y Y 06 30 2018				
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622050492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	nal)		768.90				
TOTAL This Period (last page this line r	umber 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			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 WEYMOUTH, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 317 WRIGHTS MILL RD			M M / D D / Y Y Y Y 06 30 2018					
City COVENTRY	State CT	Zip Code 06238-1559	Transaction ID : PR1903636950492 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		807.00					
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 ▼ 1498.84	P/R Deduction (\$269.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle BRYAN, KATHIE, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 912 JOSHUA PLACE			06 / ^D ⁻					
City SAN DIEGO	State CA	Zip Code 92154-2537	Transaction ID : PR2119469450492 Amount of Each Receipt this Period 75.00					
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) g Cnslt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. GILDERNICK, AMY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2709 WILLIAMS GRANT	1		06 / D D / Y Y Y Y 2018					
City DE PERE	State WI	Zip Code 54115-9456	Transaction ID : PR2119475250492 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 Clms	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			942.00					
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	X 11a 11b 11c					
Any information copied from such Reports and or for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	C)					
Full Name of Individual (Last, First, Middle I HANSEN, DAVID, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 33 VIA CONOCIDO			06 30 /	2018				
City SAN CLEMENTE	State CA	Zip Code 92673-7044	Transaction ID : PR2119 Amount of Each Receipt t					
FEC ID number of contributing federal political committee.				405.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1755.00	P/R Deduction (\$135.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I B. HO, SAMUEL, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4220 OCEAN DR			06 / D D / 06 / 30	2018				
City MANHATTAN BEACH	State CA	Zip Code 90266-3059	Transaction ID : PR2119 Amount of Each Receipt t					
FEC ID number of contributing federal political committee.	C		P/R Deduction (\$192.30 Bi-Weekly)					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Clin Off						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90						
Full Name of Individual (Last, First, Middle I C. MACEMEADOR, HEATHER, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 13531 CARLTON OAKS			M M / D D / 06 30	2018				
City SAN ANTONIO	State TX	Zip Code 78232-4902	Transaction ID : PR211 Amount of Each Receipt t					
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 ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			· · · · · ·	1041.90				
TOTAL This Period (last page this line numbe	r only)							

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11			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				for the		ose of	soliciting	contribu	tions			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P	AC)									
A.	Full Name of Individual (Last, First, Middle Initi NEURURER, SCOTT, , ,	al) or Full O	rganization Name		Date of Receipt								
	Mailing Address 23822 VIA MONTE				M M / D D / Y Y Y Y 06 30 2018								
	City COTO DE CAZA	State CA	Zip Code 92679-4001		Transaction ID : PR2119484950492 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	Occu VP (upation (for Individual) Dps		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95] 「	P/R Ded	uctio	on (\$96. ⁻	15 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi NYGARD, KEITH, , ,	al) or Full Oi	rganization Name		Date of	Red	ceipt						
	Mailing Address 9225 W CHARLESTON BOULE #2034				^M 06	/	D D D 30	/ Y	y y 2018	Y			
	City LAS VEGAS	State NV	Zip Code 89117-7059				-		8505049				
	FEC ID number of contributing federal political committee.						Amount of Each Receipt this Period						
	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 ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)									
c.	Full Name of Individual (Last, First, Middle Initi PAXSON, LYNDA A, , ,	al) or Full O	rganization Name		Date of	Red	ceipt						
	Mailing Address 3924 E GARNET PL	1 -			^M 06	/	D D D 30		2018				
	City HIGHLANDS RANCH	State CO	Zip Code 80126-5044						48585049 is Period	2			
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	, .	. ,	75.	00			
	Name of Employer (for Individual) UNITED HEALTHCARE SVS INC		ipation (for Individual) eld Acct Mgr		M	emo	ltem						
Receipt For: Primary General Other (specify)		Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)									
	UBTOTAL of Receipts This Page (optional)				Ľ.	_	5		423.	45			
T	OTAL This Period (last page this line number o	niy)					,		1 1 4				

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PAGE 25 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	H	11		11c	12		
Any information copied from such Reports and			erson for			se of s				
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and a	ddress of any political committee	e to solici	t cont	ributio	ons fro	m such	committ	ee.	
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I A. PITTMAN, AUSTIN, , ,	nitial) or Full C	organization Name	Da	te of I	Recei	ipt				
Mailing Address 4621 EDINA BLVD			M	06 30 2018						
City EDINA	State MN	Zip Code 55424-1154						8675049 is Period	2	
FEC ID number of contributing federal political committee.	С				-		-7	576.	90	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		Mer	no Ite	em				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R	Dedu	ction	(\$192.:	30 Bi-W	'eekly)		
Full Name of Individual (Last, First, Middle I B. TUCKER, STEVEN, , ,	nitial) or Full C	organization Name	Da	te of I	Recei	ipt				
Mailing Address 3784 8TH AVENUE						30	/ Y	2018	Y	
City SAN DIEGO	State CA	Zip Code 92103-4305		Transaction ID : PR2119492050492 Amount of Each Receipt this Period					2	
FEC ID number of contributing federal political committee.	С							288.0	00	
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Regl Affs			Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00	P/R	P/R Deduction (\$96.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. VANASTEN, SUSAN, , ,	nitial) or Full C	organization Name	Da	te of I	Recei	ipt				
Mailing Address N2249 NICOLE COURT	1		M	06 ^M	/	30	/ Y	2018	Y	
City KAUKAUNA	State WI	Zip Code 54130-9462						9265049 is Period	2	
FEC ID number of contributing federal political committee.	С			_	y		y	120.	00	
Name of Employer (for Individual) United HealthCare Services Inc	Occ M&F	Memo Item								
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 520.00	P/R	Dedu	ction	(\$40.0	0 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional)					,		,	984.9	90	
TOTAL This Period (last page this line numbe	r only)				T		-,-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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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 verson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (IN F UnitedHealth Group		JnitedHealth Group P	AC)						
Full Name of Individual (Last, A. WRIGHT, GREGORY, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10471 STRA	ND TERRACE		M M / D D / Y Y Y Y 06 30 2018						
City SANTA ANA	State CA	Zip Code 92705-1495	Transaction ID : PR2119494150492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		75.00						
Name of Employer (for Individ United HealthCare Services Ind	,	upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary Generation Other (specify) ▼		Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)						
Full Name of Individual (Last, B. MASON, JOHN, J, ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 524 N CRES	CENT HEIGHTS BLVD		M M / D D / Y Y Y Y 06 30 2018						
City LOS ANGELES	State	Zip Code 90048-2208	Transaction ID : PR2126373850492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.		576.90							
Name of Employer (for Individ United HealthCare Services Ind	,	upation (for Individual) Comm	Memo Item						
Receipt For: Primary Gener Other (specify) ▼		Year-to-Date ▼ 2307.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, BURKE, FORREST, ,	. ,	rganization Name	Date of Receipt						
Mailing Address 380 LEAF ST	REET	Zip Code	06 / D / Y Y Y Y 06 2018						
City ORONO	MN	55356-9733	Transaction ID : PR2133132450492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individ United HealthCare Services Ind		upation (for Individual) Unit CEO	Memo Item						
Receipt For: Primary Generation Other (specify)		Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Pa	ge (optional)		1228.80						
TOTAL This Period (last page t	nis line number only)								

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			Use separate schedule(s)	(check only one)								
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
				to solicit contributions from such committee.								
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia HULTGREN, BROR, , ,	l) or Full Oi	Drganization Name	Date of Receipt								
	Mailing Address 408 22ND ST			06 30 / Y Y Y Y 06 30 2018								
	City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133250492 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) s Unit CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initia MORISATO, SUSAN, , ,	l) or Full Oi	Drganization Name	Date of Receipt								
	Mailing Address 238 ARDMORE ROAD			06 / D D / Y Y Y Y Y 2018								
	City DES PLAINES	State	Zip Code	Transaction ID : PR2133133850492								
			60016-2119	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		cupation (for Individual) es Insurance Sols	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia PUTNAM, T JEFFREY, , ,	l) or Full Oi	Drganization Name	Date of Receipt								
	Mailing Address 303 ELMWOOD PLACE WEST			06 / D D / Y Y Y Y 2018								
	City MINNEAPOLIS	State MN	Zip Code 55419-1349	Transaction ID : PR2133134250492 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) Group CFO	Memo Item								
Receipt For: Aggregate Ye Primary General Other (specify) Image: Constraint of the second sec			Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	1730.70								
т	OTAL This Period (last page this line number or	ly)	•									

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			Use separate schedule(s)	(ch	(check only one)							
			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		oose of	soliciting	contribu	tions		
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia FALKENBERG, ROBERT, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
Mailing Address 6 LANTANA City State NEWPORT COAST CA FEC ID number of contributing C federal political committee. C					м м 06	/	D D 30	/ Y	y y 2018	Y		
			Zip Code 92657-1646						2845049 is Period	2		
							7	-	350.	76		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 1479.96	"	P/R Dedu	uctic	on (\$116	6.92 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initia SMITH, DANNETTE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 4200 ALDEN DRIVE		06 / 30 / 2018 Transaction ID : PR2145729950492									
	City EDINA	State MN	Zip Code 55416-5010				-		2995049 is Period	2		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Sr Deputy Gen Counsel			576.90							
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 961 RIVER FOREST DRIVE	1 -			^M 06	/	D D D 30		2018			
	City MAINEVILLE	State OH	Zip Code 45039-7720						96755049 is Period	2		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	9	864.	00		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 1255.86]	P/R Ded	uctio	on (\$288	3.00 Bi-W	/eekly)			
s	UBTOTAL of Receipts This Page (optional)			•			9		1791.	66		
т	OTAL This Period (last page this line number or	ıly)		•			,	-				

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	Use separate schedule(s)	(check	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11:	a 🗌	11b	11c	12					
Any information copied from such Reports a or for commercial purposes, other than usin												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Midd BEAULE, JEAN-FRANCOIS, , ,	le Initial) or Full O	rganization Name	Date	of R	eceipt							
Mailing Address 7 STRATFORD RD				06 30 2018								
City FARMINGTON	State CT	Zip Code 06032-1444					31365049 is Period	2				
FEC ID number of contributing federal political committee.	C				-		346.	14				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIth Advancement		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1499.94	P/R D	educt	ion (\$11	5.38 Bi-W	/eekly)					
Full Name of Individual (Last, First, Midd B. MCGUIRE, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date	of R	eceipt							
Mailing Address 437 DRURY LANE			0	[™]	30	/ Y	2018	Y				
City WYCKOFF	State NJ	Zip Code 07481-2204					1885049 is Period	2				
FEC ID number of contributing federal political committee.	С	C			288.45							
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Hlth Plan CEO				Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. RYAN, JOHN, , ,	le Initial) or Full O	rganization Name	Date	of R	eceipt							
Mailing Address 45 WESTMORELAND L	·			6	30		2018					
City NAPERVILLE	State IL	Zip Code 60540-5817					81965049 is Period	2				
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) CInt Mgmt Svc		Mem	o Item							
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2499.90	P/R D	educt	ion (\$19)	2.30 Bi-W	/eekly)						
SUBTOTAL of Receipts This Page (optional	al)				, .	,	1211.4	49				
TOTAL This Period (last page this line nur	nber only)				-							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 30 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11							
			13 14 15 16 1 berson 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. SAILOR, ROY, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 276 COYOTE WILLOW D	RIVE		06 / Y Y Y Y Y 06 30 2018							
City COLORADO SPRINGS	State CO	Zip Code 80921-7631	Transaction ID : PR2225819750492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		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 ▼ 999.96	P/R Deduction (\$76.92 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. CONNLY, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 570 MONTCALM PL			06 / 0 / Y Y Y Y 06 2018							
City SAINT PAUL	State MN	Zip Code 55116-1730	Transaction ID : PR2247625850492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. CARCIONE, JOSEPH, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11 CARRIAGE WAY			M M / D D / Y Y Y Y 06 30 2018							
City WHITE PLAINS	State NY	Zip Code 10605-5424	Transaction ID : PR2247626850492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		173.10							
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 ▼ 750.10	P/R Deduction (\$57.70 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		980.76							
TOTAL This Period (last page this line num	ber 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)				
		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 Ind	corporated PAC (I	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, Fire A. KANTOLA, KEVIN, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 7031 HALSTEAD	DRIVE		M M / D D / Y Y Y Y 06 30 2018				
City MINNETRISTA	State MN	Zip Code 55364-3201	Transaction ID : PR2247627050492 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	Occi VP	upation (for Individual) IT	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)				
Full Name of Individual (Last, Firs B. OBRIEN, DENNIS, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 61 LOUGHLIN A			06 / Y Y Y Y Y 2018				
City	State	Zip Code	Transaction ID : PR2247627350492				
COS COB		06807-2621	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) gn CEO	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, VERNEY, JEFFERY, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 266 WESTLEDG			06 / D D / Y Y Y Y Y 2018				
City WEST SIMSBURY	State CT	Zip Code 06092-2017	Transaction ID : PR2247627450492 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) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page	(optional)		1270.80				
TOTAL This Period (last page this	ine number only)						

SCHEDULE A (FEC Form 3X) - DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	check only one)							
II EIVIIZED KEGEIF13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11							
			13 14 15 16 1 berson 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 GARODIA, SANJAY, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 110 COVINGTON COUR	Г		M M / D D / Y Y Y Y 06 30 2018							
City OAK BROOK	State IL	Zip Code 60523-2574	Transaction ID : PR2247627850492 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	Occi COC	upation (for Individual) D	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. OHMAN, DANIEL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 205 RIVERMERE WAY			06 / D D / Y Y Y Y 06 30 2018							
City ATLANTA	State GA	Zip Code 30350-6346	Transaction ID : PR2247628050492 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) In CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. PRINCE, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 546 HARRINGTON ROAI			M = M / D = D / Y = Y = Y = Y 06 30 2018							
City WAYZATA	State MN	Zip Code 55391-1550	Transaction ID : PR2259738450492 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 CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		980.73							
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

FOR LINE NUMBER:

(check only one)

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	ED RECEIPTS			Detailed Summary Page		X 11a		11	b	11c		12	
			\Box			13		14		15		16	17
or for con	mation copied from such Reports and nmercial purposes, other than using the transmission of the second seco												
	OF COMMITTEE (In Full)			_									
✓ Unite	edHealth Group Incorpora	ted PAC (l	Un	tedHealth Group PA	NC)								
	ame of Individual (Last, First, Middle I NN, CHRISTOPHER, , ,	nitial) or Full O	itial) or Full Organization Name						pt				
Mailing	Address 1122 COLORADO STREET SUITE 2399					м м 06	1		30	/ Y		018	Y
City		State Zip Code Transaction							ID : F	PR2270	5229	95049	2
AUST	IN	TX		78701-2132	_	Amount	of	Ea	ch Re	eceipt t	nis F	Period	
	D number of contributing I political committee.	С						-			_	173.)7
	of Employer (for Individual) HealthCare Services Inc		•	ion (for Individual) fs Dir		Me	emc	o Ite	əm				
Receip	ot For:	Aggregate	Yea	r-to-Date ▼									
	Primary General Other (specify) ▼		,	749.97		P/R Deduction (\$57.69 Bi-Weekly)							
	ame of Individual (Last, First, Middle I LEYCARRIER, ANGELA, , ,	nization Name		Date of	Re	ecei	pt						
Mailing	Mailing Address 3219 PENINSULA DRIVE								30	/ Y) 18	Y
City		State		Zip Code		Trans	acti	ion	ID : F	R2402	3177	75049	2
JAME	STOWN	NC		27282-8717		Amount	of	Ea	ch Re	eceipt t	nis F	Period	
	D number of contributing I political committee.	C						-			_	60.	00
Name Optum	of Employer (for Individual) Services, Inc	Occ Dir		Me	emc	o Ite	əm						
	ot For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 260.00		P/R Dedu	uctio	on ((\$20.0	0 Bi-W	eekly	y)	
	ame of Individual (Last, First, Middle I IBAUMGARTEN, MARILYN		Orga	nization Name		Date of	Re	ecei	pt				
Mailing	9 Address 4800 W 27TH ST					м м 06	1	Γ	30	/ Y)18)	Y
City		State		Zip Code		Trans	act	ion	ID : I	PR2402	3179	95049	2
SAINT	T LOUIS PARK	MN		55416-1933		Amount	of	Ea	ch Re	eceipt t	nis F	Period	
	D number of contributing I political committee.	С						,		y	_	60.	00
Name	of Employer (for Individual)	Occi	upat	ion (for Individual)		Me	emo	o Ite	em				
	n Services, Inc		•	Mgmt									
Receip	ot For:			ur-to-Date ▼									
	Primary General Other (specify)		-	260.00	P/R Deduction (\$20.00 Bi-Weekly)								
	TAL of Receipts This Page (optional) This Period (last page this line numbe				I 		-	,	-	9	+	293.0)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 12						
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 LOGAN, JAKE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4826 EAST CALLE REDO	NDA		M M / D D / Y Y Y Y Y 06 30 2018						
City PHOENIX	State AZ	Zip Code 85018-2931	Transaction ID : PR2402318250492 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) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCGRATH, STACY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5801 CHOWEN AVE S	1		06 30 / Y Y Y Y Y 2018						
City EDINA	State MN	Zip Code 55410-2759	Transaction ID : PR2402318550492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		51.36						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 222,56	P/R Deduction (\$17.12 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. BARRINGER, PAUL, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3709 WILLIAMS LANE			06 / Y Y Y Y Y 06 30 / 2018						
City CHEVY CHASE	State MD	Zip Code 20815-4951	Transaction ID : PR2402444350492 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) CInt Svc Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 599.95	P/R Deduction (\$46.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			766.71						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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 □						
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	.C)						
A.	Full Name of Individual (Last, First, Middle Initia CRANLEY, SHELLEY, , ,	ll) or Full O	rganization Name	Date of Receipt						
	Mailing Address 3801 MAURICE COURT			06 30 2018						
CityStateLAS VEGASNVFEC ID number of contributing federal political committee.C			Zip Code 89108-5245	Transaction ID : PR2402444450492 Amount of Each Receipt this Period						
				75.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For: Aggrega Primary General Other (specify) ▼			Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia BECKER, JAMES, , ,	l) or Full Oi	rganization Name	Date of Receipt						
	Mailing Address 378 FERNDALE ROAD WEST		06 / D D / Y Y Y Y Y 2018							
	City WAYZATA	State MN	Zip Code 55391-1559	Transaction ID : PR2402445150492						
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 576.90						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia COLEMAN, JAMES, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 4720 WEST 66TH STREET	1		06 / D D / Y Y Y Y Y 2018						
	City EDINA	State MN	Zip Code 55435-1506	Transaction ID : PR2402445250492 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) Grp SVP, Human Capital	Memo Item						
Receipt For: Aggregate Primary General Other (specify)			Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•••••	1228.80						
т	OTAL This Period (last page this line number or	וy)	••••••	· · · · · · · · · · · ·						

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ITEMIZED RECEIPTS			Use separate schedule(s)) (c	(check only one)						
			for each category of the Detailed Summary Page		X 11a		11b	11c	12		
	y information copied from such Reports and S for commercial purposes, other than using the					purp					
	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group	PAC)							
Α.	Full Name of Individual (Last, First, Middle Init HIGA, JOY, , ,	ial) or Full O	Organization Name		Date of Receipt						
	Mailing Address 2208 ELM AVENUE				06 30 / Y Y Y Y 2018						
	City MANHATTAN BEACH	State CA	Zip Code 90266-2809						4625049 s Period	2	
	FEC ID number of contributing federal political committee.	С		90.00							
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I		М	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00		P/R Deduction (\$30.00 Bi-Weekly)						
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ALEXANDER, CORY, , ,				Date of	f Red	ceipt				
	Mailing Address 4203 BRADLEY LANE					06 / D D / Y Y Y Y 2018					
	City CHEVY CHASE	State MD	Zip Code 20815-5234	-	Transaction ID : PR2405428850492 Amount of Each Receipt this Period				2		
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) United HealthCare Services Inc	Occi		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate		P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SAELENS, KAREN, , ,				Date of	f Red	ceipt				
	Mailing Address 105 N FLORENCE AVE City State Zip Code				06 / 00 / Y Y Y Y 06 / 30 / 2018						
		AZ	85340-4424		Transaction ID : PR2408544850492 Amount of Each Receipt this Period				2		
	FEC ID number of contributing federal political committee.	С				y	9	60.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir, I		М	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate		P/R Deduction (\$20.00 Bi-Weekly)							
⊢	UBTOTAL of Receipts This Page (optional)			··· •			y	9	726.9	90	

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

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
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)								
VinitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle I WEE, KATHLYN, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 2225 46TH ST NW			06 30 / Y Y Y Y Y					
City WASHINGTON	State DC	Zip Code 20007-1032	Transaction ID : PR2408545050492 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 State SIs OptumI	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I CORZINE, JEFFREY, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 9350 TRACEYTON DRIVE			06 / D D / Y Y Y Y Y 2018					
City	State OH	Zip Code	Transaction ID : PR2437119750492					
DUBLIN		43017-9689	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:	Aggregate	Year-to-Date V						
Other (specify) ▼		494.93	P/R Deduction (\$38.84 Bi-Weekly)					
Full Name of Individual (Last, First, Middle II	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 5110 N CALLE COLMADO			M M / D D / Y Y Y Y 06 30 2018					
City TUCSON	State AZ	Zip Code 85718-5002	Transaction ID : PR2437119850492 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) Seg Chief Med Off	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			1270.32					
TOTAL This Period (last page this line numbe	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	✗ 11a 11b 11c 12 13 14 15 16 1	17				
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributio	ons				
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle HAGAN, WILLIAM, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6536 E GREYTHORN DRI	VE		06 / Y Y Y Y Y 06 30 2018]				
City SCOTTSDALE	State AZ	Zip Code 85266-6761	Transaction ID : PR2437120050492 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 CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle WEISS, JACK, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6245 NORTH 75 STREET			06 / D D / Y Y Y Y Y 06 2018]				
City	State AZ	Zip Code	Transaction ID : PR2437120550492					
SCOTTSDALE	AZ	85250-4621	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		75.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ared Svs Regn CMO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		325.00	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle BALTHAZOR, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9013 FARNSWORTH AVE	1		06 / D D / Y Y Y Y 2018]				
City BROOKLYN PARK	State MN	Zip Code 55443-1754	Transaction ID : PR2437120750492 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:	Optum Services, Inc Bus Segment COC		Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			1228.80					
TOTAL This Period (last page this line numb	er only)			П				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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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 □				
			13 14 15 16 berson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Inco	prporated PAC (L	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, PRESTON, ROBERT, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 6594 HARBOR BE	ACH NE		M M / D D / Y Y Y Y 06 30 2018				
City PRIOR LAKE	State MN	Zip Code 55372-8201	Transaction ID : PR2437121450492 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		57.69				
Name of Employer (for Individual) Optum360 Services Inc	Occu VP (upation (for Individual) Ops	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)				
Full Name of Individual (Last, First, B. NESS, LAURA, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 10550 PINNACLE	WAY		06 30 / Y Y Y Y				
City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121550492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, C. COSGRIFF, JOHN, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1837 SUMMIT LAN			06 / D D / Y Y Y Y 2018				
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137	Transaction ID : PR2437121650492 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) Bus Dev	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (c	ptional)		1211.49				
TOTAL This Period (last page this lir	e number only)						

Use separate schedule(s)

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
or for commercial purposes, other than us			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Mid EDELSON, BRETT, , ,		organization Name	Date of Receipt					
Mailing Address 4600 DREXEL AVENU	1		06 / D / Y Y Y Y 2018					
City EDINA	State	Zip Code 55424-1132	Transaction ID : PR2437127150492					
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) Strategy	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R Deduction (\$200.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mid B. RAINEY, PETER, , ,	dle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 3115 WEST 47 STREE		Zip Code	06 30 / Y Y Y Y Y 2018					
City MINNEAPOLIS	State MN	Transaction ID : PR2437127550492 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) P Corp Controller	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mid C. LIPPERT, ROBIN, , ,	dle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 404 A ST SE			06 / D D / Y Y Y Y 2018					
City WASHINGTON	State DC	Zip Code 20003-3807	Transaction ID : PR2439928050492					
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) P External Affs	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	' nal)		1753.80					
TOTAL This Period (last page this line nu	umber 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		
	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	PAC (L	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia HEYMAN, STEPHEN, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 5300 SHERRILL AVENUE				06	/	D D 30	/ Y	y y 2018	Y	
	City CHEVY CHASE	State MD	Zip Code 20815-3720						2 6575049 is Period		
	FEC ID number of contributing federal political committee.	С					.	-	576.	90	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Govt Affs		Me	emo	Item				
Receipt For: Agg Primary General Other (specify) ▼			Year-to-Date ▼ 2499.90	P	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initia LANGER, DONALD, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 5110 OAK RAMBLING DRIVE				06	1	D D D 30	/ Y	2018	Y	
	City KATY	State Zip Code TX 77494-1971 C Occupation (for Individual) Hlth Plan CEO			Transaction ID : PR2445015450492 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.				588.45					_	
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2449.96	P	/R Dedu	ictic	on (\$196	6.15 Bi-W	/eekly)		
C.	Full Name of Individual (Last, First, Middle Initia ADLINGTONSHKABERIN, AMY, , ,		rganization Name		Date of	Re	ceipt				
	Mailing Address 3890 SUNSET DRIVE				06 ^M	/	^D 30	/ Y	ү 2018	Y	
	City SPRING PARK	State MN	Zip Code 55384-9634						01645049 is Period		
	FEC ID number of contributing federal political committee.						9	- y	576.	90	
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) Human Capital		Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)		•				,		1742.	25	
т	OTAL This Period (last page this line number on	ly)	•				,	-			

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

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ITEMIZED RECEIPTS for each c		Use separate schedule(s)	(check on	ly one	e)				
		for each category of the Detailed Summary Page	× 11a		11b	11c	12	,	
Any information copied from such Reports and				e purp					
or for commercial purposes, other than using th	ie name and a	duress of any political committee	e lo solicit co	ומוזווטנ	uions fr	om such	i committe	ee.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle In KRAJNOVICH, DANIEL, , ,	nitial) or Full C	rganization Name	Date o	of Rec	ceipt				
Mailing Address 9958 BUTTONDOWN LANE			06	И /	^D 30	/ Y	2018	Y	
City ZIONSVILLE	State IN	Zip Code 46077-8135					6735049 is Period	2	
FEC ID number of contributing federal political committee.	С				y		60.0	00	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		/lemo	Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Dec	ductio	n (\$20.(00 Bi-We	ekly)		
Full Name of Individual (Last, First, Middle II RENFRO, LARRY, , ,	nitial) or Full C	rganization Name	Date o	of Rec	ceipt				
Mailing Address 5 DOVE LANE		Zip Code	M 06	/	D D D 30	/ Y	y y 2018	Y	
City ANDOVER	State MA	Transaction ID : PR2460168150492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C				y- 1		576.9	90	
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) Vice Chairman UHG			Item				
Receipt For:	Aggregate	Year-to-Date ▼		1					
Primary General Other (specify) ▼		2499.90	P/R Dec	ductio	n (\$192	.30 Bi-W	eekly)		
Full Name of Individual (Last, First, Middle In ORBUCH, DAVID, , ,	nitial) or Full C	rganization Name	Date o	of Rec	ceipt				
Mailing Address 2220 CEDAR LAKE PKWY	01-1		06		30		2018		
City MINNEAPOLIS	State MN	Zip Code 55416-3644					16825049 is Period	2	
FEC ID number of contributing federal political committee.	C				y	, <u>,</u>	683. <i>*</i>	0	
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) um Exec		/lemo	Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2039.25	P/R De	ductio	on (\$227	7.70 Bi-W	/eekly)		
SUBTOTAL of Receipts This Page (optional)					,	. ,	1320.0	00	
TOTAL This Period (last page this line number	r only)								

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TEMIZED RECEIPTS	Use separate schedule(s)	(check only					
I EIVILED KEGEIFIS		for each category of the Detailed Summary Page	X 11a		11c	12	_
Any information copied from such Reports an				urpose of sol			
or for commercial purposes, other than using	ane name and a	uness of any political committee	, to solicit contr	IDULIONS TROM	1 SUCN	committe	
NAME OF COMMITTEE (In Full)	ated PAC (I	JnitedHealth Group PA	NC)				
Full Name of Individual (Last, First, Middle WEXLER, ERIC, , ,	Initial) or Full C	rganization Name	Date of F	Receipt			
Mailing Address 7220 WILLOW OAK DR			м м 06	/ D D 30	/ Y	y y 2018	Y
City WEST BLOOMFIELD	State MI	Zip Code 48324-3081		ction ID : PR of Each Rece			2
FEC ID number of contributing federal political committee.	С				-	576.9	0
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Men	no Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduc	tion (\$192.30) Bi-We	eekly)		
Full Name of Individual (Last, First, Middle B. GILL, PETER, , ,	nitial) or Full C	rganization Name	Date of F	Receipt			
Mailing Address 8673 SHERWOOD BLUFF			M M 06	/ D D 30	/ Y	y y 2018	Y
City EDEN PRAIRIE	State MN	Zip Code 55347-3433		tion ID : PR			2
FEC ID number of contributing federal political committee.	С					0.0	0
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Treas & Chief Invstmnt Off	Men	no Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduc	tion (\$0.00 B	i-Weeł	kly)	
Full Name of Individual (Last, First, Middle C. SCHICK, SUSAN, , ,	Initial) or Full C	rganization Name	Date of F	Receipt			
Mailing Address 1220 DENBIGH LANE			M M 06	/ D D 30		y y 2018	
City WAYNE	State PA	Zip Code 19087-4644		ction ID : PR			2
FEC ID number of contributing federal political committee.	C			y	<u>y</u>	576.9	0
Name of Employer (for Individual) United HealthCare Services Inc	Chie	upation (for Individual) If Growth Off	Men	no Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduc	ction (\$192.30) Bi-W	eekly)	
SUBTOTAL of Receipts This Page (optional)			,	,	1153.8	0
TOTAL This Period (last page this line numl	per only)				-		

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	Use separate schedule(s)							
ITEMIZED RECEIPTS		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 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 ABBOTT, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 12700 MUNDOMAR DR			M M / D D / Y Y Y Y 06 30 2018					
City AUSTIN	State TX	Zip Code 78739-1542	Transaction ID : PR2484541550492 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		375.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For: Primary General Other (specify) \checkmark	Aggregate	Year-to-Date ▼ 1278.84	P/R Deduction (\$125.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle BURNS, MATTHEW, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2724 BISON DRIVE			06 / D D / Y Y Y Y Y 2018					
City	State OK	Zip Code	Transaction ID : PR2484541750492					
EDMOND	UK	73034-3475	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) Comm	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle KNARR, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4806 HUTCHINS PLACE N	·		06 / D D / Y Y Y Y 2018					
City WASHINGTON	State DC	Zip Code 20007-1528	Transaction ID : PR2484542350492 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 COO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			1528.80					
TOTAL This Period (last page this line number	er only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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ITEMIZED RECEIPTS for each		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 colicit contributions from such committee
or for commercial purposes, other than using t	ine name and a	uuress or any political committe	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 TROPEANO , DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 606 BROOKSIDE AVE			06 30 / Y Y Y Y 2018
City WAYNE	State PA	Zip Code 19087-4826	Transaction ID : PR2484542850492 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		340.89
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 ▼ 1270.06	P/R Deduction (\$113.63 Bi-Weekly)
Full Name of Individual (Last, First, Middle MANDERFELD, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 3760 WEST CALHOUN PA			06 / Y Y Y Y 06 2018
City MINNEAPOLIS	State MN	Zip Code 55410-1118	Transaction ID : PR2486697950492 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) Capital Mkt Comm	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00	P/R Deduction (\$40.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle MCMAHON, DIRK, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 60 WILDHURST ROAD			06 / D D / Y Y Y Y 06 2018
City EXCELSIOR	State MN	Zip Code 55331-8461	Transaction ID : PR2491457050492 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 Pres & COO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			1037.79
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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		Detailed Summary Page	×	11a] 11k	› [11c	12				
A	ind from which Dentation is	Otatana			13		14		15	16	17		
or for commercial pu	urposes, other than using the		ay not be sold or used by any pendoress of any political committee										
UnitedHealt	. ,	ted PAC (I	JnitedHealth Group PA	NC)									
Full Name of Indi A. NATHAN, DOI	ividual (Last, First, Middle I NALD, , ,	nitial) or Full C	organization Name	D	ate of	Re	eceip	ot					
Mailing Address	275 GREENWICH STREET	#30			^M 06	/	D	30	/ Y	y y 2018	Y		
City NEW YORK		State NY	Zip Code 10007-2150							45735049 his Period	2		
FEC ID number of federal political co	0	С			_		-,			576.	90		
Name of Employe	. ,		upation (for Individual) P Chief Comm Off		Me	emo	lte	m					
Receipt For: Primary Other (spec	General cify) ▼	Year-to-Date ▼ 2499.90	P/I	R Dedu	uctic	on (\$192.	30 Bi-W	Veekly)				
B. SULLIVAN, H		nitial) or Full C	organization Name		ate of	Re	ceip	ot					
	21487 BLUE MARLIN DR			_ [м м 06	1	D	30	/ Y	ү ү 2018	Y		
City SPRINGFIELD		State LA	Zip Code 70462-8237		Transaction ID : PR2491457550492 Amount of Each Receipt this Period						2		
FEC ID number of federal political co	0	С	C					576.90					
Name of Employ United HealthCare			upation (for Individual) O E&I Regions		Memo Item								
Receipt For: Primary Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/F	R Dedu	uctic	on (S	\$192.	30 Bi-W	/eekly)			
Full Name of Indi	ividual (Last, First, Middle I MICHAEL, , ,	nitial) or Full C	organization Name	D	ate of	Re	eceip	ot					
	4313 MORNINGSIDE ROAI			_ [^M 06	1	D	30	/ Y	2018 Y	Y		
City EDINA		State MN	Zip Code 55416-5031	A						64135049 nis Period	2		
FEC ID number of federal political co	0	С		0.00									
Name of Employe		Occ VP (Memo Item										
Receipt For: Primary Other (spec	General cify)	Aggregate	Year-to-Date ▼ 4999.90	P/	R Dedi	uctio	on (\$0.00	Bi-We	ekly)			
SUBTOTAL of Rec	eipts This Page (optional)						,		,	1153.	30		
TOTAL This Period	I (last page this line numbe	r only)	•	Ī			- -		-				

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		Use separate schedule(s)	(check only one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12				
An	y information copied from such Reports and S	Statements ma	y not be sold or used by any p	13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
		e name and a	duress of any political committee					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)				
۹.	Full Name of Individual (Last, First, Middle In SMITH, KARA, , ,	itial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 610 CRESTWOOD DRIVE			M M / D D / Y Y Y Y 06 30 2018				
	City ALEXANDRIA	State VA	Zip Code 22302-2533	Transaction ID : PR2540175350492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
3.	Full Name of Individual (Last, First, Middle In PURDY, PATRICIA, , ,	itial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 7417 LYNNHURST STREET	01-1-	77. 0.44	06 / Y Y Y Y 2018				
	City CHEVY CHASE	State MD	Zip Code 20815-3101	Transaction ID : PR2541300650492				
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 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) ▼		Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
	Full Name of Individual (Last, First, Middle In TIERNEY, JOELLE, , ,	itial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 5710 TAYCHOPERA RD			M M / D D / Y Y Y Y 06 30 2018				
	City MADISON	State WI	Zip Code 53705-1020	Transaction ID : PR2541300750492 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	ed HealthCare Services Inc VP Go		Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
	JBTOTAL of Receipts This Page (optional)			1730.70				

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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 be 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. VERSAGGI, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 800 ALBANY AVENUE			06 30 2018					
City	State	Zip Code	Transaction ID : PR2541300850492					
ALEXANDRIA	VA	22302-3501	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		288.48					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
United HealthCare Services Inc	Dir	Govt Affs						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		1250.08	P/R Deduction (\$96.16 Bi-Weekly)					
Other (specify) v		1230.00	1					
Full Name of Individual (Last, First, Middle B. HOSTETLER, BRENDAN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2309 W WINNEMAC AVE			06 30 2018					
City	State	Zip Code	Transaction ID : PR2542541950492					
CHICAGO	IL	60625-1817	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		173.07					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /t Affs Dir	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	-					
Primary General	, iggi oguto		P/R Deduction (\$57.69 Bi-Weekly)					
Other (specify) v		749.97						
Full Name of Individual (Last, First, Middle C. RAMSAY, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 543 E LURAY AVE			06 30 2018					
City	State	Zip Code	Transaction ID : PR2542542250492					
ALEXANDRIA	VA	22301-1605	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		150.00					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
United HealthCare Services Inc	VP I	Regl Affs						
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (specify)		650.00	P/R Deduction (\$50.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			611.55					
TOTAL This Period (last page this line number								

SCHEDULE A (FEC Form 3X) DEAEIDTA

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			Use separate schedule(s)	(che	(check only one)									
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			ay not be sold or used by any pe Iddress of any political committee			ourp								
	. 0		doress of any political committee	10 50	licit con	undu	luons n	IOTT SUCT	1 commu	ee.				
	. ,	d PAC (l	JnitedHealth Group PA	C)										
Full Name of Indivi A. SPENCER, IPY	dual (Last, First, Middle Initia ANA, , ,	al) or Full O	organization Name	[Date of	Rec	ceipt							
Mailing Address 42	226 40TH STREET NORTH				м м 06	/	^D 30	/ Y	y y 2018	Y				
City ARLINGTON		State VA	Zip Code 22207-4610						5 4235049 is Period	2				
FEC ID number of federal political con	0	C					y	7	90.0	00				
Name of Employer United HealthCare	, ,		upation (for Individual) Mktg Bus Dev		Me	mo	ltem							
Receipt For: Primary Other (specify	General y) ▼	Aggregate	Year-to-Date ▼ 390.00	P/	/R Dedu	ictio	n (\$30.	00 Bi-We	eekly)					
Full Name of Indivi B. YAU, ANNE, ,	dual (Last, First, Middle Initia	al) or Full O	organization Name		Date of	Rec	ceipt							
	05 WOODLAND DRIVE				м м 06	/	30	/ Y	2018	Y				
City SILVER SPRING		State MD	Zip Code 20902-4047						8255049 is Period	2				
FEC ID number of federal political con	0	С			173.07									
Name of Employer United HealthCare S			upation (for Individual) External Affs	Memo Item										
Receipt For: Primary Other (specify	General y) ▼	Aggregate	Year-to-Date ▼ 749.97	P/R Deduction (\$57.69 Bi-Weekly)										
Full Name of Indivi	dual (Last, First, Middle Initia	al) or Full O	organization Name		Date of	Rec	ceipt							
Mailing Address 14	11 PELHAM ROAD				^M 06	/	30	/ Y	y y 2018	Y				
City PHILADELPHIA		State PA	Zip Code 19119-2661	-			-		31365049 is Period	2				
FEC ID number of federal political con	0	С					9		576.9	90				
Name of Employer United HealthCare	,		upation (for Individual) Plan CEO		Me	emo	ltem							
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2499.90					/R Dedu	uctio	ın (\$192	2.30 Bi-W	/eekly)					
SUBTOTAL of Recei	pts This Page (optional)		•				,	,	839.9	97				
TOTAL This Period (last page this line number o	nly)	•				,	-						

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 Incorpor	ated PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle ALTER, JEFFREY, , ,	e Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 3 WOODLAND ROAD			06 / D D / Y Y Y Y Y 2018											
City PORT JEFFERSON	State NY	Zip Code 11777-1053	Transaction ID : PR2552960250492 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 CEO	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle B. BRYANT, JEREMY, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 4534 MYSTIQUE WAY			06 / ^y y y y y 2018											
City ROSWELL	State GA	Zip Code 30075-2087	Transaction ID : PR2552961350492 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		105.00											
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 ▼ 455.00	P/R Deduction (\$35.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. FLANNERY, SCOTT, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 8508 TRELADY CT			06 / D D / Y Y Y Y 2018											
City PLANO	State TX	Zip Code 75024-6827	Transaction ID : PR2552962350492 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		744.00											
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 ▼ 1761.00	P/R Deduction (\$248.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional))		1425.90											
TOTAL This Period (last page this line num	per only)													

SCHEDULE A (FEC Form 3X) - DEAEIDTA

Use separate schedule(s)

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	<i>.</i>	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 rerson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Inco	rporated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, JAMES, GREGORY, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2323 KINGS POINT	DRIVE		06 / D D / Y Y Y Y 06 30 2018									
City LARGO	State FL	Zip Code 33774-1009	Transaction ID : PR2552963250492 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) 1ed Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 514.62	P/R Deduction (\$37.33 Bi-Weekly)									
Full Name of Individual (Last, First, B. KIDAMBI, NARASIMHAN,		rganization Name	Date of Receipt									
Mailing Address 18477 85TH AVE N	·		06 30 / Y Y Y Y 06 30 2018									
City MAPLE GROVE	State MN	Zip Code 55311-1663	Transaction ID : PR2552963850492 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 Bus Anlys	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, C. LOVELADY, JOHN, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5378 BUENA VIST	1		06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
City FRISCO	State TX	Zip Code 75034-2253	Transaction ID : PR2552964250492 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 CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (or	' otional)		748.89									
TOTAL This Period (last page this line	e number only)											

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Any or fo	MIZED RECEIPTS information copied from such Reports and Stor commercial purposes, other than using the		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □									
or f				13 14 15 16									
1				erson for the purpose of soliciting contributions									
	IAME OF COMMITTEE (In Full)		duress of any political committee	to solicit contributions from such committee.									
	JnitedHealth Group Incorporate	d PAC (L	JnitedHealth Group PA	.C)									
A	ull Name of Individual (Last, First, Middle Initi MATTSON, CARL, , ,	al) or Full O	rganization Name	Date of Receipt									
_	failing Address 539 ROUTE 9P			06 30 Y Y Y Y Y 06 30 2018									
	SARATOGA SPRINGS	State NY	Zip Code 12866-7279	Transaction ID : PR2552964850492 Amount of Each Receipt this Period									
	EC ID number of contributing ederal political committee.	С		138.45									
ι	lame of Employer (for Individual) Inited HealthCare Services Inc		ipation (for Individual) Clnt Svc Acct Mgt	Memo Item									
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 599.95	P/R Deduction (\$46.15 Bi-Weekly)									
Б. Б.	ull Name of Individual (Last, First, Middle Initi STREIT, BARRY, , ,	al) or Full Oi	rganization Name	Date of Receipt									
_	Aailing Address 5421 KELLOGG AVENUE			06 / D D / Y Y Y Y 2018									
		State MN	Zip Code	Transaction ID : PR2552966750492									
-			55424-1604	Amount of Each Receipt this Period									
	EC ID number of contributing ederal political committee.	C		230.76									
	Jame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) R Reg VP of SIs	Memo Item									
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 9999.96	P/R Deduction (\$76.92 Bi-Weekly)									
	ull Name of Individual (Last, First, Middle Initi NAASZ, SCOTT, , ,	al) or Full Oi	rganization Name	Date of Receipt									
Ν	Aailing Address 3311 WILDS RIDGE NW			06 30 / Y Y Y Y 2018									
	Dity PRIOR LAKE	State MN	Zip Code 55372-4540	Transaction ID : PR2553474750492 Amount of Each Receipt this Period									
	EC ID number of contributing ederal political committee.	С		115.38									
ι	lame of Employer (for Individual) Jnited HealthCare Services Inc		ipation (for Individual) Cust Svs	Memo Item									
ŀ	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)									
su	BTOTAL of Receipts This Page (optional)		•	484.59									

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 or for commercial purposes, other than us												
NAME OF COMMITTEE (In Full)												
> UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P/	NC)									
Full Name of Individual (Last, First, Mi A. PROSKAUER, DANIEL, , ,	ddle Initial) or Full O	rganization Name	Date of	Receipt								
Mailing Address 240 DERBY STREET			06	/ D D / 30	y y y 2018	Y						
City NEWTON	State MA	Zip Code 02465-1006		ction ID : PR255		2						
		02403-1000	Amount	of Each Receipt	this Period							
FEC ID number of contributing federal political committee.	C				57.6	39						
Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T	Mer	no Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Dedu	ction (\$19.23 Bi-\	Weekly)							
Full Name of Individual (Last, First, Mi B. RAYBURN, MONICA, , ,	ddle Initial) or Full O	rganization Name	Date of	Receipt								
Mailing Address 5127 JACKSON PONI	DS CT		06	2018	Y							
City	State	Zip Code		ction ID : PR255		2						
SUGAR LAND	ТХ	77479-4656	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) Gen Mgmt	Mer	no Item								
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		, 507.00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name of Individual (Last, First, Mi C. THOMAS, RICHARD, , ,	ddle Initial) or Full O	rganization Name	Date of	Receipt								
Mailing Address 5121 DUPONT AVEN	UE SOUTH		06	/ D D / 30	2018	Y						
City MINNEAPOLIS	State MN	Zip Code 55419-1151		ction ID : PR25		2						
FEC ID number of contributing federal political committee.	С			, , ,	291.0	00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Me	no Item								
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 1261.00	P/R Dedu	ction (\$97.00 Bi-'	Weekly)								
SUBTOTAL of Receipts This Page (optic	onal)				465.6	39						
TOTAL This Period (last page this line r	umber 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										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle A. VOJTA, DENEEN, , ,	Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 5201 KELLOGG AVENUE			06 30 Y Y Y Y Y 2018										
City EDINA	State MN	Zip Code 55424-1304	Transaction ID : PR2553475550492 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) P Bus Initiv Clin Aff	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. FLAGSTAD, KARSTEN, , ,	Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 1002 141ST LANE NE			06 / ^y y y y y 2018										
City HAM LAKE	State MN	Zip Code 55304-6770	Transaction ID : PR2554013050492 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) Info Tech	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle REIDY, GREGORY, , ,	Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 4836 W SUNSET BLVD			06 / D D / Y Y Y Y 2018										
City TAMPA	State FL	Zip Code 33629-6448	Transaction ID : PR2554013350492 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) Plan CEO	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			1269.18										
TOTAL This Period (last page this line number													

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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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 □									
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	A not be sold or used by any p ddress of any political committed	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. CLUTE, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 7756 N 85TH STREET			06 30 Y Y Y Y Y 06 30 2018									
City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064450492 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) I Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. GIANCURSIO, DONALD, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 72 MIDNIGHT RIDGE DR			06 / Y Y Y Y 06 30 2018									
City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064950492 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) I Plan CEO	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle DONES, JERI, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 2932 E MADISON VISTAS	1	7.0.4	M M / D D / Y Y Y Y 06 30 2018									
City PHOENIX	State AZ	Zip Code 85016-4981	Transaction ID : PR2560065150492 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) n CEO	Memo Item									
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 865.35	P/R Deduction (\$96.15 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			980.73									
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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				Detailed Summary Page	×	11a 13		11 14			11c	12	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the n					or the		pos	se of :			contribut	ions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
A.	Full Name of Individual (Last, First, Middle Initial KUNEMUND, GREGG, , ,	l) or Full O	rgar	nization Name	C	ate of	Re	cei	pt						
	Mailing Address 9040 RIVERBEND MANOR					^M 06	/	ſ	30	1	/ Y	y y 2018	Y		
	City ALPHARETTA	State GA		Zip Code 30022-1813								6535049 s Period	2		
	FEC ID number of contributing federal political committee.	С			683.10										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo) Ite	əm						
	Receipt For: Primary General Other (specify) ▼	r-to-Date ▼ 2039.25	P/	R Dedi	uctio	on ((\$227	7.70	0 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Initial LIPPMAN, SHELDON, , ,	l) or Full O	rgar	nization Name		ate of	Re	cei	pt						
	Mailing Address 55 CLIFFIELD ROAD	1-				^M 06	/		30]	/ Y	у у 2018	Y		
	City BEDFORD	State NY		Zip Code 10506-1210				-				6545049: s Period	2		
	FEC ID number of contributing federal political committee.	С			291.00										
	Name of Employer (for Individual) United HealthCare Services Inc		upat d Dir	ion (for Individual)	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$97.00 Bi-Weekly)												
C.	Full Name of Individual (Last, First, Middle Initial LUCHT, JEFFREY, , ,	l) or Full O	rgar	nization Name		ate of	Re	cei	pt						
	Mailing Address 33 FOUR SEASONS DRIVE			7: 0 1		06	1	L	30	J.	/ Y	2018 Y	_		
	City ALTON	State NH		Zip Code 03809-4872	A							6565049 s Period	2		
	FEC ID number of contributing federal political committee.	С						y			y	291.(00		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Underwriting		Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 1261.00	P/	R Ded	uctio	on	(\$97.(00	Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)			····· •	[,			9	1265.1	0		
т	OTAL This Period (last page this line number on	ly)		•				-		l	-y				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			Use separate schedule(s)	(cheo	(check only one)									
			for each category of the Detailed Summary Page	×	11a 13		1b	11c 15	12	17				
			y not be sold or used by any poddress of any political committee		or the p	ourpo	se of s	oliciting	contrib	outions				
	MITTEE (In Full) Ith Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)										
Full Name of Inc A. MILICH, DAV	dividual (Last, First, Middle Ini ID, , ,	tial) or Full O	rganization Name	D	ate of	Rece	eipt							
Mailing Address	2702 BIRCHMERE COURT			1 F	м м 06	/	D D D 30	/ Y	y y 2018	Y				
City KATY		State TX	Zip Code 77450-1303	Transaction ID : PR2560066050492 Amount of Each Receipt this Period										
FEC ID number federal political of	0	С			_	-9			683	3.10				
United HealthCa	ver (for Individual) re Services Inc		ipation (for Individual) Plan CEO		Me	emo I	tem							
Receipt For: Primary Other (spe	General ecify) ▼	Aggregate	Year-to-Date ▼ 2039.32	P/F	R Dedu	uction	ı (\$227.	70 Bi-W	'eekly)					
Full Name of Inc B. NOEL, TIMC	dividual (Last, First, Middle Ini DTHY, , ,	tial) or Full O	rganization Name	D	ate of	Rece	eipt							
	4316 FREMONT AVENUE SC				м м 06	/	D D D 30	/ Y	y y 2018	Y				
City		State MN	Zip Code 55409-1721						988504					
MINNEAPOLIS MN FEC ID number of contributing federal political committee. C					Amount of Each Receipt this Period									
Name of Employ United HealthCar	yer (for Individual) re Services Inc		upation (for Individual) P Prd		Me	emo I	tem							
Receipt For: Primary Other (spe	General ecify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/F	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Inc. CRONIN, J	dividual (Last, First, Middle Ini AMES, , ,	tial) or Full O	rganization Name	D	ate of	Rece	eipt							
	241 WALLACE RD				^M 06	1	D D D 30	/ Y	2018	Y				
City BEDFORD		State NH	Zip Code 03110-5144						3211504 is Perio					
FEC ID number federal political of	0	С			_			,	576	6.90				
United HealthCa	ver (for Individual) re Services Inc	Occu SVP	ipation (for Individual) Ops		Me	emo l	tem							
Receipt For: Primary Other (spe						uctior	n (\$192.	.30 Bi-W	′eekly)					
SUBTOTAL of Re	ceipts This Page (optional)		••••••					y	1836	3.90				
TOTAL This Perio	d (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									
or for commercial purposes, other than using			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 THOMPSON, CHARLES, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 5217 EDGEWOOD ROAD			06 / ^y y y y y 2018									
City LITTLE ROCK	State AR	Zip Code 72207-5413	Transaction ID : PR2561358950492 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) Regl Affs	Memo Item									
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle 3. LUND, BRIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 464 EAST NORTH AVE	Ototo	Zin Oode	06 / D D / Y Y Y Y 2018									
City GRANTSBURG	State WI	Zip Code 54840-7423	Transaction ID : PR2561457650492 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) Tax	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507,00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. CAVANAUGH, LARRY, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 520 NE 20TH ST # 1010	1		06 / D D / Y Y Y Y 2018									
City WILTON MANORS	State FL	Zip Code 33305-2162	Transaction ID : PR2563211050492 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 SIs Mgr Year-to-Date ▼	Memo Item									
Primary General Other (specify)	P/R Deduction (\$39.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional).			810.90									
TOTAL This Period (last page this line numb	er only)											

FOR LINE NUMBER:

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ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	information copied from such Reports and Stat or commercial purposes, other than using the na			rson for the purpose of soliciting contributions						
	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)						
A	ull Name of Individual (Last, First, Middle Initial MACKENZIE, ANDREW, , ,) or Full O	rganization Name	Date of Receipt						
_	lailing Address 1912 IRVING AVE S			06 30 2018						
	ity /INNEAPOLIS	State MN	Zip Code 55403-2823	Transaction ID : PR2564297150492						
_			55405-2625	Amount of Each Receipt this Period						
	EC ID number of contributing ederal political committee.	С		576.90						
N	ame of Employer (for Individual)	Осси	upation (for Individual)	Memo Item						
	Inited HealthCare Services Inc	Bus	Segment CMO							
F	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
	ull Name of Individual (Last, First, Middle Initial WILLSON, JOSH, , ,) or Full O	rganization Name	Date of Receipt						
N	lailing Address 201 ADAMS CT			06 30 / Y Y Y Y 06 30 2018						
	ity	State	Zip Code	Transaction ID : PR2564802550492						
_	COLLEYVILLE	ТХ	76034-6811	Amount of Each Receipt this Period						
	EC ID number of contributing ederal political committee.	С		115.38						
	lame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) P SLS SB and Spec Ben	Memo Item						
F	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
	ull Name of Individual (Last, First, Middle Initial CARLSON, CHRISTOPHER, , ,) or Full O	rganization Name	Date of Receipt						
_	lailing Address 10618 WEST RIVER ROAD	1		06 / D D / Y Y Y Y 06 2018						
	ity BROOKLYN PARK	State MN	Zip Code 55443-1233	Transaction ID : PR2564802650492 Amount of Each Receipt this Period						
	EC ID number of contributing ederal political committee.	С		576.90						
	lame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Cnsmr & Cust Experience	Memo Item						
F	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SU	BTOTAL of Receipts This Page (optional)		▶	1269.18						
то	TAL This Period (last page this line number on	ly)								

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	×			-	lb	_	11c		12	<u> </u>		
	y information copied from such Reports and S								se of	sol		cor				
	for commercial purposes, other than using the	name and a	addre	ess of any political committee	e to so	licit coi	ntrib	outi	ons f	rom	n such	COI	nmitte	e.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Uni	tedHealth Group PA	AC)											
۹.	Full Name of Individual (Last, First, Middle Ini HANSEN, PAUL, , ,	tial) or Full C	Drgar	nization Name	Date of Receipt											
	Mailing Address 18430 62ND PLACE NORTH				M M / D D / Y Y Y Y Y 06 30 2018											
	City MAPLE GROVE	State MN		Zip Code 55311-4585	Transaction ID : PR2564802750492 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		•	ion (for Individual) Controller		M	emo	o It	em							
	Receipt For: Primary General Other (specify) ▼	r-to-Date ▼ 1261.00		/R Ded	ucti	on	(\$97.	.00	Bi-We	ekly	')					
	Full Name of Individual (Last, First, Middle Ini KENNY, KATHERINE, , ,	tial) or Full C	Drgar	ization Name	Date of Receipt											
	Mailing Address 22408 FITZGERALD DRIVE		06 / ^y y y y y 2018													
	City LAYTONSVILLE	State MD		Zip Code 20882-2301		Trans								2		
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period											
	Name of Employer (for Individual) Jnited HealthCare Services Inc		•	ion (for Individual) of Acct Mgmt	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Ini MARDEN, PAUL, , ,	tial) or Full C	Drgar	nization Name		Date of	Re	ece	ipt							
	Mailing Address 718 HICKORY HILL RD	I				^M 06	1	l	D D 30		/ Y		18 [°]	Y		
	City FRANKLIN LAKES	State NJ		Zip Code 07417-1707							25648			2		
	FEC ID number of contributing federal political committee.	С				Amount	C OT	Ea	icn R	iece	eipt thi		eriod 576.9	0		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual)		M	emo	o It	em							
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2499.90							P/R Deduction (\$192.30 Bi-Weekly)									
						_	-	-	-	-	-	_		0		

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					
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma the name and a	l ay not be sold or used by any p ddress of any political committe	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 Incorpor	ated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. MOQUIST, DARREN, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5004 ARDEN AVE			06 30 2018					
City EDINA	State MN	Zip Code 55424-1314	Transaction ID : PR2564803450492					
		55424-1514	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
United HealthCare Services Inc	Bus	Segment CFO						
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify) V		7	1					
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name						
B. OHARE, TAMMY, , ,			Date of Receipt					
Mailing Address 2420 SAINT GEORGE W	AY	Zip Code	06 30 2018					
BROOKEVILLE	MD	20833-3265	Transaction ID : PR2564803950492					
FEC ID number of contributing	С		Amount of Each Receipt this Period					
federal political committee.	U							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	7					
Primary General Other (specify) ▼		507.00	P/R Deduction (\$39.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. WICKS, TIMOTHY, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2600 WEST LAFAYETTE	ROAD		M = M / D = D / Y = Y = Y = Y					
PO BOX 352 City	State	Zip Code	06 30 2018 Transaction ID : PR2565448650492					
WAYZATA	MN	55391-0352	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					
Optum Services, Inc		Group CFO						
Receipt For:	Aggregate	Year-to-Date V						
Primary General		2400.00	P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify)		2499.90	1					
SUBTOTAL of Receipts This Page (optional)		1270.80					
TOTAL This Period (last page this line num	ber 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 berson 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 CARTER, WILLIAM, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address PO BOX 920679			M M / D D / Y Y Y Y 06 30 2018						
City HOUSTON	State TX	Zip Code 77292-0679	Transaction ID : PR2565448750492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ZAMORE, DENISE, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 180 FELT ROAD			06 / D D / Y Y Y Y Y 2018						
City SOUTH WINDSOR	State CT	Zip Code 06074-3864	Transaction ID : PR2567129550492						
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) Assc Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. ARNONE, WENDY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5243 E DESERT PARK L	1		06 / D D / Y Y Y Y 06 30 / 2018						
City PARADISE VALLEY	State AZ	Zip Code 85253-3015	Transaction ID : PR2568900550492 Amount of Each Receipt this Period						
United HealthCare Services Inc F			576.90						
		upation (for Individual) n CEO	Memo Item						
		Year-to-Date ▼ 2307.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona)		807.66						
TOTAL This Period (last page this line num	ber 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)						
	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	ame and a	address of any political committee	to solicit contributions from such committee.						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia PARRILLO, CHRISTOPHER, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 9501 WEXCROFT DRIVE			06 30 / Y Y Y Y 2018						
	City BRENTWOOD	State TN	Zip Code 37027-3824	Transaction ID : PR2571778250492 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		cupation (for Individual) Ntwk Contrctng	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Initia MOYER, BRUCE, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 4242 BROADWAY STREET #802			06 / D D / Y Y Y Y 2018						
	City SAN ANTONIO	State TX	Zip Code 78209-6463	Transaction ID : PR2571778350492						
			78209-0403	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		cupation (for Individual) Gen Mgmt	Memo Item						
	Receipt For:	Aggregate	Year-to-Date V							
	Other (specify) ▼		, 507.00	P/R Deduction (\$39.00 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initia HINTON, DUSTIN, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address W132N6475 MARACH RD			06 / D D / Y Y Y Y 06 2018						
	City MENOMONEE FALLS	State WI	Zip Code 53051-6085	Transaction ID : PR2571978750492 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			supation (for Individual) Plan CEO	Memo Item						
Receipt For: Aggregate Primary General Other (specify)			Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•	809.28						
т	OTAL This Period (last page this line number on	ıly)	•							

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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		Detailed Summary Page	×	-		11b	>	11c	12	
Any information copied from such Reports and										
or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	۹C)							
Full Name of Individual (Last, First, Middle A. CARLSON, KEVIN, , ,	Initial) or Full O	rganization Name	[Date of	Re	;ceip	ot			
Mailing Address 4511 BROWNDALE AVEN	IUE			м м 06	_	· ·	зо 30	/ Y	үүү 2018	Y
City	State	Zip Code		Trans	acti	ion I	ID : P	R25725	59005049	2
EDINA	MN	55424-1142	/	Amount	of	Eac	h Re	ceipt th	is Period	
FEC ID number of contributing federal political committee.	С					-		-7	288.4	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Me	emo	o Itei	m			
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		1249.95] P,	/R Ded	uctio	on (\$96.1:	5 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle WIFFLER, THOMAS, , ,	Initial) or Full O	rganization Name		Date of	Re	ceip	ot			
Mailing Address 1421 SOMERFIELD DRIVE				м м 06	1	D	30	/ Y	2018	Y
	State	Zip Code							9275049	2
BOLINGBROOK	IL	60490-3207		_ Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C					-		-	576.9	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 ▼ 2499.90] P/	'R Dedu	uctic	on (\$	\$192.:	30 Bi-W	(eekly)	
Full Name of Individual (Last, First, Middle CGOETZ, MERRITT, David, ,	Initial) or Full O	rganization Name		Date of	Re	ceip	ot			
Mailing Address 505 CHURCH STREET APT 1704				м м 06			30		2018 Y	
City NASHVILLE	State TN	Zip Code 37219-3608							47735049	2
FEC ID number of contributing		01213-3000	- 4	Amount	ι of	Eac	n Re	ceipt th	is Period	
federal political committee.	С				_	y		9	576.9	90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt		M	emo	o Ite	m			
Receipt For:		Year-to-Date ▼	\neg							
Primary General Other (specify)		2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		•••••				,			1442.2	25
TOTAL This Period (last page this line numb	er only)	•••••			ĺ	-				

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 State for commercial purposes, other than using the nar								
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)					
Α.	Full Name of Individual (Last, First, Middle Initial) QUINN, PATRICK, , ,	or Full O	Organization Name	Date of Receipt					
	Mailing Address 15972 WETHERBURN RD			06 / D / Y Y Y Y 2018					
	CHESTEREIELD	State MO	Zip Code	Transaction ID : PR2573518750492					
	CHESTERFIELD	NIO	63017-7341	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		333.00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
	Receipt For:	gareaate	Year-to-Date ▼	1					
	Primary General Other (specify) ▼		1055.22	P/R Deduction (\$111.00 Bi-Weekly)					
B.	Full Name of Individual (Last, First, Middle Initial) GROZDANICH, PATTI, , ,	or Full O	Organization Name	Date of Receipt					
	Mailing Address 12540 ROBINSON ST APT 6201			06 / Y Y Y Y 06 30 2018					
	City	State	Zip Code	Transaction ID : PR2573518850492					
	OVERLAND PARK	KS	66213-1418	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) Ntwk Contrctng	Memo Item					
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial) BUCCHIANERI, STEVEN, , ,	or Full O	Organization Name	Date of Receipt					
	Mailing Address 118 GOVERNORS			06 / 0 / Y Y Y Y 06 30 2018					
	5	State	Zip Code	Transaction ID : PR2574977150492					
	MEDFORD	MA	02155-3018	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) Med Clin Ops	Memo Item					
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)					
	UBTOTAL of Receipts This Page (optional)			506.07					
T	OTAL This Period (last page this line number only)	····· ►						

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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				
An	y information copied from such Reports and S	tatements ma	y not be sold or used by any p	erson for the purpose of soliciting contributions				
	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 Incorporate	ed PAC (l	JnitedHealth Group P/	AC)				
A.	Full Name of Individual (Last, First, Middle Init RICHARD, DARYL, , ,	tial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 24 WEST RIDGE DRIVE			06 30 2018				
	City WEST HARTFORD	State CT	Zip Code 06117-2065	Transaction ID : PR2574979050492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)				
	Full Name of Individual (Last, First, Middle Init MASTERS, SCOTT, , ,	tial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1894 VILLAGE GLEN DRIVE			06 / D D / Y Y Y Y 2018				
	City	State	Zip Code	Transaction ID : PR2574979650492				
	SAINT JOHNS	FL	32259-9215	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		115.50				
	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 ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)				
	Full Name of Individual (Last, First, Middle Init SIMPSON, TRENT, , ,	tial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 3111 NORCREST AVE N	06 30 2018						
	City STILLWATER	State MN	Zip Code 55082-1779	Transaction ID : PR2574985050492 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		ipation (for Individual) Gen Mgmt	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)				
	JBTOTAL of Receipts This Page (optional)			346.26				

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	NC)
Full Name of Individual (Last, First, Middle CIANFROCCO, HEATHER, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 2799 WEST BARDONNEF	ROAD		06 / D D / Y Y Y Y 2018
City GIBSONIA	State PA	Zip Code 15044-8462	Transaction ID : PR2574986250492
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) Segment CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. KAPLANLEWIS, DEBRA, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 41 WILDWOOD DR			06 30 / Y Y Y Y Y 2018
City SOUTHBOROUGH	State MA	Zip Code 01772-1989	Transaction ID : PR2574986950492 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 Plan CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. BURNETT, JAMIE, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 4625 EWING AVENUE SC			06 / D D / Y Y Y Y 2018
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2574988250492 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) T	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional))		1270.80
TOTAL This Period (last page this line numb			

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
11	LIVILLED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c	12			
	y information copied from such Reports and Si							
or	for commercial purposes, other than using the	name and a	address of any political committee	to solicit contributions from such c	ommittee.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (UnitedHealth Group PA	C)				
Α.	Full Name of Individual (Last, First, Middle Init LANGJACOBSEN, HEATHER, , ,	ial) or Full C	Organization Name	Date of Receipt				
	Mailing Address 11382 MOUNT CURVE RD				2018			
	City EDEN PRAIRIE	State MN	Zip Code 55347-2918	Transaction ID : PR257499 Amount of Each Receipt this				
	FEC ID number of contributing federal political committee.	С			115.38			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Init ALLAZETTA, DAVID, , ,	ial) or Full C	Organization Name	Date of Receipt				
	Mailing Address 339 DARTMOUTH HILLS STR			06 / D D / Y Y Y Y Y 30 2018				
	City LAS VEGAS	State NV	Zip Code 89138-1544	Transaction ID : PR2574995				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this	288.45			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO	Memo Item				
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Week	ly)			
с.	Full Name of Individual (Last, First, Middle Init WILLIAMS, JOSEPH, , ,	ial) or Full C	Organization Name	Date of Receipt				
	Mailing Address 3221 FORSYTH DRIVE				2018			
	City GREENSBORO	State NC	Zip Code 27407-7221	Transaction ID : PR257500 Amount of Each Receipt this				
	FEC ID number of contributing federal political committee.	С			461.55			
	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 ▼ 1538.50	P/R Deduction (\$153.85 Bi-Wee	∍kly)			
s	UBTOTAL of Receipts This Page (optional)				865.38			
Г	OTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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	EMIZED RECEIPTS			r each category of the etailed Summary Page		× 11a		11b	11c	12		٦	
	y information copied from such Reports and Sta for commercial purposes, other than using the n											17 S	
$\overline{)}$	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	PAC (l	Jnit	edHealth Group PA	C)								
A.		l) or Full O	rgani	zation Name		Date of	Re	ceipt					
	Mailing Address 10730 PERRY DRIVE NORTH	1				^M 06	/	D D 30	/ Y	ү ү 2018	Y		
	City BROOKLYN PARK	State MN	4	Zip Code 55443-4700	_					0091504 nis Perio			
	FEC ID number of contributing federal political committee.	С								833	3.31		
	Name of Employer (for Individual) United HealthCare Services Inc		upatic Gen N	on (for Individual) Agmt		Me	emo	Item					
	Receipt For: Aggreg Primary General Other (specify) ▼			to-Date ▼ 1388.85		P/R Dedu	uctio	on (\$277	7.77 Bi-V	Veekly)			
в.	Full Name of Individual (Last, First, Middle Initia FRIDELL, CATHERINE, , ,	l) or Full O	rgani	zation Name		Date of	Re	ceipt					
	Mailing Address 11 E STONEWALL DRIVE	1				M M 06	/	D D 30	/ Y	2018	Y		
	City MIDDLETOWN	State DE	4	Zip Code 19709-3810	-			-		0275504 nis Perio	-		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) VP Clms						7			4.99		
	Name of Employer (for Individual) United HealthCare Services Inc					Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	ggregate Year-to-Date ▼ 501.62					on (\$38.:	33 Bi-We	eekly)			
с.	Full Name of Individual (Last, First, Middle Initia DUNCAN, MICHELE, , ,	l) or Full O	rgani	zation Name		Date of	Re	ceipt					
	Mailing Address 3038 FAIRWAY CIRCLE					06	/	D D 30	/ Y	2018 Y	Ŷ		
	City CHASKA	State MN		Zip Code 55318-3408	-					0296504 nis Perio			
	FEC ID number of contributing federal political committee.							J			6.90		
Name of Employer (for Individual) United HealthCare Services Inc Receipt For: Ag Primary General Other (specify) Image: Constraint of the service of the s		Occupation (for Individual) VP Compli Aggregate Year-to-Date ▼ 2499.90				Me	emo	Item					
						P/R Dedu	uctio	on (\$192	2.30 Bi-V	Veekly)			
s	UBTOTAL of Receipts This Page (optional)			•				, .		1525	5.20		
T	OTAL This Period (last page this line number on	ly)		•••••									

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 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 Incorpor	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle OBRIEN, JENNIFER, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 395 WOODLAWN AVE			06 30 Y Y Y Y 2018						
City SAINT PAUL	State MN	Zip Code 55105-1339	Transaction ID : PR2575034550492 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) ef Compli Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JONCZYK, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6336 URBANDALE LANE	NORTH		06 30 / Y Y Y Y Y 06 30						
City	State	Zip Code	Transaction ID : PR2575038750492						
MAPLE GROVE	MN	55311-1384	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) Treasury	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MADDOX, JEFFREY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5610 PURDUE AVE			M M / D D / Y Y Y Y 06 30 2018						
City DALLAS	State TX	Zip Code 75209-4431	Transaction ID : PR2575039550492 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) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		807.66						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

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	Use separate schedule(s)								
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 te 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. ALLENBURG, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6224 LOCH MOOR DR			06 30 2018						
City EDINA	State MN	Zip Code 55439-1618	Transaction ID : PR2575039850492						
	_	00400-1010	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		115.38						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
United HealthCare Services Inc Receipt For:		Mktg							
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify)		499.98							
Full Name of Individual (Last, First, Middle B. JORDAN, GARELL, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6104 S 64TH DRIVE			06 30 2018						
City	State	Zip Code	Transaction ID : PR2575050250492						
LAVEEN	AZ	85339-2917	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		288.45						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Other (specify)		1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. LINDSAY, VIVIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 14930 SW 39 ST			06 30 2018						
City	State	Zip Code	Transaction ID : PR2575054950492						
DAVIE	FL	33331-2767	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) 2 Ops	Memo Item						
Receipt For:	I	Year-to-Date ▼							
Primary General Other (specify)		2039.25	P/R Deduction (\$227.70 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1086.93						
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					
Any information copied from such Reports and or for commercial purposes, other than using	nd Statements ma the name and a	I ay not be sold or used by any p ddress of any political committe	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 CLACKO, MARY ANN, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6358 COTEAU TRAIL			M M / D D / Y Y Y Y 06 30 2018					
City EDEN PRAIRIE	State MN	Zip Code 55344-5205	Transaction ID : PR2575057950492 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					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. MCCARTY, CARY, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 8800 RUMFIELD RD			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Transaction ID : PR2575059450492 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) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. ALLEN, MARK, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 11359 ENTREVAUX DRI	1		06 / D D / Y Y Y Y 2018					
City EDEN PRAIRIE	State MN	Zip Code 55347-2862	Transaction ID : PR2575060250492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	l)		347.76					
TOTAL This Period (last page this line num	ber only)							

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	EMIZED RECEIPIS		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	JnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) MCEVOY, AMY, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 10551 GREENBRIER RD APT 13		Zin Oode	06 / Y Y Y Y 06 2018								
	City MINNETONKA	State MN	Zip Code 55305-3460	Transaction ID : PR2575062250492								
	FFC ID number of contributing	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initial) CURRIE, ULYSSES, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 3111 STILES WAY			06 30 / Y Y Y Y 2018								
	City WEST FRIENDSHIP	State MD	Zip Code 21794-9218	Transaction ID : PR2575064150492 Amount of Each Receipt this Period 90.00								
	FEC ID number of contributing federal political committee.	С										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 410.00	P/R Deduction (\$30.00 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initial) ZAETTA, CHRISTOPHER, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 5840 RIDGE ROAD			06 / D / Y Y Y Y Y 2018								
	City EXCELSIOR	State MN	Zip Code 55331-8153	Transaction ID : PR2575068350492 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 Gen Counsel	Memo Item								
	Receipt For: A Primary General Other (specify)	aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			726.90								
	OTAL This 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								
			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	AC)								
Full Name of Individual (Last, First, Middle A. VERCHICK, TAMI, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 9916 DUSTY WINDS AVE			06 30 2018								
City LAS VEGAS	State NV	Zip Code 89117-5986	Transaction ID : PR2575068950492 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) IT	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. ISMERT, JENNY, , ,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 8494 E HAWAII LN	04-4-	7. 0.1	06 / D D / Y Y Y Y Y 2018								
City DENVER	State CO	Zip Code 80231-2732	Transaction ID : PR2575070050492 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) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle CHRISTIAN, DENISE, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 5 WINGATE COURT			06 / Y Y Y Y Y 2018								
City FLOURTOWN	State PA	Zip Code 19031-1117	Transaction ID : PR2575071450492 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 Ops	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			842.28								
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							
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	NC)							
Full Name of Individual (Last, First, Middle I NICHOLS, SANDRA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 12706 YOUNG LANE			06 / D D / Y Y Y Y Y 2018							
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Transaction ID : PR2575074550492 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) 9 Natl Inptnt Care Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I SHELLEY, MATTHEW, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 13197 NW HELEN LANE			06 / Y Y Y Y Y 2018							
	State OR	Zip Code	Transaction ID : PR2575075250492							
		97229-7045	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) P Natl Clin Cvrge Review	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General Other (specify) ▼		249.99	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I CALAMIA, EDITH, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 22 ROYAL OAK DRIVE			06 / Y Y Y Y Y 2018							
City FAR HILLS	State NJ	Zip Code 07931-2569	Transaction ID : PR2575076650492 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) Ied Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1252.08	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1211.49							
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 t	Statements ma	I 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)										
VinitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle UPCHURCH, KAREN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5023 OAKMONT PLACE			06 30 2018							
City WESTERVILLE	State OH	Zip Code 43082-8781	Transaction ID : PR2575084450492 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) $ earrow$	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. ONEILL, AUDREY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 71 CHESTNUT RIDGE RD			06 / 0 / Y Y Y Y Y 06 2018							
City QUEENSBURY	State NY	Zip Code 12804-7317	Transaction ID : PR2575089450492							
FEC ID number of contributing	С		Amount of Each Receipt this Period							
federal political committee.										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 249.99	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle HEROLD, STACI, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 15008 GREEN OAKS TR S			06 / D D / Y Y Y Y Y 2018							
City PRIOR LAKE	State MN	Zip Code 55372-2159	Transaction ID : PR2575093050492 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) T	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			288.45							
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							
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I A. JACOBY, CHARLES, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 3315 IRVING AVE			M M / D D / Y Y Y Y 06 30 2018							
City MINNEAPOLIS	State MN	Zip Code 55408-3321	Transaction ID : PR2575099250492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		48.00							
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.00	P/R Deduction (\$16.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. CHAMPION, PHEBE, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 34 REYBURN DRIVE			06 / Y Y Y Y 06 30 / 2018							
City HENDERSON	State NV	Zip Code 89074-2760	Transaction ID : PR2575108350492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		75.00							
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Cust Service	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I CARTER, JOCELYN, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 601 SILVERSTONE DRIVE			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City MADISON	State MS	Zip Code 39110-7581	Transaction ID : PR2575141950492 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 ▼ 1826.85	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			699.90							
TOTAL This Period (last page this line number	er only)									

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Detailed Summary Page 11 a 11 b 11 c 12 11 a 11 b 11 c 12 11 a 11 b 11 c 12 11 c 12 11 c 11 c 11 c		-	Use separate schedule(s)	(check only one)							
Ary Information copied from such Reports and Statements may not be sold or used by any person for the purpose, other than using the name and address of any political committee to solid: contributions from such committee. NAME OF COMMITTEE (in Full) UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DEWALL PATRICK, Mailing Address 7662 RIDGEVIEW WAY City State City State <td< th=""><th>ITEMIZED RECEIPTS</th><th></th><th>for each category of the Detailed Summary Page</th><th></th></td<>	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page								
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Other (specify) 2499.90 SUBTOTAL of Receipts This Page (optional)		Aggregate	Year-to-Date ▼								
				P/R Deduction (\$192.30 Bi-Weekly)							
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SCHEDULE A (FEC Form 3X) - - - - -

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
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		unces of any political continue								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle COSTIN, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 580 MEADOW SWEET CIF	RCLE		06 / Y Y Y Y Y 2018							
City OSPREY	State FL	Zip Code 34229-8976	Transaction ID : PR2575180750492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		57.69							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle MCGUIRE, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 41 CUMBERLAND ROAD			06 / D D / Y Y Y Y Y 2018							
	State CT	Zip Code	Transaction ID : PR2575185450492							
WEST HARTFORD		06119-1121	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) Deputy Gen Counsel	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle DEMARIS, PETER, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2301 OLIVER AVE S	01-1-	7. 0.4	06 / Y Y Y Y 30 2018							
City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191850492 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 eComm	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$346.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			749.97							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) -

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$\overline{)}$	NAME OF COMMITTEE (In Full)											
/	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia GRANBERG, MITCHELL, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 6721 GALWAY DRIVE			06 30 2018								
City State EDINA MN			Zip Code 55439-1313						9615049 is Period			
	FEC ID number of contributing federal political committee.	С						-	683.	10		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) uty Gen Counsel		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 2039.25	P/R Deduction (\$227.70 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia CHAN, DERRICK, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 10 ASBURY			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City IRVINE	State CA	Zip Code 92602-1620	Transaction ID : PR2575200550492 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			500.00							
	Name of Employer (for Individual) Optum Services, Inc	Occu VP F		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 500.00	P/R Deduction (\$500.00 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 482 FAIROAK DRIVE	1 -		06 / Y Y Y Y 06 30 2018								
	City SEVERNA PARK	State MD	Zip Code 21146-3130						20315049 is Period			
FEC ID number of contributing federal political committee.					<u> </u>		y .	9	576.	90		
			Occupation (for Individual) Natl VP SIs & Bus Dev				tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, M FRANCIS, KEVIN, , ,	/liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 15815 MINNETONK	A BLVD		M M / D D / Y Y Y Y 06 30 2018								
City	State	Zip Code	Transaction ID : PR2575203350492								
MINNETONKA	MN	55345-1410	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) Chief Actuary	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		2307.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, M B. CARRIS, DONNA, , ,	/liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5 PARK PLACE UNIT # 130			06 / D D / Y Y Y Y 06 30 2018								
City	State	Zip Code	Transaction ID : PR2575212550492								
ANNAPOLIS	MD	21401-3392	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) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 517.10	P/R Deduction (\$37.14 Bi-Weekly)								
Full Name of Individual (Last, First, N C. STORDAHL, PAUL, , ,	/liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 7001 W 175TH AVE	NUE		06 30 2018								
City	State	Zip Code	Transaction ID : PR2575213050492								
EDEN PRAIRIE	MN	55346-2161	Amount of Each Receipt this Period								
			774.00								
		upation (for Individual) Actuary	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1646.28	P/R Deduction (\$258.00 Bi-Weekly)								
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NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I MEYERHOFER, JEFFREY, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6624 IROQUOIS TRAIL			06 / D D / Y Y Y Y 2018							
City EDINA	State MN	Zip Code 55439-1065	Transaction ID : PR2575214650492 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) Bundled Payment Svs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. DOUGLAS, CHRIS, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3209 GALLERIA UNIT 1507			06 / D D / Y Y Y Y 06 30 2018							
City EDINA	State MN	Zip Code 55435-2554	Transaction ID : PR2575220250492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		60.57							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		262.47	P/R Deduction (\$20.19 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. SHORS, MATTHEW, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4649 EWING AVENUE SOL			06 / D D / Y Y Y Y 2018							
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2575222350492 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) eputy Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			752.85							
TOTAL This Period (last page this line numbe	r only)									

FOR LINE NUMBER:

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IT!	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
111			for each category of the Detailed Summary Page	X 11a 11b 11c 12	7						
An	y information copied from such Reports and S	itatements ma	y not be sold or used by any political committee	13 14 15 16 berson for the purpose of soliciting contribution to solicit contributions from such committee.	17 IS						
	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)							
Α.	Full Name of Individual (Last, First, Middle Ini KRUTA, DARLENE, , ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 9243 GREEN BRIAR RD			06 30 / Y Y Y Y 2018							
	City BLOOMINGTON	State MN	Zip Code 55437-1939	Transaction ID : PR2575232550492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Ini KIRKPATRICK, SUSAN, , ,	Date of Receipt									
	Mailing Address 417 STERLING STREET			06 / D D / Y Y Y Y Y 2018							
	City	State	Zip Code	Transaction ID : PR2575233650492							
	LANCASTER	MA	01523-1847	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) 9 Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Ini CHOATE, THOMAS, , ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 8222 STONE MASON CT			06 / ¹ 2018							
	City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247850492 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) n CEO	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
	ł			346.14							

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115		1	Use separate schedule(s)			(check only one)							
	EMIZED RECEIPTS	for each category of the Detailed Summary Page			K 11a		11b	11c	12	Г	<i>─</i>		
	y information copied from such Reports and S for commercial purposes, other than using the									ibutio			
<u> </u>	NAME OF COMMITTEE (In Full)			e lo s		TUTIC	Julions	ITOITI Su		muee). 		
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle Initial) or Full (A. DARRAH, JACQUELINE, , ,			rganization Name		Date of	f Re	eceipt						
	Mailing Address 16942 HUBBARD TRAIL				06	1	D 30		2018	ү ү В]		
	City LAKEVILLE	State MN	Zip Code 55044-5846					PR257 Receipt					
	FEC ID number of contributing federal political committee.	C					-		1'	15.38			
	Name of Employer (for Individual)Occupation (for Individual)Optum Services, IncSr Assc Gen Counsel						tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	1	P/R Deduction (\$38.46 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BRANT, PAUL, , ,					f Re	eceipt						
	Mailing Address 17 ROCKY BROOK ROAD			06 / D D / Y Y Y Y Y 2018]			
		State CT	Zip Code 06897-1919					PR257					
-	WILTON			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						Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98					on (\$38	.46 Bi-W	/eekly)				
	Full Name of Individual (Last, First, Middle Ini KORF, GRETCHEN, , ,	itial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 2120 WESTON LANE N				06 / Y Y Y Y 06 30 2018								
	City PLYMOUTH	State MN	Zip Code 55447-2372		Transaction ID : PR2575252250492 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>		7	9	5	76.90			
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP External Affs				emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	1	P/R Ded	lucti	on (\$19	92.30 Bi-	Weekly))				
6	JBTOTAL of Receipts This Page (optional)			<u> </u>					80	07.66			

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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 11											
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 15 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 BACHMANN, ANITA, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 815 NORTHERN SHORES	S POINT		06 / D D / Y Y Y Y Y 2018											
City GREENSBORO	State NC	Zip Code 27455-3459	Transaction ID : PR2575258450492 Amount of Each Receipt this Period 200.01											
FEC ID number of contributing federal political committee.	C													
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 ▼ 1133.37	P/R Deduction (\$66.67 Bi-Weekly)											
Full Name of Individual (Last, First, Middle REICHEL, RANDI, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 331 TUSCANY ROAD	Chata	Zin Oode	06 / 0 / 2018 Transaction ID : PR2575259950492											
City BALTIMORE	State MD	Zip Code 21210-2934	Transaction ID : PR2575259950492 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) Regl Affs	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.78	P/R Deduction (\$52.63 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. BROOMFIELD, ROBERT, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 12501 WEST 156TH STR			06 / D D / Y Y Y Y Y 2018											
City OVERLAND PARK	State KS	Zip Code 66221-2662	Transaction ID : PR2575260450492 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 249.99	P/R Deduction (\$73.07 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			415.59											
TOTAL This Period (last page this line numb	per only)													

SCHEDULE A (FEC Form 3X) DEAEIDTA

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ITF			Use separate schedule(s)	(check only one)										
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any or 1	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma ame and a	A not be sold or used by any pe address of any political committee	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 Incorporated	I PAC (l	UnitedHealth Group PA	.C)										
	Full Name of Individual (Last, First, Middle Initia ZARN, MARY, , ,	l) or Full O	Organization Name	Date of Receipt										
	Mailing Address 11192 BLUESTEM LANE			M M / D D / Y Y Y Y 06 30 2018										
	City EDEN PRAIRIE	State MN	Zip Code 55347-4731	Transaction ID : PR2575269150492 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) ef of Staff	Memo Item										
	Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 512.50	P/R Deduction (\$37.50 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initia ESSLINGER, JOHN, , ,	l) or Full O	Organization Name	Date of Receipt										
	Mailing Address 4944 W 151ST TERRACE	1		06 / 00 / Y Y Y Y 06 2018										
	City LEAWOOD	State KS	Zip Code 66224-9744	Transaction ID : PR2575288950492 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) d Dir	Memo Item										
ļ	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initia HAMBLIN, JILLIAN, , ,	l) or Full O	Organization Name	Date of Receipt										
	Mailing Address 3103 BEACON GROVE ST			06 / D D / Y Y Y Y 2018										
	City SPRING	State TX	Zip Code 77389-4348	Transaction ID : PR2575290350492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
รเ	JBTOTAL of Receipts This Page (optional)			343.26										
тс	OTAL This Period (last page this line number on	ly)	·····											

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 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 A. BEAUREGARD, THOMAS, , ,	Initial) or Full C	Prganization Name	Date of Receipt										
Mailing Address 555 MILTON ROAD			06 30 2018										
City GOSHEN	State CT	Zip Code 06756-1613	Transaction ID : PR2575295150492										
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) P Innovation	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. HEWITT, SCOTT, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 1443 RAYMOND AVE			06 / D D / Y Y Y Y 2018										
City SAINT PAUL	State MN	Zip Code 55108-1430	Transaction ID : PR2575296750492 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		60.57										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms											
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		262.47	P/R Deduction (\$56.73 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. CUEVAS, BRANDON, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 8 CLOISTER COURT	1		06 / D D / Y Y Y Y Y 06 2018										
City LADERA RANCH	State CA	Zip Code 92694-1556	Transaction ID : PR2575305650492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			1214.37										
TOTAL This Period (last page this line numb	er only)												

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			Use separate schedule(s) for each category of the	(check only one)										
ITEMIZED I			× 11a		11b	11c	12	<u> </u>						
	copied from such Reports and Sta al purposes, other than using the r													
	DMMITTEE (In Full)													
	alth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)										
Full Name of A. HUNT, BRA	Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Addre	ss 6636 W SHORE DR			06 30 2018										
City		State	Zip Code	Transaction ID : PR2575310450492 Amount of Each Receipt this Period										
EDINA		MN	55435-1529											
FEC ID numb federal politic	er of contributing al committee.	С		576.90										
	loyer (for Individual) Care Services Inc		upation (for Individual) Segment CMO		Memo	tem								
Receipt For: Primary Other (s	General General	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
	Individual (Last, First, Middle Initia RG, JEFFREY, , ,	l) or Full O	rganization Name	Date	of Re	eceipt								
	ss 3410 BRADLEY LANE			06 / 0 / 2018 Transaction ID : PR2575326950492										
City CHEVY CHA	25	State MD	Zip Code 20815-3262						2					
			20013-3202	Amou	nt of	Each Re	eceipt th	is Period	_					
federal politic	er of contributing al committee.	С		117.00										
Name of Emp Optum Service	oloyer (for Individual) es, Inc		upation (for Individual) Business Development Exe	Memo Item										
Receipt For:	Opport	Aggregate	Year-to-Date ▼											
Other (s	General specify) ▼		507.00	P/R De	ductio	on (\$39.0	00 Bi-We	ekly)						
Full Name of C. PEEL, Cl	Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Addre	^{SS} 7185 GUNFLINT TRAIL			M 06		D D 30	/ Y	2018	Y					
City CHANHASSI	EN	State MN	Zip Code 55317-4743					32985049 is Period	2					
	er of contributing	С						120.0)0					
	loyer (for Individual) Care Services Inc	Occu VP F	upation (for Individual) Prd		Memo	o Item								
Receipt For: Primary Other (s		Aggregate	Year-to-Date ▼ 520.00	P/R De	∋ducti	on (\$40.0	00 Bi-We	eekly)						
SUBTOTAL of	Receipts This Page (optional)			Γ.				813.9	0					
TOTAL This Pe	riod (last page this line number or	ıly)	····· •	Γ.		-	-							

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177			(chec	(check only one)											
111	EMIZED RECEIPTS			11a 13		11b 14	11c 15		12 16	17					
	y information copied from such Reports and St for commercial purposes, other than using the			erson for	r the		pose of	soliciting	g con	tributio	ons				
\setminus	NAME OF COMMITTEE (In Full)														
$ \rangle$	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)											
A.	Full Name of Individual (Last, First, Middle Initi VANHAM, COLLEEN, , ,	al) or Full O	organization Name	Date of Receipt											
	Mailing Address 727 N EVERGREEN AVE				06 / D D / Y Y Y Y 06 30 2018										
	City ARLINGTON HEIGHTS	State IL	Zip Code 60004-5566				ion ID : Each Re				2				
	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) I Plan CEO		Me	emc	ttem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Initi TELESKY, MICHAEL, , ,	al) or Full O	organization Name	Da	ate of	Re	eceipt								
	Mailing Address 2602 PENNINGTON PLACE			Model / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y											
	City VALPARAISO	State IN	Zip Code 46383-9163		Transaction ID : PR2575350950492 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual) United HealthCare Services Inc	Occ KA	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507,00	P/R Deduction (\$39.00 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initi _DOLL, KATHLEEN, , ,	al) or Full O	organization Name	Da	ate of	Re	eceipt								
	Mailing Address 3184 MULLIGAN LANE			- L	06	/	D D 30	L	201	100 C					
	City CHASKA	State MN	Zip Code 55318-3226				ion ID : Each Re				2				
	FEC ID number of contributing federal political committee.	С			nount	. 01		eceipt ti	-	115.3	8				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Mgmt NMT		M	emo	tem								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/F	R Ded	ucti	on (\$38.	46 Bi-W	eekly))					
s	UBTOTAL of Receipts This Page (optional)						,	5	٤	809.28	8				
Т	OTAL This Period (last page this line number of	only)					-			- 40					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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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			erson for the purpose of soliciting contributions												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	NC)												
Full Name of Individual (Last, First, Middle Ini A. WINKLER, YASMINE, , ,	itial) or Full C	Organization Name	Date of Receipt												
Mailing Address 1429 WEST WIGWAM TRAIL	-														
City	State	Zip Code	Transaction ID : PR2575390950492												
MOUNT PROSPECT	IL	60056-2940	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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)												
Full Name of Individual (Last, First, Middle Ini B. FENLON, STEVEN, , ,	itial) or Full C	Organization Name	Date of Receipt												
Mailing Address 4925 DREW AVE S			06 / D D / Y Y Y Y 06 2018												
City MINNEAPOLIS	State MN	Zip Code 55410-1743	Transaction ID : PR2575392050492 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) buty Gen Counsel	Memo Item												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)												
Full Name of Individual (Last, First, Middle Ini c. BRATTEBO, CRAIG, , ,	itial) or Full C	Organization Name	Date of Receipt												
Mailing Address 10202 HARMONY CIRCLE			06 30 2018												
City	State	Zip Code	Transaction ID : PR2575397250492												
EDEN PRAIRIE	MN	55347-5019	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) uty Gen Counsel Mgr	Memo Item												
Receipt For:	· · ·	Year-to-Date V													
Primary General Other (specify)		1057.65	P/R Deduction (\$96.15 Bi-Weekly)												
SUBTOTAL of Receipts This Page (optional)			1153.80												
TOTAL This Period (last page this line number															

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 berson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	using the name and a	duress of any political committee											
UnitedHealth Group Inco	rporated PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, GOTHARD, CAROL, , ,	Middle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 16492 BROOKLAN	EBOULEVARD		06 / D D / Y Y Y Y 06 30 2018										
City NORTHVILLE	State MI	Zip Code 48168-8417	Transaction ID : PR2575419150492 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		114.54										
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 503.61	P/R Deduction (\$38.18 Bi-Weekly)										
Full Name of Individual (Last, First, MCGAVICK, KEVIN, , ,	Middle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 705 NOTTINGHAM	COURT		06 / 0 / Y Y Y Y 2018										
City CRANBERRY TOWNSHIP	State PA	Zip Code 16066-6527	Transaction ID : PR2575421950492 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) Bus Dvlp	Memo Item										
Receipt For:	Aggregate	Year-to-Date 🔻											
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, OHARA, KARIN, , ,	Middle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1431 HENRY COUR			06 / D D / Y Y Y Y 2018										
City CHANHASSEN	State MN	Zip Code 55317-2200	Transaction ID : PR2575428750492 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) Acctng	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (op	tional)		345.30										
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	\square	11b	11c	12	_						
Any information copied from such Reports and or for commercial purposes, other than using t														
NAME OF COMMITTEE (In Full)	ne name and a			JULIN	auonis Il	SIII SUCH								
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Middle CASTILLO, EFREM, , ,	Initial) or Full C	rganization Name	Date o	of Red	ceipt									
Mailing Address 307 JOLIET AVE			06	06 30 / Y Y Y Y 2018										
City SAN ANTONIO	State TX	Zip Code 78209-5243					41350492 is Period	2						
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) Seg Chief Med Off		/lemo	Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle MURLEY, MARY, , ,	Initial) or Full C	rganization Name	Date o	of Red	ceipt									
Mailing Address 2775 COUNTRYSIDE DRIV			06 / 0 / 2018 Transaction ID : PR2575443650492											
City ORONO	State MN	Zip Code 55356-9675					43650492 is Period	2						
FEC ID number of contributing federal political committee.	С		0.00											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary		/lemo	Item									
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼		4999.90	P/R Dec	ductio	n (\$0.00) Bi-Wee	kly)							
Full Name of Individual (Last, First, Middle AXBERG, PAMELA, , ,	Initial) or Full C	rganization Name	Date o	of Red	ceipt									
Mailing Address 1427 BROOKSHIRE COUR			06		^D 30		y y 2018							
City NEW BRIGHTON	State MN	Zip Code 55112-6390					4385049	2						
FEC ID number of contributing federal political committee.	С				y	y	13.0)2						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		/lemo	ltem									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 428.00	P/R De	ductio	on (\$4.34	4 Bi-Wee	ekly)							
SUBTOTAL of Receipts This Page (optional).					,	,	589.9	92						
TOTAL This Period (last page this line number	er only)													

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

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1		11b	11c	12	_						
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NAME OF COMMITTEE (In Full)		active of any political continuite	0 10 00101		150110115									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Middle SPILKER, TIMOTHY, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt									
Mailing Address 32 FITCH LANE				06 / D D / Y Y Y Y 06 30 2018										
City NEW CANAAN	State CT	Zip Code 06840-5051	Transaction ID : PR2575446350492 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		Mer	no Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R	Deduc	ction (\$19	92.30 Bi-W	/eekly)							
Full Name of Individual (Last, First, Middle B. HAUTMAN, MILLA, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt									
Mailing Address 410 SYCAMORE CIRCLE			06 / 30 / 2018 Transaction ID : PR2575447150492											
	State MN	Zip Code						2						
PLYMOUTH		55441-5667	Am	ount c	of Each I	Receipt th	iis Period							
FEC ID number of contributing federal political committee.	C		576.90 Memo Item											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off												
Receipt For:	Aggregate	Year-to-Date 🔻												
Other (specify) ▼		2499.90	P/R	Deduc	tion (\$19	92.30 Bi-W	/eekly)							
Full Name of Individual (Last, First, Middle BOOKER, ROBERT, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt									
Mailing Address 16632 HANSON BLVD NW				06	/ D 30)	2018 ^Y							
City ANDOVER	State MN	Zip Code 55304-2089				: PR2575 Receipt th		2						
FEC ID number of contributing federal political committee.	С				y	- y	576.9	90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Mer	no Item									
Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 1923.00				92.30 Bi-V	Veekly)							
SUBTOTAL of Receipts This Page (optional).					, .		1730.7	0						
TOTAL This Period (last page this line number	er only)					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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(check only one)

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	EWIZED 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 na																
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	AC)													
Α.	Full Name of Individual (Last, First, Middle Initial) GEHLBACH, THOMAS, , ,	or Full O	organization Name	[Date of	Re	eceip	t									
	Mailing Address 5380 YELLOWSTONE TRAIL	-			06 / D D / Y Y Y Y 2018												
	City MINNETRISTA	State MN	Zip Code 55331-9163	Transaction ID : PR2575448850492 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		Me	emo	o Iter	n									
	Receipt For: Ø Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1760.22	P/	/R Ded	uctio	on (\$	\$248.	50 Bi-W	Veekly)							
в.	Full Name of Individual (Last, First, Middle Initial)	or Full O	organization Name		Date of	Re	eceip	t									
	Mailing Address 910 MIDWEST TRAIL NORTH	1			м м 06	/		30	/ Y	2018	Y						
	City LAKE ELMO	State MN	Zip Code 55042-9658	Transaction ID : PR2575451650492 Amount of Each Receipt this Period 115.38 Memo Item P/R Deduction (\$38.46 Bi-Weekly)													
	FEC ID number of contributing federal political committee.	С															
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury														
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98														
C.	Full Name of Individual (Last, First, Middle Initial) MURPHY, ERIC, , ,	or Full O	organization Name		Date of	Re	eceip	t									
	Mailing Address 5201 BLAKE ROAD				^M 06	/		30 ^D	/ Y	2018	Y						
	City EDINA	State MN	Zip Code 55436-1127	A						45375049 nis Period	2						
	FEC ID number of contributing federal political committee.	С			_		,	_	y	576.	90						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		M	emo	b Iter	m									
	Receipt For: // Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P	/R Ded	uctio	on (\$	\$192.	30 Bi-V	Veekly)							
s	UBTOTAL of Receipts This Page (optional)						9		9	1437.	78						
Т	OTAL This Period (last page this line number onl	y)	•				-		-								

Use separate schedule(s)

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	-	Use separate schedule(s)	(checł	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	H	11		11c	12						
Any information copied from such Reports an			erson for			se of s								
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solic	t cont	ributio	ons tro	om such	Committ	ee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle A. FRANZ, PHILLIP, , ,	e Initial) or Full O	rganization Name	Da	ite of I	Recei	ipt								
Mailing Address 60 WALLACE ROAD			06 / D D / Y Y Y Y Y 08 2018											
City MIDDLETOWN	State NJ	Zip Code 07748-2932	Transaction ID : PR2575463150492 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) Plan CEO		Mer	mo Ite	em								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R	Deduc	ction	(\$0.00	Bi-Wee	ekly)						
Full Name of Individual (Last, First, Middle B. SADUSKE, NANETTE, , ,	e Initial) or Full O	rganization Name	Da	ite of I	Recei	ipt								
Mailing Address 4276 NICOLET DRIVE			06 / 30 / 2018 Transaction ID : PR2575470250492											
City GREEN BAY	State WI	Zip Code 54311-9798							2					
		34311-3730		iount d	orea	ICN Re	ceipt th	is Period	_					
FEC ID number of contributing federal political committee.	C		114.78											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item											
Receipt For:	Aggregate	Year-to-Date 🔻												
Primary General Other (specify) ▼		502.59	P/R	Deduc	ction ((\$38.2	6 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle C. STARMANN, LYNN, , ,	e Initial) or Full O	rganization Name	Da	ite of I	Recei	ipt								
Mailing Address 11701 WEMBLEY RD			IV	06	/	30	/ Y	2018	Y					
City LOS ALAMITOS	State CA	Zip Code 90720-4235						19455049 is Period	2					
FEC ID number of contributing federal political committee.	С				y			115.:	38					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops		Mer	mo Ite	em								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R	Dedu	ction	(\$38.4	ŀ6 Bi-We	eekly)						
SUBTOTAL of Receipts This Page (optiona	l)				y		,	230.2	6					
TOTAL This Period (last page this line num	ber only)				-11-									

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						
٨٣	v information conied from such Deports and Stat	omente ma	21/ 22	ot he sold or used by one of		13 or the		14		15 soliciti		16 optribut	17					
	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	NC)													
Á.	Full Name of Individual (Last, First, Middle Initial, HOWELL, NICHOLAS, , ,) or Full O	rgar	nization Name	[Date of	Re	ceip	pt									
	Mailing Address 300 ORANGE GROVE AVENUE	<u> </u>				м м 06	/		30	/		y y 2018	Y					
	City	State		Zip Code		Trans	acti	ion	ID : I	PR257	5510	005049	2					
	SOUTH PASADENA	CA		91030-1616	A	Amount	of	Ead	ch Re	eceipt	this	Period						
	FEC ID number of contributing federal political committee.	С			576.90													
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) visory Svc	Memo Item													
		Aggregate	Yea	r-to-Date ▼														
	Primary General Other (specify) ▼		-	2499.90	P/	/R Dedu	uctio	on ((\$192	.30 Bi	Wee	ekly)						
	Full Name of Individual (Last, First, Middle Initial JOSEPH, MOLLY, , ,) or Full O	Orgar	nization Name		Date of	Re	ceip	pt									
	Mailing Address 9209 GRAND SUMMIT BLVD				06 30 / Y Y Y Y Y 2018													
	City DRIPPING SPRINGS	State TX		Zip Code 78620-2882	Transaction ID : PR2575521750492 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 576.00 Memo Item													
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) gment CEO														
	Receipt For: Primary General Other (specify) ▼			r-to-Date ▼ 2496.00	P/R Deduction (\$192.00 Bi-Weekly)													
с.	Full Name of Individual (Last, First, Middle Initial DIRE, BERNADETTE, , ,) or Full O	Orgar	nization Name		Date of	Re	ceip	pt									
	Mailing Address 1 NORFOLK LANE					^M 06	/	L	30	J L	2	2018						
	City HOLLISTON	State MA		Zip Code 01746-2362								255049	2					
	FEC ID number of contributing	C	-			Amount	of	⊢ao	cn Re	eceipt	this	Period 115.3	38					
	federal political committee.						-	9			_							
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo) Ite	em									
	Boogint For:			r-to-Date ▼	_													
	Primary General Other (specify)	, iggi egale	, ed	499.98	P	/R Ded	uctio	on ((\$38.4	46 Bi-\	Veek	dy)						
s	UBTOTAL of Receipts This Page (optional)										_	1268.2	28					
т	OTAL This Period (last page this line number onl	ly)						,		,								

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 (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle I CROCKETT, DOUGLAS, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5938 DEER HOLLOW COU	IRT		M M / D D / Y Y Y Y 06 30 2018					
City PITTSBORO	State IN	Zip Code 46167-9583	Transaction ID : PR2575526050492 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		171.42					
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 ▼ 757.10	P/R Deduction (\$57.14 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I COHEN, SANFORD, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 28 CRESCENT LANE			06 / D D / Y Y Y Y 2018					
City LEVITTOWN	State NY	Zip Code 11756-2506	Transaction ID : PR2575526150492					
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) Seg Chief Med Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I C. HERNANDEZ, MAYRENE, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 850 SW 189TH AVENUE			06 / D D / Y Y Y Y Y 2018					
City PEMBROKE PINES	State FL	Zip Code 33029-6047	Transaction ID : PR2575529250492 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) Ied Dir	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			863.70					
TOTAL This Period (last page this line number	er only)							

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
116			for each category of the Detailed Summary Page		2 6 17				
An or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements mane and a	l nay not be sold or used by any address of any political committe	person for the purpose of soliciting cont	ributions				
	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group P	AC)					
Α.	Full Name of Individual (Last, First, Middle Init HOLOVNIA, KRISTEN, , ,	ial) or Full C	Organization Name	Date of Receipt					
	Mailing Address 4610 LAKEVIEW DRIVE			06 / Y Y 201	8 8				
	City EDINA	State MN	Zip Code 55424-1518	Transaction ID : PR257553305 Amount of Each Receipt this Pe					
	FEC ID number of contributing federal political committee.	С			683.10				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) puty Gen Counsel	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2039.25	P/R Deduction (\$227.70 Bi-Weekly	')				
	Full Name of Individual (Last, First, Middle Init HILL, JANE, , ,	ial) or Full C	Organization Name	Date of Receipt					
	Mailing Address 34301 299TH PLACE			06 / D D / Y Y 201	ү ү 8				
	City AITKIN	State MN	Zip Code 56431-5914	Transaction ID : PR257553315					
	FEC ID number of contributing federal political committee.	С	30431-3914	Amount of Each Receipt this Pe	riod 115.38				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) 2 Compli	Memo Item					
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Init BAHL, ALISA, , ,	ial) or Full C	Organization Name	Date of Receipt					
	Mailing Address 41 BIRCHWOOD DRIVE	Otata		06 / D D / Y Y Y Y 2018					
	City GREENWICH	State CT	Zip Code 06831-3311	Transaction ID : PR257553445 Amount of Each Receipt this Pe					
	FEC ID number of contributing federal political committee.	С			57.69				
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) P Sales	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)					
	JBTOTAL of Receipts This Page (optional)				356.17				

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						
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	.C)						
Full Name of Individual (Last, First, Middle Ini A. MULLANEY, SUSAN, , ,	itial) or Full C	organization Name	Date of Receipt						
Mailing Address 169 HUNNEWELL STREET			06 / D D / Y Y Y Y 2018						
City	State MA	Zip Code	Transaction ID : PR2575535150492						
FEC ID number of contributing		02494-1421	Amount of Each Receipt this Period						
federal political committee.	С		176.46						
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 ▼ 235.28	P/R Deduction (\$58.82 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ini B. HAMLIN, THOMAS, , ,	tial) or Full C	Organization Name	Date of Receipt						
Mailing Address 2800 NEWMAN			06 30 2018						
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536250492 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) Behvrl Med Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ini C. SUN, TONY, , ,	itial) or Full C	Organization Name	Date of Receipt						
Mailing Address 8408 ENSLEY PLACE			06 / D D / Y Y Y Y 06 30 2018						
City	State	Zip Code	Transaction ID : PR2575540250492						
LEAWOOD	KS	66206-1402	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) ⁄Ied Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			407.22						
TOTAL This Period (last page this line number									

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	X 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 1 erson for the purpose of soliciting contributions 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 STEINBRECHER, HOLLY, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2101 LILAC LANE			M M / D D / Y Y Y Y 06 30 2018					
City FRISCO	State TX	Zip Code 75034-3652	Transaction ID : PR2575544550492 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		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 ▼ 2039.25	P/R Deduction (\$227.70 Bi-Weekly)					
Full Name of Individual (Last, First, Middle 3. DAIKEN, LAURIE, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5002 ONEIDA ST	1		06 / D D / Y Y Y Y 06 30 2018					
City DULUTH	State MN	Zip Code 55804-1642	Transaction ID : PR2575549650492 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) Bus Anlys	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)					
Full Name of Individual (Last, First, Middle STAFFORD, JEFF, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9413 W 131ST STREET			06 / D D / Y Y Y Y 2018					
City OVERLAND PARK	State KS	Zip Code 66213-3079	Transaction ID : PR2575561250492 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		173.10					
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 ▼ 577.00	P/R Deduction (\$57.70 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			913.89					
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)					
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 (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle MOCK, CURTIS, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 23 KELTON STREET			06 / Y Y Y Y 06 30 2018					
City REHOBOTH	State MA	Zip Code 02769-2530	Transaction ID : PR2575579250492 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 ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. WINSOR, ELIZABETH, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 57 WILDERS PASS			06 / Y Y Y Y Y 2018					
City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582850492 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) O NA Acct	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. HARRIS, EUGENE, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 2832 HARBORSIDE WAY			06 / 0 / Y Y Y Y Y 06 30 / 2018					
City SOUTHPORT	State NC	Zip Code 28461-8373	Transaction ID : PR2575585450492 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 VP of Brkr SIs	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			980.73					
TOTAL This Period (last page this line numb	er only)	······						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and 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 Incorpora	ated PAC (I	JnitedHealth Group PA	NC)
Full Name of Individual (Last, First, Middle SOLLER, BRIAN, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 17210 62ND AVE NORTH			06 / D D / Y Y Y Y 2018
	State MN	Zip Code 55311-6406	Transaction ID : PR2575586750492
MAPLE GROVE		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	upation (for Individual) IT	Memo Item
Receipt For:	Aggregate	Year-to-Date V	7
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. GISCH, SHAWNA, , ,	Initial) or Full C	Prganization Name	Date of Receipt
Mailing Address 1735 HEMLOCK WAY			06 30 2018
City	State	Zip Code	Transaction ID : PR2575592150492
CHANHASSEN	MN	55317-4515	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		upation (for Individual) Med Clin Ops	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R Deduction (\$200.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MILLER, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 213 MAGILL DRIVE			06 / D D / Y Y Y Y 2018
City	State	Zip Code	Transaction ID : PR2575595650492
GRAFTON	MA	01519-1328	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		114.99
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Optum Services, Inc	VP	Business Development Exe	_
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		501.62	P/R Deduction (\$38.33 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			830.37
TOTAL This Period (last page this line numb	per 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					
Ar 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 p ddress of any political committe	erson for the purpose of soliciting contributions					
\setminus	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)					
Α.	Full Name of Individual (Last, First, Middle Init CHIMENTO, LISA, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 524 FORT WILLIAMS PKWY			M M / D D / Y Y Y Y Y 06 30 2018					
	City ALEXANDRIA	State VA	Zip Code 22304-1849	Transaction ID : PR2575596150492 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) ng Dir Optuml Cons	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Init IVERSON, LISA, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 13341 CARRACH AVENUE			06 / D D / Y Y Y Y Y 06 2018					
	City	State MN	Zip Code	Transaction ID : PR2575603250492					
	ROSEMOUNT FEC ID number of contributing federal political committee.	C	55068-4774	Amount of Each Receipt this Period 576.90					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
С.	Full Name of Individual (Last, First, Middle Init GOODMAN, BENJAMIN, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 13828 EVERGREEN COURT			06 / D D / Y Y Y Y Y 2018					
	City APPLE VALLEY	State MN	Zip Code 55124-9257	Transaction ID : PR2575603850492 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		1000.00					
	Name of Employer (for Individual) Optum360 Services Inc	Occu VP F	upation (for Individual) Fin	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	P/R Deduction (\$1000.00 Bi-Weekly)					
	UBTOTAL of Receipts This Page (optional)			2153.80					

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

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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	me name and a	duress of any political committee	e io solicit c	ontrik	JULIONS T	IOTTI SUCI	i committe	ee.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. MCNUTT, DIANE, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 11524 ZION ROAD			06		30	/ Y	ү ү 2018	Y	
City BLOOMINGTON	State MN	Zip Code 55437-3636					5 0455049 is Period	2	
FEC ID number of contributing federal political committee.	С				-		576.9	90	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Talent Officer		Memo	o Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R De	educti	ion (\$192	2.30 Bi-W	/eekly)		
Full Name of Individual (Last, First, Middle COSTA, JOEL, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 775 WESTCHESTER AVE			06		^D 30	/ Y	2018	Y	
City SHAKOPEE	State MN	Zip Code 55379-4557			-		05850492 is Period	2	
FEC ID number of contributing federal political committee.	C			346.14					
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin		Memo	o Item				
Receipt For:	Aggregate	Aggregate Year-to-Date ▼			1				
Other (specify) ▼		1499.94	P/R De	educti	on (\$115	5.38 Bi-W	/eekly)		
Full Name of Individual (Last, First, Middle KING, SARAH, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 116 CUTLER ROAD	State	Zin Code	06	6	30		2018		
City GREENWICH	CT	Zip Code 06831-2511					61285049 is Period	2	
FEC ID number of contributing federal political committee.	С				y	- y	576.9	90	
Optum Services, Inc MI		upation (for Individual) Sls SVP OptumI		Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R D	educti	ion (\$19:	2.30 Bi-W	/eekly)		
SUBTOTAL of Receipts This Page (optional)					, .	,	1499.9	94	
TOTAL This Period (last page this line numb	er only)					1. 10			

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
111			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	tatements ma name and a	I ay not be sold or used by any p Iddress of any political committed	erson for the purpose of soliciting contribut	ions				
	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)					
Α.	Full Name of Individual (Last, First, Middle Init STOCKHOWE, MARK, , ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 2108 MANOR DRIVE			06 / Y Y Y 06 30 2018	Y				
	City BURNSVILLE	State MN	Zip Code 55337-2036	Transaction ID : PR2575619950492 Amount of Each Receipt this Period	2				
	FEC ID number of contributing federal political committee.	С		115.3	38				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director, Advisory Svcs	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
В.	Full Name of Individual (Last, First, Middle Init WAULTERS, SCOTT, , ,	ial) or Full O	organization Name	Date of Receipt					
	Mailing Address 4 HEMLOCK COURT			06 / Y Y Y Y 2018	Y				
	City MANALABAN	State NJ	Zip Code	Transaction ID : PR2575622150492	2				
	MANALAPAN FEC ID number of contributing federal political committee.	C	07726-4254	Amount of Each Receipt this Period	90				
	Name of Employer (for Individual) United HealthCare Services Inc	Occ	upation (for Individual)	Memo Item					
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Init THOMPSON, BRIAN, , ,	ial) or Full O	Organization Name	Date of Receipt					
	Mailing Address 17829 63RD AVE N			06 / 0 / Y Y Y Y 2018					
	City MAPLE GROVE	State MN	Zip Code 55311-4650	Transaction ID : PR2575634650492 Amount of Each Receipt this Period	2				
	FEC ID number of contributing federal political committee.	С		576.9	90				
	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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
	JBTOTAL of Receipts This Page (optional)			1269.1	8				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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111			for each category of the Detailed Summary Page		K 11a 13	\square	11b 14	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		oose of	soliciting	contribu	tions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)						
Α.	Full Name of Individual (Last, First, Middle Initia WILSON, STEPHEN, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt			
	Mailing Address 2420 DURHAM MANOR DRIVE	I			м м 06	/	D D 30	/ Y	y y 2018	Y
	City FRANKLIN	State TN	Zip Code 37064-5266						3615049 is Period	2
	FEC ID number of contributing federal political committee.	С						-	242.	78
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 651.98	יןו	P/R Dedu	uctic	on (\$102	2.93 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Initia CLARK, TERRENCE, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt			
	Mailing Address 8 COOPER AVENUE	01-1-	7.0.0.1		M M 06	/	30	/ Y	2018	Y
	City EDINA	State MN	Zip Code 55436-1315						3695049 is Period	2
	FEC ID number of contributing federal political committee.	C					1		576.	90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90]	P/R Dedu	uctic	on (\$192	2.30 Bi-W	'eekly)	
с.	Full Name of Individual (Last, First, Middle Initia CABANILLAS, MARIA, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt			
	Mailing Address 2105 SHERIDAN				^M 06	1	D D 30	/ Y	ү ү 2018	Y
	City HOUSTON	State TX	Zip Code 77030-2107						53735049 is Period	2
	FEC ID number of contributing federal political committee.	С					y .	9	288.	45
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Hith Plan CEO			Me	əmo	Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12]	P/R Ded	uctio	on (\$96.	15 Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,	,	1108.	13
т	OTAL This Period (last page this line number or	nly)		•					4	

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					
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 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 DAVIS, BENTON, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9825 NORTH 53RD PLAC	E		06 / Y Y Y Y 2018					
City PARADISE VALLEY	State AZ	Zip Code 85253-1634	Transaction ID : PR2575639250492 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	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1983.49	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle NICOLL, DEREK , , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 155 MEADOWVIEW LANE			06 / D D / Y Y Y Y Y 2018					
City MEDINA	State MN	Zip Code 55340-4510	Transaction ID : PR2575648650492					
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	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.10	P/R Deduction (\$57.70 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. HERMAN, CRAIG, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9609 WYOMING CIRCLE	1		06 / D D / Y Y Y Y 2018					
City BLOOMINGTON	State MN	Zip Code 55438-1628	Transaction ID : PR2575650250492 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			1326.90					
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						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 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 MCFANN, ELENA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 18925 24TH AVENUE NOF	RTH		06 30 / Y Y Y Y 2018						
City PLYMOUTH	State MN	Zip Code 55447-2072	Transaction ID : PR2575654750492 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 CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. KANE, HEATHER , , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3621 N LAKEWOOD AVEN UNIT 3S			M M / D D / Y Y Y Y 06 30 2018						
City CHICAGO	State IL	Zip Code 60613-4842	Transaction ID : PR2575657450492 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) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. PIZZANO, KATHRYN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 387 DEPOT HILL ROAD			06 / D D / Y Y Y Y 2018						
City POUGHQUAG	State NY	Zip Code 12570-5763	Transaction ID : PR2575662150492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		260.04						
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 ▼ 400.44	P/R Deduction (\$123.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			894.63						
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	r information copied from such Reports and Stat or commercial purposes, other than using the na								e of s					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated													
	Full Name of Individual (Last, First, Middle Initial) ZIGLER, JANICE, , ,) or Full C	Drgar	nization Name		Date of Receipt								
-	Mailing Address 21 TREVINO CIRCLE	I				06 / D D / Y Y Y Y Y 2018								
	Dity ANGEL FIRE	State NM		Zip Code 87710	Transaction ID : PR2575665650492									
-	FEC ID number of contributing ederal political committee.	С			Amount of Each Receipt this Period 576.90									
	Name of Employer (for Individual) Jnited HealthCare Services Inc		•	ion (for Individual) res Ntwk Mgmt		•	Nemo	o Ite	em					
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial)) or Full C	Drgar	nization Name		Date	of Re	eceij	pt					
	Mailing Address 8675 AZURE SKY DRIVE					06 / D D / Y Y Y Y 2018								
	Dity LAS VEGAS	State NV		Zip Code 89129-2227							6935049 is Perioc			
	EC ID number of contributing ederal political committee.	С				117.00								
	Name of Employer (for Individual) Southwest Medical Assoc. Inc.		cupat Med	tion (for Individual) Dir		Memo Item								
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 507.00		P/R Deduction (\$39.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial) BOGATYRENKO, VICTORIA, , ,) or Full C	Drgar	nization Name		Date	of Re	eceij	pt					
	Mailing Address 15 STURGIS RD					^M 06			30	/ Y	2018	Y		
	City BRONXVILLE	State NY		Zip Code 10708-5002							754504 is Perioc			
	FEC ID number of contributing ederal political committee.	С						J			288	_		
	Name of Employer (for Individual) Jnited HealthCare Services Inc		cupat Mktg	ion (for Individual)		Memo Item								
I	Receipt For: Primary General Other (specify)	Yea	r-to-Date ▼ 576.90		P/R De	ducti	ion ((\$96.1	5 Bi-We	ekly)				
รเ	BTOTAL of Receipts This Page (optional)			•••••				7		, j	982.	35		
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		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 (JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. MITCHELL, JILL, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 11499 ASHLEY COURT			06 / D D / Y Y Y Y Y 2018								
City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251	Transaction ID : PR2575678350492 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) outy Gen Counsel Mgr	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. STIDMAN, CHRISTOPHER, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 6504 CHEROKEE TRAIL			06 30 / Y Y Y Y Y 2018								
City EDINA	State MN	Zip Code 55439-1109	Transaction ID : PR2575683850492 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) Clnt Relationship	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. OCHIPINTI, JOSEPH, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2751 MEETING PLACE			06 / D D / Y Y Y Y Y 2018								
City ORLANDO	State FL	Zip Code 32814-6136	Transaction ID : PR2575685750492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			1269.18								
TOTAL This Period (last page this line number	er only)										

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17			Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	≭ 11a □ 11b □ 11c □ 12							
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or	ITEMIZED RECEIPTS for each category of the Detailed Summary Page Image: The Detailed Summary Page Image: The Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name										
		I PAC (l	JnitedHealth Group PA	C)							
A.		l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 707 STONINGTON ROAD										
	-										
	5	С		115.38							
	United HealthCare Services Inc		I ()	Memo Item							
	Primary General	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)							
в.		l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 50 MAJOR DOANE RD										
	5	С		115.38							
			1 ()	Memo Item							
	Primary General	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)							
с.		l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 9746 SUNSET HILL DR										
	5	С		683.10							
	United HealthCare Services Inc			Memo Item							
	Primary General	Aggregate	2039.25	P/R Deduction (\$227.70 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			913.86							
т	OTAL This Period (last page this line number or	ly)	••••••								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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	EWIZED RECEIPTS		Detailed Summary Page	×	-		11	- H	11c	12	·				
	y information copied from such Reports and Stater for commercial purposes, other than using the nar							se of							
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I														
A.	Full Name of Individual (Last, First, Middle Initial) WILSON, D ELLEN, , ,	or Full O	Drganization Name	[Date of Receipt										
	Mailing Address 400 STUART STREET 25D	State	Zip Code		06 / 0 / Y Y Y Y 06 30 / 2018 Transaction ID : PR2575708850492										
	BOSTON	MA	02116-5011				-								
		C			Amount of Each Receipt this Period 576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Human Capital		N	1emo	o Ite	em							
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 2499.90	P	/R Deo	ducti	ion	(\$192	.30 Bi-V	Veekly)					
B.	Full Name of Individual (Last, First, Middle Initial) VOLLRATH, MICHELLE, , ,	or Full O	Organization Name		Date c	of Re	ecei	ipt							
	Mailing Address 7647 MARKER ROAD				^M 06	/		D D 30	/ Y	2018	Y				
	City SAN DIEGO	State CA	Zip Code 92130-5616							71985049 his Period					
	FEC ID number of contributing federal political committee.	C			Memo Item										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) VP Acct Mgmt												
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ , 761.02	P/	P/R Deduction (\$56.84 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initial) KNORR, MOLLY, , ,	or Full O	Organization Name		Date c	of Re	ecei	ipt							
	Mailing Address 1144 PROSPECT AVENUE	<u>.</u>			06		L	30	1 L	2018					
	City HARTFORD	State CT	Zip Code 06105-1124							73545049					
		C			hinour		⊏a			nis Period 115.	_				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Risk Adjustment		N	lemo	o It	em							
	Descript For:		Year-to-Date ▼ 499.98] P.	/R De	ducti	ion	(\$38.4	46 Bi-W	eekly)					
s	JBTOTAL of Receipts This Page (optional)						,			862.	80				
т	OTAL 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								
or for commercial purposes, other than usi			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 Incorpo	orated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Mide GROSKLAGS, JEFFREY, , ,	dle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 3233 TIMBERWOLF CI			06 / D D / Y Y Y Y Y 2018								
City PRIOR LAKE	State MN	Zip Code 55372-3272	Transaction ID : PR2575735750492								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
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 ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Mide B. KRAL, JESSICA, , ,	dle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 4358 COOLIDGE AVE			06 / D D / Y Y Y Y 2018								
City SAINT LOUIS PARK	State MN	Zip Code 55424-1020	Transaction ID : PR2575736150492 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 ▼ 1760.22	P/R Deduction (\$248.50 Bi-Weekly)								
Full Name of Individual (Last, First, Mide C. MURRAY, THOMAS, , ,	dle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 10 CIRCLE WEST			06 / D D / Y Y Y Y 2018								
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736550492								
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) Segment COO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)	••••••	1610.85								
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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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										
	NAME OF COMMITTEE (In Full)		duress of any political committee								
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initia CESARETTI, GINA, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 5020 CIRCLE DOWN			06 30 / Y Y Y Y Y 2018							
	City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739050492 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) outy Gen Counsel Mgr	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia PINERSKI, JENNIFER, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 3424 BRYANT AVE S #2 MINNEAPOLIS			06 / D D / Y Y Y Y Y 2018							
	City MINNEAPOLIS	State MN	Zip Code 55408-4110	Transaction ID : PR2575752850492							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 458.26	P/R Deduction (\$41.66 Bi-Weekly)							
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 3607 W 89TH ST			06 / 0 / Y Y Y Y Y 2018							
	City BLOOMINGTON	State MN	Zip Code 55431-1826	Transaction ID : PR2575755150492 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) T Proj Mgmt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			817.26							
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	★ 11a 11b 11c 12 13 14 15 16 1 ¹								
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 JOHNSON, KURT, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8351 E REDFIELD RD			06 / Y Y Y Y 2018								
City SCOTTSDALE	State AZ	Zip Code 85260-3535	Transaction ID : PR2575758350492 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.50								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Director Data Science	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. EKLO, BENJAMIN, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3942 CAMPELLO CURVE			06 / Y Y Y Y Y 2018								
City	State MN	Zip Code	Transaction ID : PR2575761850492								
CHASKA		55318-4639	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 VP	upation (for Individual) Fin	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle CUNNINGHAM, MICHAEL, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 50 SOUTH 16TH STREET UNIT 4706 City	State	Zip Code	06 / D D / Y Y Y Y 2018								
PHILADELPHIA	PA	19102-2534	Transaction ID : PR2575767850492 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) D NA Acct	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			1269.30								
TOTAL This Period (last page this line number	er only)										

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 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	AC)								
Full Name of Individual (Last, First, Midd MULLINS, CHRISTOPHER, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 15560 SMITHFIELD PLA			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City	State VA	Zip Code	Transaction ID : PR2575778750492								
CENTREVILLE	VA	20120-4901	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		57.69								
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) ▼		249.99	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. BERGDOLL, JENNIFER, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 523 LOS DOLCES ST			06 30 2018								
City	State	Zip Code	Transaction ID : PR2575793750492								
LAS VEGAS	NV	89138-4559	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) Human Capital Partner	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. JELINEK, TROY, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 16601 S MOUNTAIN ST	ONE TRAIL		06 30 2018								
City	State	Zip Code	Transaction ID : PR2575795650492								
PHOENIX	AZ	85048-2080	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		166.65								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
Optum Services, Inc	VP	CInt Svc Acct Mgmt									
Receipt For:	Aggregate	Year-to-Date V									
Other (specify)	277.75	P/R Deduction (\$55.55 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional	al)	•	339.72								
TOTAL This Period (last page this line num	nber only)	•									

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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 n										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Grou	up PAC	;)						
A.	Full Name of Individual (Last, First, Middle Initia MAURER, CARRIE, , ,	l) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 2899 EDGEWATER COVE				м м 06	/ D D 30	/ Y	ү 2018	Y		
	City WOODBURY	State MN	Zip Code 55125-8705			action ID : I of Each Re			2		
	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		Me	mo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.5	90	P/R Dedu	uction (\$192	.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initia WIX, LACOSTA, , ,	l) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 910 MANILA ST	-			06	/ D D 30	/ Y	2018	Ŷ		
	City NASHVILLE	State TN	Zip Code 37206-3437			action ID : F of Each Re			2		
	FEC ID number of contributing federal political committee.	С						112.5	50		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Regl Affs		Me	mo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	50	P/R Dedu	iction (\$37.5	50 Bi-We	ekly)			
C.	Full Name of Individual (Last, First, Middle Initia GALIAN, SANDRA, , ,	l) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 120 SEQUAMS LANE WEST				06 M	/ D D 30		2018			
	City WEST ISLIP	State NY	Zip Code 11795-4549			of Each Re			2		
	FEC ID number of contributing federal political committee.	С				,	, ,	166.5	50		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Me	emo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 277.		P/R Deduction (\$55.50 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			······ Þ		,	,	855.9	90		
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		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 (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle LEVINE, CAROL, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9100 LARKSPUR LANE			M M / D D / Y Y Y Y 06 30 2018								
City EDEN PRAIRIE	State MN	Zip Code 55347-2004	Transaction ID : PR2575803350492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. HJERPE, ADAM, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 13932 UTAH AVE S			06 30 / Y Y Y Y 2018								
City SAVAGE	State MN	Zip Code 55378-2159	Transaction ID : PR2575806250492 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) ef of Staff	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. RUSSELL, LAURIE, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3108 SONIA DRIVE			06 / D D / Y Y Y Y 06 30 / 2018								
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2575812150492 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) t Affs Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			1270.80								
TOTAL This Period (last page this line number	er only)										

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	y information copied from such Reports and State for commercial purposes, other than using the na					or the		rpo	se o		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) SHAPIRO, DAVID, , ,	or Full O	Orgai	nization Name	Date of Receipt									
	Mailing Address 5215 MORGAN AVENUE SOUTH				06 / 30 / 2018 Transaction ID : PR2575814250492									
		State MN		Zip Code										
	MINNEAPOLIS			55419-1026	_ /	Amou	nt of	E	ach	Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С						-			-9-	576.	90	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		ľ	Mem	o li	tem					
	Receipt For:	ggregate	Yea	ur-to-Date ▼										
	Primary General Other (specify) ▼		-	2499.90	P	/R De	duct	ion	ı (\$19	92.:	30 Bi-W	/eekly)		
	Full Name of Individual (Last, First, Middle Initial) MECKEY, SAMUEL JAMES, , ,	or Full O	Orgai	nization Name		Date	of Re	ece	eipt					
	Mailing Address 1828 WYNDAM DRIVE					[™] 06		/	D 30		/ Y	y y 2018	Y	
	City	State		Zip Code		Tran	sact	tior	n ID	: P	R25758	81455049	2	
	SHAKOPEE	MN		55379-5437	/	Amou	nt of	Ε	ach	Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С				Memo Item								
	Name of Employer (for Individual) Optum Services, Inc		upa P Op	tion (for Individual) os										
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 2307.60	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) SEXTON, ELLEN, , ,	or Full O	Orgai	nization Name		Date	of Re	ece	eipt					
	Mailing Address 14750 CRESTWOOD COURT					[™] 06		/	D 3(/ Y	y y 2018	Y	
	City	State		Zip Code		Trar	isac	tio	n ID	: P	R2575	82325049	92	
	ELM GROVE	WI		53122-1603	_ /	Amou	nt of	Ε	ach	Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С						y			y	576.	90	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		1	Mem	o l	tem					
	Receipt For:	ur-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
S	UBTOTAL of Receipts This Page (optional)			••••••				,			9	1538.	40	
т	OTAL This Period (last page this line number only	/)		•••••				,			-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	commercial purposes, other than using the													
\rightarrow U	ME OF COMMITTEE (In Full)				_ `									
	nitedHealth Group Incorporate	d PAC (l	JnitedHealth Gro	oup PA	C)									
	I Name of Individual (Last, First, Middle Init CNATT, RICHARD, , ,	ial) or Full O	rganization Name	Date of Receipt										
	iling Address 1120 KENSINGTON COURT				06 30 2018									
City	-	State GA	Zip Code			Tran	sacti	ion	ID : I	PR2575	82495049	2		
AL	PHARETTA	GA	30022-6274	_	-	Amour	nt of	Ea	ch Re	eceipt th	nis Period			
	C ID number of contributing eral political committee.	С						,		-	115.	38		
	me of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) SIs Ops			N	lemo	o Ite	m					
	ceipt For:		Year-to-Date ▼		-									
	Primary General	Aggregate			F	P/R Dec	ductio	on (\$38.4	46 Bi-W	ekly)			
	Other (specify) V		499	9.98				-	•		, , , , , , , , , , , , , , , , , , ,			
	I Name of Individual (Last, First, Middle Initi RADLEY, JOEL, , ,	ial) or Full O	rganization Name			Date o	of Re	ecei	ot					
	iling Address 300 WHITE MOSS PLACE					M N 06	/	ľ	30	/ Y	2018	Y		
City	у	State	Zip Code		1	Trans	sacti	ion	ID : F	PR2575	32585049	2		
FR	ANKLIN	TN	37064-8628					-			nis Period			
	C ID number of contributing leral political committee.	С			55.38									
	me of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) Ied Dir		Memo Item									
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 23	P/R Deduction (\$18.46 Bi-Weekly)										
	I Name of Individual (Last, First, Middle Initi AUFMAN, PHILIP, , ,	ial) or Full O	rganization Name			Date o	of Re	ecei	ot					
	iling Address 1680 NORTH FARM ROAD					06			30	/ Y	2018	Y		
City	у	State	Zip Code			Tran	sact	ion	ID :	PR2575	82985049)2		
OF	RONO	MN	55356-9309			Amour	nt of	Ea	ch Re	eceipt th	nis Period			
	C ID number of contributing eral political committee.	С						,		,	576	90		
Na	me of Employer (for Individual)	Occi	pation (for Individual)		-	N	lemo	o Ite	em					
	ited HealthCare Services Inc		Plan CEO											
Re	ceipt For:	I	Year-to-Date ▼		1									
	Primary General Other (specify)		F	P/R De	ducti	on	(\$192	2.30 Bi-V	Veekly)					
SUB.	TOTAL of Receipts This Page (optional)							,		,	747.	66		

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check or	nly or	ne)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	17	
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle HUNTLEY, MICHELLE, , ,	Initial) or Full C	rganization Name	Date of	of Re	ceipt				
Mailing Address 19503 HARMONY AVE			06	И /	30	/ Y	y 2018	Y	
City ROGERS	State MN	Zip Code 55374-4843					3 3205049 is Period	2	
FEC ID number of contributing federal political committee.	С				-		576.9	90	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) outy Gen Counsel	N	/lemo	Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R De	ductio	on (\$192	2.30 Bi-W	′eekly)		
Full Name of Individual (Last, First, Middle B. JERDE, MARY, , ,	Initial) or Full C	rganization Name	Date o	of Re	ceipt				
Mailing Address 304 EAST VERA LANE			06	/	D D 30	/ Y	2018	Y	
City	State AZ	Zip Code			-		37450492	2	
TEMPE	AZ	85284-4036	Amour	nt of	Each R	eceipt th	is Period		
FEC ID number of contributing federal political committee.	C						115.3	38	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Ν	/lemo	Item				
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BEESON, MARY JANE, , ,	Initial) or Full C	rganization Name	Date o	of Re	ceipt				
Mailing Address 204 BLUE INDIGO CT			06		D D D 30	L	2018		
City PONTE VEDRA BEACH	State FL	Zip Code 32082-6543			-		33955049 is Period	2	
FEC ID number of contributing federal political committee.	С				y 1	9	288.4	15	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		/lemc	ltem				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R De	ductio	on (\$96.	15 Bi-We	ekly)		
SUBTOTAL of Receipts This Page (optional).					,		980.7	'3	
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	NC)			
Full Name of Individual (Last, First, Middle I BOROCH, BLAIR, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 800 BELFRY DRIVE			06 / D D / Y Y Y Y 2018			
City BLUE BELL	State PA	Zip Code 19422-1210	Transaction ID : PR2575849950492			
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) Health Plan Operations	Memo Item			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 412.30	P/R Deduction (\$40.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle I GOLDEN, WILLIAM, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 106 SOUND COURT			06 / D D / Y Y Y Y Y 2018			
City NORTHPORT	State NY	Zip Code 11768-3527	Transaction ID : PR2575859350492 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) gn CEO	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3749.95	P/R Deduction (\$96.15 Bi-Weekly)			
Full Name of Individual (Last, First, Middle I c. COTTINGTON, NYLE BRENT, ,		organization Name	Date of Receipt			
Mailing Address 15050 47TH STREET NE			06 / D D / Y Y Y Y 2018			
City SAINT MICHAEL	State MN	Zip Code 55376-1613	Transaction ID : PR2575865350492 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	EC ID number of contributing					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 658.02	P/R Deduction (\$64.80 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			602.85			
TOTAL This Period (last page this line number	er only)		· · · · · · · · · · · · · · · · · · ·			

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					
۸	v information conied from such Departs and Otation	monto	, 0	13 14 15 16 17					
	y information copied from such Reports and Stater for commercial purposes, other than using the name								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (L	JnitedHealth Group PA	.C)					
Α.	Full Name of Individual (Last, First, Middle Initial) ROSS, CHRISTY, , ,	Date of Receipt							
	Mailing Address 211 JIM CANNON RD			06 / D D / Y Y Y Y 06 30 2018					
		State	Zip Code	Transaction ID : PR2575873350492					
	VAN ALSTYNE	ТХ	75495-2803	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		115.50					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
	Boogint For:		Year-to-Date ▼						
	Primary General Other (specify) ▼	231.00	P/R Deduction (\$38.50 Bi-Weekly)						
В.	Full Name of Individual (Last, First, Middle Initial) PEZHMAN, PAYMAN, , ,	or Full O	rganization Name	Date of Receipt					
	Mailing Address 3016 GROVELAND SCHOOL RO/	٩D		06 / D D / Y Y Y Y Y 06 30 2018					
	City	State	Zip Code	Transaction ID : PR2575883550492					
	WAYZATA	MN	55391-2816	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	0		576.90					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item					
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name	Date of Receipt					
	Mailing Address 405 MEADOW LANE			06 30 2018					
	5	State	Zip Code	Transaction ID : PR2575885050492					
	BENSON	MN	56215-1033	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	291.00							
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	upation (for Individual) T	Memo Item					
	Receipt For: Age Primary General Other (specify)	ggregate	P/R Deduction (\$97.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•••••	983.40					
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					
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 MARGHERIO, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 111 W 67TH STREET			06 30 Y Y Y Y Y 2018					
City KANSAS CITY	State MO	Zip Code 64113-2405	Transaction ID : PR2575916350492 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 ▼ 461.52	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. JENSENPFIEFFER, KIM, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 9449 ASPEN RD			06 / 06 / Y Y Y Y 06 2018					
City LAKEVILLE	State MN	Zip Code 55044-8148	Transaction ID : PR2575929750492					
FEC ID number of contributing	_	33044-0140	Amount of Each Receipt this Period					
federal political committee.	C		115.38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item					
Receipt For:	Aggregate	Year-to-Date V	7					
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle MEDEIROS, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 7112 LANGMUIR DRIVE			06 / D D / Y Y Y Y Y 2018					
City MCKINNEY	State TX	Zip Code 75071-4606	Transaction ID : PR2575930650492 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) Clnt Mgmt NA Accts	Memo Item					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 507.00			P/R Deduction (\$39.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			347.76					
TOTAL This Period (last page this line numb	per only)							

SCHEDULE A (FEC Form 3X) DEAEIDTA

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						
			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	Initial) or Full C	rganization Name							
A. ZITZER, CHRISTOPHER, , ,			Date of Receipt						
Mailing Address 2848 FRANCE AVE S			06 30 2018						
City	State	Zip Code	Transaction ID : PR2575933350492						
ST LOUIS PARK	MN	55416-4204	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	VP	Compli							
Receipt For:	Aggregate	Year-to-Date ▼	D/D Deduction (\$29.46 Bi Mooldy)						
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)						
		7							
Full Name of Individual (Last, First, Middle B. MATTERA, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 483 HIGHCROFT ROAD			06 30 2018						
City	State MN	Zip Code	Transaction ID : PR2575938450492						
	IVIIN	55391-1548	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:	Aggregate	Year-to-Date ▼	_						
Primary General Other (specify) ▼		, 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. RILEY, FELICITY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2315 BEVERLY ROAD									
			06 30 2018						
City SAINT PAUL	State MN	Zip Code 55104-5003	Transaction ID : PR2575943350492 Amount of Each Receipt this Period						
FEC ID number of contributing									
federal political committee.	C		326.07						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
United HealthCare Services Inc Receipt For:	VP -								
Primary General Other (specify)	Aggregate	P/R Deduction (\$108.69 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1018.35						
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)	(check only one)						
11			for each category of the Detailed Summary Page	X 11a 13	11b 11c	12	17			
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the p	ourpose of solicit	ing contribu	utions			
\setminus	NAME OF COMMITTEE (In Full)			•						
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)						
<u>/</u>	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name							
Α.	SALVO, GIANCARLO, , ,			Date of	Receipt					
	Mailing Address 1027 SW 149 LANE			M M 06	/ D D / 30	Y Y Y 2018	Y			
	City	State FL	Zip Code	Transa	ction ID : PR25	759649504	92			
	SUNRISE		33326-1957	Amount	of Each Receipt	this Period	t			
	FEC ID number of contributing federal political committee.	С				115	.38			
	Name of Employer (for Individual)	Occi	upation (for Individual)	Mei	mo Item					
	United HealthCare Services Inc	M&F	R Reg Sls Dir							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General		499.98	P/R Dedu	ction (\$38.46 Bi-	Weekly)				
	Other (specify) v		499.90		1					
	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name							
В.	RICHARDS, ALISON, , ,			Date of	Receipt					
	Mailing Address 257 WEST GRANTLEY			M M M	/ D D / 30	y y y 2018	Y			
	City	State	Zip Code		ction ID : PR25		-			
	ELMHURST	IL	60126-2237	Amount	of Each Receipt	this Period	t			
	FEC ID number of contributing federal political committee.	С				576	.90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P NA Strat Initiv	Mei	mo Item					
	Receipt For:	Aggregate	Year-to-Date ▼		P/R Deduction (\$192.30 Bi-Weekly)					
	Primary General			P/R Dedu						
	Other (specify) v	L	, 2499.90							
C.	Full Name of Individual (Last, First, Middle Init SCHULTZ, STACY, , ,	tial) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 4012 S XERXES AVENUE			M M 06	/ D D / 30	2018	Y			
	City	State	Zip Code	Transa	action ID : PR25	759909504	92			
	MINNEAPOLIS	MN	55410-1146	Amount	of Each Receipt	this Period	k			
	FEC ID number of contributing federal political committee.	С			y	115	.38			
	Name of Employer (for Individual)	Occi	upation (for Individual)	Me	mo Item					
	Optum Services, Inc	Dep	uty Gen Counsel Mgr							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General		499.98	P/R Dedu	ction (\$38.46 Bi-	Weekly)				
	Other (specify)									
⊢	UBTOTAL of Receipts This Page (optional)					807	.66			
Т	OTAL This Period (last page this line number	only)		· L						

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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						
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 BRIGGS, MARC, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 13534 TUSCALEE HILL CI	R		06 / D D / Y Y Y Y 06 30 2018						
City DRAPER	State UT	Zip Code 84020-5653	Transaction ID : PR2576001650492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		609.00						
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 ▼ 2353.34	P/R Deduction (\$203.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SANN, DAVID, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8326 ELKO DRIVE			06 30 / Y Y Y Y 2018						
City	State	Zip Code	Transaction ID : PR2576026450492						
ELLICOTT CITY	MD	21043-6913	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		126.93						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻	P/R Deduction (\$42.31 Bi-Weekly)						
Primary General Other (specify) ▼		550.03							
Full Name of Individual (Last, First, Middle ADAMS, GAYLE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 39 CANYON RIDGE DRIVI			06 / D D / Y Y Y Y 2018						
City SANDIA PARK	State NM	Zip Code 87047-8509	Transaction ID : PR2576040350492 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) Strategic Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1024.38						
TOTAL This Period (last page this line number	er only)								

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	EMIZED RECEIPTS			each category of the ailed Summary Page	×			11	- H	11c	12	
	y information copied from such Reports and Stater for commercial purposes, other than using the nar								se of			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I							Juli				
Α.	Full Name of Individual (Last, First, Middle Initial) BYRNES, CHRISTOPHER, , ,	or Full O	rganiza	ation Name		Date	of R	ece	ipt			
	Mailing Address 3920 GLENWOOD STREET					^M 06		L	30	/ Y	2018	
	City DULUTH	State MN		ip Code 55804-1403							04285049	
		C				Amou	int of	r Ea	ich Re	eceipt tr	iis Perioc 683	_
	Name of Employer (for Individual) United HealthCare Services Inc		upation Ops	n (for Individual)			Mem	o It	em			
	Receipt For: A Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2039.25						P/R Deduction (\$227.70 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initial) KANDALAFT, KEVIN, , ,	or Full O	rganiza	ation Name		Date	of R	ece	ipt			
	Mailing Address 4189 WINDSOR POINT PLACE				06 / D D / Y Y Y Y Y 2018							
	City EL DORADO HILLS	State CA		ip Code 95762-3797							04365049 iis Perioc	
	FEC ID number of contributing federal political committee.	C				-			288	45		
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Hlth			Mem	o It	em					
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to	o-Date ▼ 846.12	P	/R De	ducti	ion	(\$96.1	I5 Bi-We	eekly)	
с.	Full Name of Individual (Last, First, Middle Initial) MONICAL, KENT, , ,	or Full O	rganiza	ation Name		Date	of R	ece	ipt			
	Mailing Address 9795 E PIEDRA DRIVE					06	M	/	30	/ Y	2018	Ŷ
	City SCOTTSDALE	State AZ		ip Code 35255-9231							05135049 iis Perioc	
	FEC ID number of contributing federal political committee.	C				<u> </u>		y		9	576	90
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) SVP Prd						io It	em			
	Receipt For: A Primary General Other (specify)	ggregate	Year-to	o-Date ▼ 2499.90	F	9/R De	educt	tion	(\$192	2.30 Bi-V	Veekly)	
s	UBTOTAL of Receipts This Page (optional)			•••••				,			1548.	45
т	OTAL This Period (last page this line number only)						-				

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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 th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle Ir A. REX, JOHN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 503 HARRINGTON ROAD			06 30 2018						
City	State	Zip Code	Transaction ID : PR2576060050492						
WAYZATA	MN	55391-1512	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) G CFO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
			1						
Full Name of Individual (Last, First, Middle Ir B. MCEWAN, JOSHUA, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 4711 WEST 28TH STREET			M M / D D / Y Y Y Y 06 30 2018						
City	State	Zip Code	Transaction ID : PR2576085750492						
SAINT LOUIS PARK	MN	55416-1927	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) Tax	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		, 2439.96	P/R Deduction (\$196.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir C. DUDA, MICHAEL, , ,	hitial) or Full C	organization Name	Date of Receipt						
Mailing Address 5208 RICHWOOD DRIVE			06 30 2018						
City	State	Zip Code	Transaction ID : PR2576089950492						
EDINA	MN	55436-2322	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		288.45						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
United HealthCare Services Inc Receipt For:	VP I		-						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1456.11						
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						
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	4C)						
Full Name of Individual (Last, First, Middle JOHNSON, DARRIN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 11 BERTON COURT			06 30 / Y Y Y Y Y 06 30 2018						
City MIDDLETOWN	State DE	Zip Code 19709-9932	Transaction ID : PR2576103750492 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) Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle DIAMOND, TIFFANY , , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5 HARVEY DRIVE			06 / D D / Y Y Y Y Y 2018						
City GOFFSTOWN	State NH	Zip Code 03045-2315	Transaction ID : PR2576105550492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BOADO, ANDREA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 14924 PONDVIEW CIRCLE			06 / D D / Y Y Y Y Y 2018						
City WAYZATA	State MN	Zip Code 55391-2249	Transaction ID : PR2576144650492 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) Deputy Gen Counsel	Memo Item						
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Total			P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1269.18						
TOTAL This Period (last page this line number	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			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorpora	ated PAC (I	United Health Group P/	4C)				
Full Name of Individual (Last, First, Middle A. NELSON, STEVEN, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 640 LOCUST HILLS DRIVE	=		06 30 2018				
City WAYZATA	State MN	Zip Code 55391-1973	Transaction ID : PR2576144850492 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 UHC CEO	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. FRIDNER, JOHN, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 782 PENFIELD DR			06 / D D / Y Y Y Y Y 2018				
City CAROL STREAM	State IL	Zip Code 60188-4738	Transaction ID : PR2576147550492 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) NA VP SIs/Gen	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)				
Other (specify) ▼		507.00					
Full Name of Individual (Last, First, Middle KEPNER, SHELLY, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 10165-222ND STREET EA	1		06 / Y Y Y Y Y 2018				
	State MN	Zip Code 55044-9752	Transaction ID : PR2576147850492 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.			37.53				
Name of Employer (for Individual) United HealthCare Services Inc	HealthCare Services Inc Dir Found/Social Re		Memo Item				
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 202.26			P/R Deduction (\$12.51 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			731.43				
TOTAL This Period (last page this line numb	er only)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorport	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle MYHRAN, LYNN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2280 FOX STREET			06 30 / Y Y Y Y 06 30 2018						
City ORONO	State MN	Zip Code 55356-9652	Transaction ID : PR2576158450492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. PAUNOVICH, VUKASIN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1209 KEITH RD			06 30 2018						
City	State	Zip Code	Transaction ID : PR2576306750492						
WAKE FOREST	NC	27587-7301	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. BENSON, JEAN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 14951 HIGHLAND COUR			06 / D D / Y Y Y Y Y 2018						
City PRIOR LAKE	State MN	Zip Code 55372-4109	Transaction ID : PR2576310950492 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	Occi VP F	upation (for Individual) Fin	Memo Item						
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2499.90			P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1538.40						
TOTAL This Period (last page this line numb	per 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	X 11a 11b 11c 12						
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)		duress of any pointear commute							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle SCHMALTZ, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4807 BEACH DR SW			06 30 / Y Y Y Y Y 06 30 2018						
City SEATTLE	State WA	Zip Code 98116-4342	Transaction ID : PR2576312850492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		624.99						
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 ▼ 2291.63	P/R Deduction (\$208.33 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. COMBSMORGAN, LAURIE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 513 RIVERVIEW DRIVE			06 / D D / Y Y Y Y Y 2018						
City FRANKLIN	State TN	Zip Code 37064-5512	Transaction ID : PR2578719850492 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		upation (for Individual) c Dir Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.60	P/R Deduction (\$19.20 Bi-Weekly)						
Full Name of Individual (Last, First, Middle LONG, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12352 PRINCETON AVE			06 / D D / Y Y Y Y 2018						
City EDEN PRAIRIE	State MN	Zip Code 55347-1936	Transaction ID : PR2578734950492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			797.97						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check only	(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										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle ASNER, BARTLEY, , ,	Initial) or Full C	organization Name	Date of	Receipt						
Mailing Address 25 OFFSHORE			M M 06	/ D D 30	/ Y	ү 2018	Y			
City NEWPORT BEACH	State CA	Zip Code 92657-2162		Transaction ID : PR2578819450492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С			-11-	- j -	576.9	90			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Physn	Me	mo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle DUFFEY, KRISTY, , ,	Initial) or Full C	rganization Name	Date of	Receipt						
Mailing Address 8906 WINGED FOOT DRIV			06							
City PASADENA	State MD	Zip Code 21122-6670		ction ID : P			2			
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) ef Clin Off	Me	mo Item						
Receipt For:	Aggregate	Year-to-Date ▼		P/R Deduction (\$192.30 Bi-Weekly)						
Primary General Other (specify) ▼		2499.90	P/R Dedu							
Full Name of Individual (Last, First, Middle CIAVOLA, LAURA, , ,	Initial) or Full C	organization Name	Date of	Receipt						
Mailing Address 1686 WILDFIRE LANE	01-1-	7. 0.4	06	/ D D D 30		2018				
City FRISCO	State TX	Zip Code 75033-7325		of Each Re			2			
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) 9 STARS & Ops	Me	mo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Dedu	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).					9	1730.7	0			
TOTAL This Period (last page this line number	er only)				- 41-					

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12								
		, ,	13 14 15 16 17								
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 (l	JnitedHealth Group PA	.C)								
Full Name of Individual (Last, First, Middle Initial) A. BUSBEE, NATHANAEL, , ,	or Full O	rganization Name	Date of Receipt								
Mailing Address 611 ORPINGTON RD			06 30 2018								
	State MD	Zip Code	Transaction ID : PR2578826750492								
BALTIMORE		21229-2128	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) Bus Process	Memo Item								
Boogint For:		Year-to-Date ▼	-								
Primary General Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initial) B. MILLER, TRACI, , ,	or Full O	rganization Name	Date of Receipt								
Mailing Address 729 PINE TRAIL			M M / D D / Y Y Y Y 06 30 2018								
City ARNOLD	State MD	Zip Code 21012-1628	Transaction ID : PR2578829950492 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) ▼		Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initial) C. FARMER, RACHEL, , ,	or Full O	rganization Name	Date of Receipt								
Mailing Address 1929 ALBIZIA COURT			06 / D / Y Y Y Y 06 30 2018								
City	State	Zip Code	Transaction ID : PR2595208350492								
BATON ROUGE	LA	70808-3973	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		ipation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 749.97	P/R Deduction (\$57.69 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		•	403.83								
TOTAL This Period (last page this line number only											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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				Detailed Summary Page	×	11a		11 14	- H	-	11c	12	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the n							pos	se of a	sol					
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated									-					
A.	Full Name of Individual (Last, First, Middle Initial ELLIS, DENNIS, , ,) or Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 6001 DRIPPING SPRINGS				M = M / D = D / Y = Y = Y = Y Y 06 30 2018										
	City FRISCO	State TX		Zip Code 75034-4039		Transaction ID : PR2595209150492 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual) United HealthCare Services Inc		upati Dir S	ion (for Individual) SIs		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 212.94	P/	R Dedi	uctic	on ((\$16.3	38	Bi-We	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial LONIGRO, ANTHONY, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt						
	Mailing Address 3186 WEST CANYON AVE					06 / Y Y Y Y Y 2018									
	City SAN DIEGO	State CA		Zip Code 92123-5426				-				2585049 2 s Period	2		
	FEC ID number of contributing federal political committee.	С				115.38									
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 499.98	P/	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial SNYDER, MARY, , ,) or Full O	rgar	ization Name		Date of	Re	cei	ipt						
	Mailing Address 1075 BOSTON POST RD	1 -				^M 06	1	L	30	J.	/ Y	у у 2018			
	City MADISON	State CT		Zip Code 06443-3363	A							2935049 s Period	2		
	FEC ID number of contributing federal political committee.	С						,			, ,	576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 2499.90	P	'R Ded	uctio	on	(\$192	2.30) Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•				y			,	741.4	2		
т	OTAL This Period (last page this line number on	ly)		•				-			-				

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
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	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			06 30 2018						
City	State	Zip Code	Transaction ID : PR2601125350492						
SAN ANTONIO	ТХ	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: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.01	P/R Deduction (\$30.77 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. SHORT, MARIANNE, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 2215 SUMMIT AVENUE			06 / D D / Y Y Y Y Y 2018						
City SAINT PAUL	State MN	Zip Code 55105-1002	Transaction ID : PR2601133550492 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:		Year-to-Date ▼							
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SWANSON, AMY, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 621 SPARROW WAY		7.0.1	06 / D D / Y Y Y Y 2018						
City WADSWORTH	State OH	Zip Code 44281-7716	Transaction ID : PR2601140750492 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 ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).	_ .		957.66						
TOTAL This Period (last page this line number	er only)								

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							
			person for the purpose of soliciting contributions te 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. RODRIGUEZ, ROGER, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 10501 SW 102 AVENUE			06 30 2018 Transaction ID : PR2601176850492 Amount of Each Receipt this Period							
City MIAMI	State FL	Zip Code 33176-3511								
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MCBEATH, ROBERT, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2537 RED ARROW DRIV			06 / 0 / Y Y Y Y 2018							
City LAS VEGAS	State NV	Zip Code 89135-1628	Transaction ID : PR2605708950492 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 Med Grp Physn	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. DAVIS, KELLY, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 905 N LEBANON ST			06 / D D / Y Y Y Y 06 2018							
City ARLINGTON	State VA	Zip Code 22205-1433	Transaction ID : PR2605734250492 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) t Affs Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		1442.25							
TOTAL This Period (last page this line num	ber only)	······								

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page								
	y information copied from such Reports and S for commercial purposes, other than using the			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee							
	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Init MALONE, TRACY, , ,	ial) or Full C	Organization Name	Date of Receipt							
	Mailing Address 900 S 22ND ST										
	City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736950492 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		supation (for Individual) P External Affs	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Init SMITH, LARRY, , ,	ial) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 1164 RUE CHINON			06 / D D / Y Y Y Y Y 2018							
	City MANDEVILLE	State LA	Zip Code 70471-1213	Transaction ID : PR2605760650492							
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) sc Dir Compli	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 249.99	P/R Deduction (\$19.23 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init WEISSEL, MICHAEL, , ,	ial) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 99 HAGEN ROAD			06 / D D / Y Y Y Y 2018							
	City NEWTON	State MA	Zip Code 02459-2731	Transaction ID : PR2606842950492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			1211.49							
T	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						
			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 MATECZUN, JOHN, , ,		rganization Name	Date of Receipt						
Mailing Address 1908 HARBOURSIDE DRI UNIT 403	VE		06 30 Y Y Y Y Y 2018						
City LONGBOAT KEY	State FL	Zip Code 34228-4207	Transaction ID : PR2606845150492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FICKER, MARK, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 173 LAURELWOOD DRIV			06 / D D / Y Y Y Y Y 2018						
City	State CA	Zip Code	Transaction ID : PR2607806750492						
ΝΟΥΑΤΟ	CA	94949-8427	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		upation (for Individual) Ops	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		501.62	P/R Deduction (\$38.33 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. LANDO, LISA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 60 PINEAPPLE STREET APT 3J			M M / D D / Y Y Y Y 06 30 2018						
City BROOKLYN	State NY	Zip Code 11201-6839	Transaction ID : PR2608059550492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			807.27						
TOTAL This Period (last page this line numb	per only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			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 FLYNN, VIRGINIA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 30 VAN TERRACE			06 30 / Y Y Y Y Y 06 30 2018							
City SPARKILL	State NY	Zip Code 10976-1406	Transaction ID : PR2608061250492 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) Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. FERGUSON, SANDRA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 710 SOUTH SHERATON D	1		06 / D D / Y Y Y Y 2018							
City AKRON	State OH	Zip Code 44319-1918	Transaction ID : PR2608061950492 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) c Dir Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. BODELL, LESLIE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 18710 34TH AVENUE NOP			06 / D D / Y Y Y Y Y 2018							
City PLYMOUTH	State MN	Zip Code 55447-1000	Transaction ID : PR2609811350492 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	Occ VP (upation (for Individual) Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			807.66							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

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111	EMIZED RECEIPTS			or each category of the etailed Summary Page		′ 11a 13		11b 14	11c	F	12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r					for the		oose o	f soliciti		contribu	tions		
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Unit	tedHealth Group PA	C)									
 A.	Full Name of Individual (Last, First, Middle Initia WRIGHT, NORMAN, , ,	l) or Full O	Drgan	ization Name		Date of	Re	ceipt						
	Mailing Address 5205 KELSEY TERRACE					^M 06	/	D 30			y y 2018	Y		
	City EDINA	State MN		Zip Code 55436-1172		Transaction ID : PR2609812350492 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.								,			576.	90		
	Name of Employer (for Individual) Optum Services, Inc		upati ef of (on (for Individual) Ops		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 2499.90	F	P/R Ded	uctic	on (\$19	92.30 Bi	-Wee	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia STRAUSS, DAVID, , ,	l) or Full O	Drgan	ization Name		Date of	Re	ceipt						
	Mailing Address 5000 FRANCE AVENUE S UNIT 33							06 / D D / Y Y Y Y 2018						
	City MINNEAPOLIS	State MN		Zip Code 55410-2061		Trans Amount			PR261					
	FEC ID number of contributing federal political committee.	С	C					576.90						
	Name of Employer (for Individual) United HealthCare Services Inc	Occ SVF		M	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 2499.90	F	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia SMITH, MELANIE, , ,	l) or Full O	Drgan	ization Name		Date of	Re	ceipt						
	Mailing Address 15340 HIGHLAND PLACE	1.00				06 30 / Y Y Y Y 2018								
	City MINNETONKA	State MN		Zip Code 55345-4613		Trans Amount		-	: PR261 Receipt	-				
	FEC ID number of contributing federal political committee.	С				<u> </u>		y		_	115.			
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) uit Ops		M	emo	Item						
Receipt For: Aggregate Year Primary General Other (specify) The second s				-to-Date ▼ 499.98		P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•••••				,	.,		1269.	18		
т	OTAL This Period (last page this line number or	ıly)		••••••	-			, ,		_				

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		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 A. STEVENS, J, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 93 CONSERVATION RO	AD		06 30 / Y Y Y Y 06 30 2018								
City SUFFIELD	State CT	Zip Code 06078-2442	Transaction ID : PR2612528550492								
		00078-2442	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	Dir	IT Proj Mgmt									
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. BAKER, MICHAEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2383 HIGHOVER TRAIL			06 / D D / Y Y Y Y 06 30 2018								
City	State	Zip Code	Transaction ID : PR2612530550492								
CHANHASSEN	MN	55317-4744	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) Prov Svc	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. CORCORAN, SUSAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4 DONBUSH ROAD			06 30 / Y Y Y Y 2018								
City	State	Zip Code	Transaction ID : PR2613385350492								
NORTH OAKS	MN	55127-2095	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) Acctng	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify)		499.98	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		807.66								
TOTAL This Period (last page this line num											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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				or each category of the Detailed Summary Page	×	11a 13		11	-	11c	12	17		
	formation copied from such Reports and Stat commercial purposes, other than using the n					or the		pos	se of s	solicitir	ng contrib	utions		
	ME OF COMMITTEE (In Full) hitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)									
	Name of Individual (Last, First, Middle Initial CKINSON, DAVID, , ,) or Full O	rgar	nization Name		Date of Receipt								
	iling Address 57 ATKINSON LANE	1				06 / 0 / Y Y Y Y Y 2018								
City	/ IDBURY	State MA		Zip Code 01776-1938		Transaction ID : PR2613388950492								
FE	C ID number of contributing eral political committee.	C				Amount of Each Receipt this Period 171.42 Memo Item								
Op	me of Employer (for Individual) tum Services, Inc		•	ion (for Individual) ງ Bus Dev										
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 757.10	P	/R Dec	luctio	on ((\$57.1	4 Bi-V	Veekly)			
	Name of Individual (Last, First, Middle Initial REJCI, ANDREW, , ,) or Full O	rgar	nization Name	Date of Receipt									
	iling Address 19880 LAKEVIEW AVENUE			1		06 / 0 / Y Y Y Y 2018								
City EX	/ CELSIOR	State MN		Zip Code 55331-9352		Transaction ID : PR2614310750492 Amount of Each Receipt this Period								
	C ID number of contributing eral political committee.	С				84.24								
	me of Employer (for Individual) um Services, Inc		upat Corr	tion (for Individual) nm		Memo Item								
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 365.04	P/	P/R Deduction (\$28.08 Bi-Weekly)								
	Name of Individual (Last, First, Middle Initial) or Full O	rgar	nization Name		Date o	f Re	ecei	ipt					
Ма	ling Address 6299 BELLEVUE LANE					06 30 2018								
City	/ DEN PRAIRIE	State MN		Zip Code 55344-5201	\vdash						43140504			
FE	EN PRAIRIE C ID number of contributing eral political committee.	C	-	00044-0201	_ /	Amoun	t of	Ea	ich Re	eceipt	this Perio 157	d 7.89		
					- '		lome	, lt.		9				
Un	ne of Employer (for Individual) ited HealthCare Services Inc ceipt For:	VP F	Fin	ion (for Individual)		IV	lemo	5 116	em					
	Primary General Other (specify)	Aggregate	Yea	rr-to-Date ▼ 315.78	P	/R Dec	ducti	ion	(\$52.6	63 Bi-V	Veekly)			
SUB	FOTAL of Receipts This Page (optional)			•••••				,			413	.55		
тота	L This Period (last page this line number on	ly)		•••••				-						

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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			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee								
NAME OF COMMITTEE (In Full)	and name allu a	aarooo or any political committee	to conside contributions from Such committee.								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle THOMPSON, JOHN , , ,	,	rganization Name	Date of Receipt								
Mailing Address 1697 COUNCIL BLUFF D			06 / D D / Y Y Y Y 2018								
City ATLANTA	State GA	Zip Code 30345-4137	Transaction ID : PR2614322350492 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) S Dir SIs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Middle BURKHOLDER, CHAD, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2423 DUBONNET DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	State PA	Zip Code	Transaction ID : PR2615073450492								
		18062-8857	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) Ops									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle OCONNOR, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1510 JAMES STREET	1		06 / D D / Y Y Y Y 2018								
City DURHAM	State NC	Zip Code 27707-1514	Transaction ID : PR2615082050492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1211.49								
TOTAL This Period (last page this line numb	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								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. SOLOMON, RANDALL, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 760 HAIGHT STREET			06 30 2018								
City SAN FRANCISCO	State CA	Zip Code 94117-3317	Transaction ID : PR2615671550492								
	UA	94117-3317	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) Behvrl Med Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. BIRNBAUM, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 55 DEAN STREET	1		06 / ^D ^D ^D ^D ²⁰¹⁸								
City	State NY	Zip Code	Transaction ID : PR2615671650492								
BROOKLYN		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) Hlthcare Econ	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. NIEMYER, ELIZABETH, , ,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 9237 ENGLISH MEADOW	WAY		06 30 / Y Y Y Y Y 2018								
City LAYTONSVILLE	State MD	Zip Code 20882-1348	Transaction ID : PR2615682850492 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	Occ VP (upation (for Individual) Ops	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1015.41	P/R Deduction (\$92.31 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			784.59								
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	X 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. KNUTSON, DIANE, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 701 Pennsylvania Avenue Suite 200	e, N.W.		M M / D D / Y Y Y Y Y 06 30 2018								
City Washington	State DC	Zip Code 20004-3610	Transaction ID : PR2615923950492 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		upation (for Individual) Ntwk Pricing	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle 3. TRAW, KEVIN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 518 13TH ST			M M / D D / Y Y Y Y 06 30 2018								
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	Transaction ID : PR2617365650492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. JOHNSON, MARK, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 8687 RILEY CURVE			M M / D D / Y Y Y Y Y 06 30 2018								
City CHANHASSEN	State MN	Zip Code 55317-4822	Transaction ID : PR2617933950492 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: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 599.95	P/R Deduction (\$46.15 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional			369.21								
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	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	4C)									
Full Name of Individual (Last, First, Middle BROWN, ROGER, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 512 EAST STATE AVE			06 30 2018									
City	State AZ	Zip Code	Transaction ID : PR2622557950492									
PHOENIX	AZ	85020-4940	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		576.90									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc	VP	Mktg Bus Dev										
	Aggregate	Year-to-Date ▼										
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
			1									
Full Name of Individual (Last, First, Middle B. OLSON, MARK, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 891 14TH ST UNIT 1210			06 30 Y Y Y Y 2018									
City	State	Zip Code	Transaction ID : PR2622561650492									
DENVER	СО	80202-3259	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:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name										
C. MULES, REBECCA, , , Mailing Address 660 DOVER STREET			Date of Receipt									
			06 30 2018									
City	State MD	Zip Code	Transaction ID : PR2624442650492									
BALTIMORE		21230-2228	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) Govt Affs	Memo Item									
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)									
Other (specify)		2307.60										
SUBTOTAL of Receipts This Page (optional).			1269.18									
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				
	y information copied from such Reports and Si for commercial purposes, other than using the												
$\overline{\langle}$	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Init STALLWOOD, GREGG, , ,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 4842 JUNIPER DR				^M 06	1	^D 30	/ Y	2018	Y			
	City PALM HARBOR	State FL	Zip Code 34685-2688	_					19905049 is Period	2			
	FEC ID number of contributing federal political committee.	С						-	576.9	90			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (upation (for Individual) Ops		M	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2307.60	I 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				06 / D D / Y Y Y Y Y 2018								
	City	State MN	Zip Code						9955049	2			
	EXCELSIOR FEC ID number of contributing federal political committee.	C	55331-9400		Amount of Each Receipt this Period 576.90								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHIth Grp	_	P/R Deduction (\$192.30 Bi-Weekly)								
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2499.90	- P									
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				06		30		2018				
	City EDINA	State MN	Zip Code 55436-1342						50195049 is Period	2			
	FEC ID number of contributing federal political committee.	С			576.90 Memo Item								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Mktg Off										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	I F	P/R Ded	ucti	on (\$19:	2.30 Bi-W	/eekly)				
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				Detailed Summary Page	×	11a 13	\square	11 14		1	1c	12 16	17		
	y information copied from such Reports and State for commercial purposes, other than using the na					or the p		pos	se of s	solic	citing	contribut	ions		
<u></u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
A.	Full Name of Individual (Last, First, Middle Initial) SMITH, LISA, , ,) or Full O)rgai	nization Name	Date of Receipt 06 / 30 / 2018 Transaction ID : PR2625503750492 Amount of Each Receipt this Period 114.78										
	Mailing Address 5040 INTERLACHEN BLUFF	Otot -		Zin Onde											
	City EDINA	State MN		Zip Code 55436-1360											
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual) Optum Services, Inc	VP	Gen	ion (for Individual) Mgmt		Me	emo	o It€	em						
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 502.60	P/	R Dedu	uctio	on	(\$38.2	26 B	Bi-Wee	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rgar	nization Name	Date of Receipt										
	Mailing Address 1720 CROSS PINES DR					06 / 0 0 / Y Y Y Y Y 2018									
	City FLEMING ISLAND	State FL		Zip Code 32003-4915	Transaction ID : PR2625505450492 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				576.90 Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) an CEO											
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial)		rgar	nization Name		Date of	Re	ecei	ipt						
	Mailing Address 825 VIRGINIA PARK CIRCLE NE					^M 06	/	L	D D 30	/	L	ү ү 2018			
	City ATLANTA	State GA		Zip Code 30306-4081	A							3235049 s Period	2		
	FEC ID number of contributing federal political committee.	С						,			y	76.9	92		
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Acct Mgmt		Me	∋mo	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 461.52	P/	R Ded	uctio	on	(\$38.4	46 B	3i-Wee	ekly)			
s	UBTOTAL of Receipts This Page (optional)			•	[,			,	768.6	60		
т	OTAL This Period (last page this line number onl	y)		•				-							

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 berson 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 P	AC)								
Full Name of Individual (Last, First, Middle CULHANE, DEBORAH, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 100 COVE WAY UNIT 301			06 / Y Y Y Y Y 2018								
City QUINCY	State MA	Zip Code 02169-5857	Transaction ID : PR2626356050492 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) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. HINES, GREGORY, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3660 SILVERWOOD RD			06 / ^D D D / ^Y Y Y Y Y 06 2018								
City WEST SACRAMENTO	State CA	Zip Code 95691-5403	Transaction ID : PR2626886550492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. STOCKSTAD, LYNNE, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 55 GIDEONS POINT RD	04-4-		06 / Y Y Y Y Y 2018								
City EXCELSIOR	State MN	Zip Code 55331-9526	Transaction ID : PR2626915550492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		1730.70								
TOTAL This Period (last page this line num	ber only)										

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								
or	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions								
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) RUSH, ROBERT, , ,) or Full O	rganization Name	Date of Receipt								
	Mailing Address 4735 BYWOOD CT	State	Zip Code	06 / 0 / 2018								
	COLORADO SPRINGS	CO	80906-5936	Transaction ID : PR2627743850492 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		166.65								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item								
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 277.75	P/R Deduction (\$55.55 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial) RANHEIM, CRAIG, , ,) or Full O	rganization Name	Date of Receipt								
	Mailing Address 7608 GLEN ALCOVE			06 / D / Y Y Y Y Y 2018								
	City WOODBURY	State MN	Zip Code 55129-4308	Transaction ID : PR2628329350492 Amount of Each Receipt this Period 47.58								
	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: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 296.58	P/R Deduction (\$15.86 Bi-Weekly)								
c.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	Date of Receipt								
	Mailing Address 45 AUDUBON CAUSEWAY			06 / D D / Y Y Y Y Y 2018								
	City LANTANA	State FL	Zip Code 33462-4756	Transaction ID : PR2628332350492 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) ? HIth Reform/Modernizatn	Memo Item								
	Receipt For: // Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	791.13								
т	OTAL This Period (last page this line number only	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	X 11a 11b 11c 12								
Any information copied from such Reports ar or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle KORNHAUSER, MICHAEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 180 SUMMIT LANE			06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City BALA CYNWYD	State PA	Zip Code 19004-2931	Transaction ID : PR2628335750492 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		173.88	3							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 753.48	P/R Deduction (\$57.96 Bi-Weekly)								
Full Name of Individual (Last, First, Middle 3. THOMPSON, BRUCE, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2509 WELBORN STREET			06 / ^y y y y y 06 2018								
City DALLAS	State TX	Zip Code 75219-4039	Transaction ID : PR2628833650492 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) ▼		Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. JARVIE, BRUCE MICHAEL, , ,		rganization Name	Date of Receipt								
Mailing Address 18750 KIPHEART DRIVE			06 / Y Y Y Y 06 30 / 2018								
City LEESBURG	State VA	Zip Code 20176-8220	Transaction ID : PR2629554550492 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92	2							
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) Fin	Memo Item	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		827.70)							
TOTAL This Period (last page this line num	ber only)										

Use separate schedule(s)

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PAGE 154 OF

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 WONG, MING, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 21066 ASHLEY LANE			06 / D D / Y Y Y Y 2018										
City LAKE FOREST	State CA	Zip Code 92630-5867	Transaction ID : PR2629556850492										
		92030-3607	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		180.00										
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
United HealthCare Services Inc	Dir	Med Clin Ops											
Receipt For: Primary General	Aggregate	Year-to-Date V											
Other (specify) V		780.00	P/R Deduction (\$60.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. TITA, MARYBETH, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 16 BEACH WOOD ROAD			06 30 2018										
	State FL	Zip Code	Transaction ID : PR2632077850492										
FERNANDINA BEACH	FL	32034-6504	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 Dir	upation (for Individual) Fin	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)										
Other (specify) ▼		, 499.98											
Full Name of Individual (Last, First, Middle SAYEED, OMER, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 2239 HOLLISTON AVE	1		06 / D D / Y Y Y Y 06 2018										
City ALTADENA	State CA	Zip Code 91001-3213	Transaction ID : PR2632078250492										
		01001 0210	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		157.89										
Name of Employer (for Individual)		upation (for Individual)	Memo Item										
Optum Services, Inc Receipt For:		Advisory Svc											
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$52.63 Bi-Weekly)										
Other (specify)		315.78											
SUBTOTAL of Receipts This Page (optional)			453.27										
TOTAL This Period (last page this line numb													

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	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 Incorpora	ted PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I OTTESON, WILLIAM, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4545 OXFORD AVE			06 30 / Y Y Y Y Y 2018								
City EDINA	State MN	Zip Code 55436-1405	Transaction ID : PR2632082550492 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) uty Gen Counsel Mgr	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. MILLIGANJR, CHARLES, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6901 RIM ROCK CIRCLE N	W		06 / 0 0 / 2018								
City ALBUQUERQUE	State NM	Zip Code 87120-3196	Transaction ID : PR2632083550492 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	P/R Deduction (\$40.00 Bi-Weekly)								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00									
Full Name of Individual (Last, First, Middle I C. HIBBERT, LINDA, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 924 BENTLEY COURT			06 / D D / Y Y Y Y 2018								
City CHALFONT	State PA	Zip Code 18914-3762	Transaction ID : PR2632085350492 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		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 501.62	P/R Deduction (\$38.33 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			350.37								
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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				Detailed Summary Page	×	13 14 15 16 1 for the purpose of soliciting contributions blicit contributions from such committee. 13 14 15 16 1 for the purpose of soliciting contributions blicit contributions from such committee. 13 14 15 16 1 Date of Receipt 06 30 2018 2018 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10									
	y information copied from such Reports and Stat					or the		pos	se of s	solic	citing	contribut			
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated									511	Such				
A.	Full Name of Individual (Last, First, Middle Initial GORSUCH, KIRSTEN, , , Mailing Address 2780 COUNTRYSIDE DRIVE W	-	Drgar	nization Name		- · · · · · · · · · · · · · · · · · · ·									
		1		Zin Codo	06 30 2018 Transaction ID : PR2632087850492										
	City ORONO	State MN		Zip Code 55356-9676											
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual) United HealthCare Services Inc		upati Com	ion (for Individual) nm		Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initial TUFFIN, MICHAEL, , ,) or Full O	Drgar	nization Name											
	Mailing Address 5904 ASHBY MANOR PLACE	1				06 30 2018 Transaction ID : PR2632087950492									
	City ALEXANDRIA	State VA		Zip Code 22310-2267											
	FEC ID number of contributing federal political committee.	С				576.90									
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Iblic Affairs		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)												
C.	Full Name of Individual (Last, First, Middle Initial KEANEY, CRAIG J, , ,) or Full O	Drgar	nization Name	C	ate of	Re	ecei	ipt						
	Mailing Address 6233 CRESCENT DRIVE					06	/	L	30	/	Y	2018			
	City EDINA	State MN		Zip Code 55436-2572	A								2		
	FEC ID number of contributing federal political committee.	С						y			,		60		
	Name of Employer (for Individual) Optum Services, Inc	Occi SVP		Memo Item											
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 2307.60	P/	R Ded	uctio	on	(\$192	.30	Bi-Wo	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•••••	[,			,	1538.4	10		
т	OTAL This Period (last page this line number on	ly)						7			,				

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

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
I LIVILLU KEULIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	<u> </u>					
Any information copied from such Reports an or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)		and be any pointed commute							
UnitedHealth Group Incorport	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle WALTER, JEFFREY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1490 SETTLER ST			06 / Y Y Y Y 06 30 / 2018	Y					
City ELBURN	State IL	Zip Code 60119-7841	Transaction ID : PR26320888504 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) IT Architecture	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. TEMPLE, MARTHA, , ,	Initial) or Full C	Date of Receipt							
Mailing Address 194 LITTLE LANE			06 / D D / Y Y Y Y 2018	Y					
City DURHAM	State CT	Zip Code 06422-1303	Transaction ID : PR263287365049	-					
		00422-1303	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576	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) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle WALTHOUR, JOHN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5049 COLFAX AVE S			06 / D D / Y Y Y 06 30 / 2018	Y					
City MINNEAPOLIS	State MN	Zip Code 55419-1145	Transaction ID : PR26328770504 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 Rsch	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		807	.66					
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	✗ 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 PLATT, LAWRENCE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3830 KING STREET			06 30 2018						
City ALEXANDRIA	State VA	Zip Code 22302-1906	Transaction ID : PR2632880750492						
		22302-1900	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	VP	Comm							
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
			1						
Full Name of Individual (Last, First, Middle B. HAPGOOD, WADE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 330 NW 82ND			06 30 2018						
City	State	Zip Code	Transaction ID : PR2634167050492						
ТОРЕКА	KS	66617-2223	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:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		749.97	P/R Deduction (\$57.69 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. PRIBLE, JOHN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1923 SHIVER DR			06 30 2018						
City	State	Zip Code	Transaction ID : PR2634656650492						
ALEXANDRIA	VA	22307-1629	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
United HealthCare Services Inc	VP (Govt Affs							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify)		2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1326.87						
TOTAL This Period (last page this line numb	er only)								

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							
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee							
NAME OF COMMITTEE (In Full)			to solicit contributions from such committee.							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle SCHEID, ADREAN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2915 CATHEDRAL AVEN	JE NW		06 / Y Y Y Y 2018							
City WASHINGTON	State DC	Zip Code 20008-3406	Transaction ID : PR2634880450492 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) External Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle LARAMEE, CHRISTINE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2902 S ESPERANZA AVE			06 / 0 / Y Y Y Y 2018							
City TAMPA	State FL	Zip Code 33629-7119	Transaction ID : PR2634881550492							
FEC ID number of contributing federal political committee.	С	33237113	Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item							
Receipt For:		Year-to-Date ▼	-							
Primary General Other (specify) ▼		, 599.95	P/R Deduction (\$46.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle PESCATELLO, SARA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2149 CALIFORNIA STREE APT #D			06 / D D / Y Y Y Y Y 2018							
City WASHINGTON	State DC	Zip Code 20008-1834	Transaction ID : PR2634888550492 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) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1292.25							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

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11			for each category of the Detailed Summary Page	3	K 11a		11b	11c	12							
	y information copied from such Reports and Stat for commercial purposes, other than using the n															
$\overline{\langle}$	NAME OF COMMITTEE (In Full)			. 10 0						.00.						
\rangle	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	(C)												
A.	Full Name of Individual (Last, First, Middle Initia POWER, ROBERT, , ,) or Full Or	ganization Name		Date of	Re	ceipt									
	Mailing Address 20 SMITH LANE			06 / Y Y Y Y Y 2018												
	City SAINT JAMES	State NY	Zip Code 11780-3810					PR26348 leceipt th								
	FEC ID number of contributing federal political committee.	С						т ут.	115	38						
	Name of Employer (for Individual) Optum360 Services Inc		pation (for Individual) Gen Mgmt		Me	emo	ltem									
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 499.98		P/R Dedu	uctio	on (\$38.	.46 Bi-We	eekly)							
в.	Full Name of Individual (Last, First, Middle Initial REED, PAM, , ,) or Full Or	ganization Name		Date of	Re	ceipt									
	Mailing Address 2983 BLACKSTONE				^M 06	1	30	/ Y	2018	Y						
	City FRISCO	State TX	Zip Code 75033-7389							2018 6350492						
	FEC ID number of contributing federal political committee.	Occupation (for Individual) KA Mgr Acct Mgmt														
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emc	tem									
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 249.99	F	P/R Deduction (\$19.23 Bi-Weekly)											
C.	Full Name of Individual (Last, First, Middle Initial PAYET, KEITH, , ,) or Full Or	ganization Name		Date of	Re	ceipt									
	Mailing Address 405 ENCLAVE CT	1			06 ^M	1	30		ү ү 2018	Y						
	City BRENTWOOD	State TN	Zip Code 37027-7894			temo Item duction (\$19.23 Bi-Weekly) of Receipt / 30 / 2018 saction ID : PR2635440050492 to of Each Receipt this Period 576.90 Memo Item										
	FEC ID number of contributing federal political committee.	С					,	,								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	tem									
	Receipt For: Primary General Other (specify)	Aggregate Y	regate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			. '			, .		749.	97						
Т	OTAL This Period (last page this line number on	ly)	••••••	-												

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ITEMIZED RECEIPTS		r each category of the etailed 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 (Unit	edHealth Group PA	SC)						
Full Name of Individual (Last, First, Middl A. NGUYEN, ANTHONY, , ,	e Initial) or Full Organi	zation Name	Date of Receipt						
Mailing Address 17816 PORTO MARINA			06 / D D / Y Y Y Y Y 06 30 2018						
City PACIFIC PALISADES	State CA	Zip Code 90272-4154	Transaction ID : PR2635444050492						
FEC ID number of contributing federal political committee.	C	30212-4134	Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		on (for Individual) ulation Hlth	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate Year		P/R Deduction (\$52.63 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. ROOS, THOMAS, , ,									
Mailing Address 3199 KAGEN AVE NE			06 / 0 / 2018						
City SAINT MICHAEL	State . MN	Zip Code 55376-3416	Transaction ID : PR2635451250492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		P/R Deduction (\$192.30 Bi-Weekly)						
Name of Employer (for Individual) United HealthCare Services Inc		on (for Individual) ef Acctng Off							
Receipt For: Primary General Other (specify) ▼	Aggregate Year	to-Date ▼ 2499.90							
Full Name of Individual (Last, First, Middl C. SMITH, KENNETH, , ,	e Initial) or Full Organi	zation Name	Date of Receipt						
Mailing Address 1200 WASHINGTON ST	Date of Receipt								
City BOSTON	State 1 MA	Zip Code 02118-2132							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc	Occupatio Dir Mktg I	on (for Individual) Bus Dev	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate Year	to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)	••••••	850.17						
TOTAL This Period (last page this line num	ber 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	Statements manhe name 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/	AC)					
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			06 30 / Y Y Y Y					
City NORTHBOROUGH	State MA	Zip Code 01532-2420	Transaction ID : PR2637694650492 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 ▼ 499.98	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			06 / Y Y Y Y 06 30 2018					
City ROSWELL	State GA	Zip Code 30075-1454	Transaction ID : PR2638106650492 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 ▼ 249.99	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			06 / D D / Y Y Y Y 2018					
City WASHINGTON	State DC	Zip Code 20002-7313	Transaction ID : PR2638112750492 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 ▼ 504.81	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)

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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 10 11 15 10 17					
			13 14 15 16 17 person for the purpose of soliciting contributions 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, Mide A. HAUSCHILDT, TODD, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 111 4TH AVE N UNIT 703			06 / Y Y Y Y Y 06 30 2018					
City MINNEAPOLIS	State MN	Zip Code 55401-1538	Transaction ID : PR2638114750492 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) T	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Mide ZEGLINSKI, MICHAEL, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1 TRIMONT LANE #610A City	State	Zip Code	06 / D / Y Y Y 2018					
PITTSBURGH	PA	15211-1206	Transaction ID : PR2639701850492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. EDWARDS, MICHAEL, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 379 DURHAM ROAD			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City WYCKOFF	State NJ	Zip Code 07481-1018	Transaction ID : PR2639702050492 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 ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		1269.18					
TOTAL This Period (last page this line nu	mber only)							

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check or	nly or	ne)	L		
	-13		for each category of the Detailed Summary Page	X 11a		11b	11c	12	·
Any information copied from	m such Reports and S	tatements ma	y not be sold or used by any p ddress of any political committe	erson for the	e pur	14 pose of	15 solicitin	g contribu	tions
	· •						itom suc		
		ed PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual CALABRESE, DAVI	Ď, , ,	tial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 85 LIT	TLE POND RD			06	M /	D 30	D / Y	2018	Y
City NORTHBOROUGH		State MA	Zip Code 01532-1686					70835049 his Period	
FEC ID number of cont federal political committe	U U	С						715.	50
Name of Employer (for Optum Services, Inc	Individual)		ipation (for Individual) Pharmacy Programs		Memo) Item			
Receipt For: Primary Other (specify) ▼	General	Aggregate	Year-to-Date ▼ 1900.26	P/R De	ducti	on (\$23	8.50 Bi-\	Veekly)	
Full Name of Individual B. SMITH, ANTHON	Υ,,,	tial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 1 ROC	KAWAY AVE			06		30		2018	Y
City MARBLEHEAD		State MA	Zip Code 01945-1726					74625049	
FEC ID number of cont federal political committed	U U	C			Amount of Each Receipt this Period				
Name of Employer (for Optum Services, Inc	Individual)		upation (for Individual) Regl Affs		Memo Item				
Receipt For: Primary Other (specify) ▼	General		Year-to-Date ▼ 434.70	P/R De	ducti	on (\$43.	.47 Bi-W	eekly)	
Full Name of Individual c. SURRELL, CHR		tial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 620 D/	ARTINGTON WAY	1.00		06	Date of Receipt				
City JOHNS CREEK		State GA	Zip Code 30022-8045					75815049 his Period	
FEC ID number of cont federal political committe	0	С				,	, ,	218.	16
Name of Employer (for United HealthCare Servi	,		ıpation (for Individual) Iktg Bus Dev		Memo	o Item			
Receipt For: Primary Other (specify)	General	Aggregate	Year-to-Date ▼ 808.32	P/R De	educti	on (\$72	.72 Bi-W	eekly)	

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		Use separate schedule(s)	(check or	nly or	ne)	L				
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)	io name anu a			UIUID	นแบบเร ไ	SUCE SUCE				
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle In A. JENSENMOORE, KIMBERLY, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt					
Mailing Address 230 ROSE AVENUE			06 / Y Y Y Y 06 30 2018							
City MILL VALLEY	State CA	Zip Code 94941-1728						2		
FEC ID number of contributing federal political committee.	С						74.2	28		
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 ▼ 328.07	P/R De	ductio	on (\$24.	15 16 of soliciting contributions is from such committee. a 2018 2018 2018 2018 2018 2018 21 2018 74.28 n 24.76 Bi-Weekly) a 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 192.30 Bi-Weekly a 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018 2018				
Full Name of Individual (Last, First, Middle In BIGHAM, ANNE, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt					
Mailing Address 2610 HOLLY LANE NORTH			06		D D 30	/ Y		Ŷ		
City PLYMOUTH	State MN	Zip Code 55447-1727			-			2		
FEC ID number of contributing federal political committee.	C			576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		Memo	Item					
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		2499.90	P/R De	ductio	on (\$192	2.30 Bi-W	'eekly)			
Full Name of Individual (Last, First, Middle In DUTTA, SUMIT, , ,		rganization Name	Date	of Re	ceipt					
Mailing Address 1112 W WRIGHTWOOD AV		Zin Code	06		30		2018			
City CHICAGO	State IL	Zip Code 60614-1315						2		
FEC ID number of contributing federal political committee.	C				y :	. y	576.9	90		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg Chief Med Off		Memo	tem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R De	eductio	on (\$192	2.30 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional)					,	,	1228.0)8		
TOTAL This Period (last page this line numbe	r only)									

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 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	NC)					
Full Name of Individual (Last, First, Middle KETTLEWELL, KELLY, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 457 N OAK ST	State	Zip Code	06 / 30 / 2018 Transaction ID : PR2639774150492					
ELMHURST	IL	60126-2215	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		0.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle NELSON, ELLEN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 11882 TILDEN PLACE			06 30 2018					
City WELLINGTON	StateZip CodeFL33414-6056		Transaction ID : PR2639795350492 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) CInt Svc Acct Mgmt						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. SMITH, DELYLE, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address PO BOX 447			06 / D D / Y Y Y Y 2018					
City MT PROSPECT	State IL	Zip Code 60056-0447	Transaction ID : PR2639801550492					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
Name of Employer (for Individual) Optum Services, Inc	Occ Dir I	upation (for Individual) T	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 514.62	P/R Deduction (\$37.33 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional))	••••••	688.89					
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$\overline{\}$	NAME OF COMMITTEE (In Full)										
$\Big\rangle$	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	(C)							
A.	Full Name of Individual (Last, First, Middle Initia BARRAGREE, SHERI, , ,	l) or Full O	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 812 BARNES STREET				06	/	30			018	Y
		State TX	Zip Code					PR2640			2
	MCKINNEY		75069-5549	An	nount	of	Each F	Receipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С								57.6	9
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt		Me	emo	Item				
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		249.99	P/R	Ded	uctio	on (\$19	.23 Bi-W	/eekl	y)	
	Other (specify) v										
В.	Full Name of Individual (Last, First, Middle Initia WU, LAMBERT, , ,	l) or Full O	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 11008 CHERWELL COURT			The second secon	06	/	D 0 30) 18	Y
	City	State	Т	rans	acti	on ID :	PR2640	94616	650492		
	LAS VEGAS	NV	89144-4526	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С						-		115.3	8
	Name of Employer (for Individual) Health Plan of Nevada	Occupation (for Individual) Med Dir			Me	emo	Item				
	Receipt For:	Aggregate	Year-to-Date V		-						
	Other (specify) ▼		, 499.98	P/R	Dedu	uctic	on (\$38.	46 Bi-W	/eekl	y)	
— C.	Full Name of Individual (Last, First, Middle Initia STOW, CHRISTINA, , ,	l) or Full O	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 4709 ALTON PL NW				06		30			018 [°]	Y
	City	State	Zip Code		Frans	acti	on ID :	PR2640	0466	450492	2
	WASHINGTON	DC	20016-2041	An	nount	of	Each F	Receipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С			_		,	,		576.9	0
	Name of Employer (for Individual)	Осси	upation (for Individual)	- L	Me	emo	Item				
	United HealthCare Services Inc	VP E	External Affs								
	Receipt For:	Aggregate	Year-to-Date ▼		Dad		مم (¢10	2 20 D: 1	Maal		
	Other (specify)		2499.90		Deu	ucin	(10,000)	2.30 Bi-'	vee	KIY)	
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SCHEDULE A (FEC Form 3X) - - - - -

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12					
Any information copied from such Reports and or for commercial purposes, other than using t											
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle WAGNER, JOSEPH, , ,	Initial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 3405 MEREDITH RIDGE R			M M 06	M M / D D / Y Y Y Y Y							
City PHOENIX	State MD	Zip Code 21131-1456					2				
FEC ID number of contributing federal political committee.	С						0				
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Me	emo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 522.46	P/R Dedu	uction (\$44.0	11b 11c 12 11b 11c 12 14 15 16 ose of soliciting contributions from such committee. relipt 30 2018 D PR2640875850492 Each Receipt this Period 132.00 Item 132.00 Item 2018 on ID : PR2640876550492 132.00 Each Receipt this Period 115.38 Item 115.38 Item 115.38 Item 2018 on ID : PR2640876550492 115.38 Item 115.38 Item 115.38 Item 115.38						
Full Name of Individual (Last, First, Middle ESTESS, SHARON, , ,	Initial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 128 ASHBROOKE TRAIL			M M 06		/ Y		Y				
City MADISON	State MS	Zip Code 39110-6855					2				
FEC ID number of contributing federal political committee.	С						8				
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Me	emo Item							
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		499.98	P/R Dedu	iction (\$38.4	6 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle METKO, SARA, , ,	Initial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 23665 HIGHVIEW LANE	04-4-	Zip Ood-	06 T	30		2018					
City LAKEVILLE	State MN	Zip Code 55044-6025					2				
FEC ID number of contributing federal political committee.	С			, .			8				
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fax	Me	emo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Dedu	uction (\$38.4	16 Bi-We	ekly)					
SUBTOTAL of Receipts This Page (optional).					,	362.7	6				
TOTAL This Period (last page this line number	er only)										

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		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			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 MINTO, RYAN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1505 HERITAGE CLUB AV	/E		M M / D D / Y Y Y Y 06 30 2018									
City WAKE FOREST	State NC	Zip Code 27587-7698	Transaction ID : PR2640882450492 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		143.88									
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 ▼ 626.48	P/R Deduction (\$47.96 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. ADVANI, PROTIMA, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 7618 BRITTANY PARC CT	1	1	06 / D D / Y Y Y Y Y 2018									
City FALLS CHURCH	State VA	Zip Code 22043-2907	Transaction ID : PR2642024150492									
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) Rsch	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle STRAND, UTE, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 2323 SPRINGDALE DRIVE	State	Zip Code	06 / 00 / Y Y Y Y 2018									
City NASHVILLE	TN	37215-1134	Transaction ID : PR2642025550492 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		365.00									
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir,	upation (for Individual) Health Plan Operations	Memo Item									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			1085.78									
TOTAL This Period (last page this line numb	er 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	✗ 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 BRUECKMAN, BRIAN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 4601 PARK COMMONS DR #417			06 / Y Y Y Y Y 2018										
City SAINT LOUIS PARK	State MN	Zip Code 55416-4993	Transaction ID : PR2642029450492 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) ? UHC Operations	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I BRANNEN, RAYMOND, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6258 FORT PIERCE WAY			06 30 / Y Y Y Y Y 2018										
City HERRIMAN	State UT	Zip Code 84096-3977	Transaction ID : PR2642030750492										
FEC ID number of contributing	С		Amount of Each Receipt this Period										
federal political committee.	U												
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Training	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		, 328.07	P/R Deduction (\$24.76 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I MARTIN, STEPHANIE, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 7002 N VIA DE MANANA			06 / D D / Y Y Y Y 2018										
City SCOTTSDALE	State AZ	Zip Code 85258-3951	Transaction ID : PR2642818050492 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) Dir Strat Accts	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			766.56										
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											
			person for the purpose of soliciting contributions e 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 YOUNG, ALLISON, , ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 15222 ALMA MATER C	Т		06 30 / Y Y Y Y 2018											
City BATON ROUGE	State LA	Zip Code 70810-8389	Transaction ID : PR2642830350492 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		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 ▼ 973.62	P/R Deduction (\$117.40 Bi-Weekly)											
Full Name of Individual (Last, First, Mide B. LONG, RICHARD, , ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 2900 THOMAS AVE S UNIT 1623	1-		Model Model Model Model Yes Yes											
City MINNEAPOLIS	State MN	Zip Code 55416-4474												
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:		Year-to-Date ▼												
Other (specify) V		, 499.98	P/R Deduction (\$38.46 Bi-Weekly)											
Full Name of Individual (Last, First, Mide FOX, ELIZABETH, , ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 1021 NORTH GARFIEL #308		7.0.4												
City ARLINGTON	State VA	Zip Code 22201-2559	Transaction ID : PR2642832050492 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 ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)											
SUBTOTAL of Receipts This Page (option	lal)		756.03											
TOTAL This Period (last page this line nu	mber only)													

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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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										
, , , , , , , , , , , , , , , , , , ,	ng the name and a	ddress of any political committe	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, Mide JOHNSON, SUSAN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 13024 GRAY FOX TRA	IL												
City ROGERS	State MN	Zip Code 55374-8724											
FEC ID number of contributing federal political committee.	С		115.50										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Service	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)										
Full Name of Individual (Last, First, Mide CRESTA, BRIAN, , ,	lle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5 OGDEN LANE			06 / D D / Y Y Y Y 2018										
City MIDDLETON	State MA	Zip Code 01949-1669	Transaction ID : PR2642837550492 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 Bus Dev	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Mide C. WILLENBRING, LYNN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 7903 20TH STREET NO	DRTH		06 / D D / Y Y Y Y 2018										
City OAKDALE	State MN	Zip Code 55128-5325	Transaction ID : PR2642839350492 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		652.17										
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) T	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2173.90	P/R Deduction (\$217.39 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	al)		883.05										
TOTAL This Period (last page this line nu	mber only)												

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(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 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 Incorpo	rated PAC (UnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middl A. SIVERTSEN, DARREN, , , Mailing Address 11632 SLEEPY HEAVEN		Organization Name	Date of Receipt										
City	State	Zip Code	06 / 30 / 2018 Transaction ID : PR2643132650492										
LAS VEGAS	NV	89138-7557	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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middl B. SOCZYNSKI, PAUL, , ,	Date of Receipt												
Mailing Address 915 SOUTH 91ST STRE	ET		Model / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City WEST ALLIS	State WI	Zip Code 53214-2848											
FEC ID number of contributing federal political committee.	C		112.50										
Name of Employer (for Individual) United HealthCare Services Inc		eupation (for Individual) ec Dir	P/R Deduction (\$37.50 Bi-Weekly)										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 512.50											
Full Name of Individual (Last, First, Middl C. CRAGLE, STEVE, , ,	le Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 6604 MOHAWK TRAIL	1		06 / D D / Y Y Y Y Y 2018										
City EDINA	State MN	Zip Code 55439-1030	Transaction ID : PR2643200650492										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 745.50										
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Bus	upation (for Individual) Segment CMO	P/R Deduction (\$248.50 Bi-Weekly)										
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1760.22											
SUBTOTAL of Receipts This Page (optiona	al)		973.38										
TOTAL This Period (last page this line num	nber 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										
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 puddess of any political committed	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	AC)										
Full Name of Individual (Last, First, Middle ANEELY, MARC, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1159 BUFFALO RIDGE RI	C		06 30 / Y Y Y Y										
City CASTLE PINES	State CO	Zip Code 80108-8190	Transaction ID : PR2643203150492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. HAMMOND, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 244 NE 59TH TERR			06 / D D / Y Y Y Y 06 30 2018										
City TOPEKA	State KS	Zip Code 66617-1661	Transaction ID : PR2644644850492 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) d Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. MCKOY, PHILIP, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 927 LINCOLN AVE	State	Zip Code	06 / 0 / 2018 Transaction ID : PR2644651650492										
SAINT PAUL	MN	55105-3149	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) Grp CIO	P/R Deduction (\$192.30 Bi-Weekly)										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90											
SUBTOTAL of Receipts This Page (optional)			807.66										
TOTAL This Period (last page this line numb	er only)												

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	✗ 11a 11b 11c 12 13 14 15 16 17											
			e to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full)	<u> </u>	·····												
UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Mic A	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 5251 HUMBOLDT AVE	S		06 / Y Y Y Y 06 30 2018											
City MINNEAPOLIS	State MN	Zip Code 55419-1121	Transaction ID : PR2644659650492 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: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)											
Full Name of Individual (Last, First, Mic B. MISTRY, RASHMITA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 6658 WATERTON CIR	CLE		Mode Job / Job / 2018 Transaction ID : PR2645169150492 Amount of Each Receipt this Period											
City MUKILTEO	State WA	Zip Code 98275-4805												
FEC ID number of contributing federal political committee.	С		576.90											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Mic C. NEALE, MATTHEW, , ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 11380 WILD HERON F	РТ		06 / 0 / Y Y Y Y 06 30 2018											
City EDEN PRAIRIE	State MN	Zip Code 55347-4729	Transaction ID : PR2645175250492 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	Occi VP I	upation (for Individual) T	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)											
SUBTOTAL of Receipts This Page (option	nal)		749.97											
TOTAL This Period (last page this line nu	umber only)													

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	□ 1 7						
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 PA	AC)										
Full Name of Individual (Last, First, Middle II A. MAHRT, JONATHAN, , ,	nitial) or Full O	rganization Name	Date o	f Receipt	t								
Mailing Address 4035 W 65TH ST APT 127			06		30 / Y	ү ү 2018	Y						
City EDINA	State MN	Zip Code 55435-1749	Transaction ID : PR2645176950492 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) 9 Ops	М	emo Iten	n								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1388.85	P/R Ded	luction (\$	277.77 Bi-W	Veekly)							
Full Name of Individual (Last, First, Middle In B. HOFFMAN, SHERRI, , ,	nitial) or Full O	rganization Name	Date o	f Receipt	t								
Mailing Address 3409 DEEP WILLOW AVEN				M M / D D / Y Y Y Y									
City PIKESVILLE	State MD	Zip Code 21208-3116		Transaction ID : PR2646294650492 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) CInt Svc Acct Mgt	м	emo Iten	n								
Receipt For:	Aggregate	Year-to-Date ▼		1									
Primary General Other (specify) ▼		499.98	P/R Ded	luction (\$	38.46 Bi-We	eekly)							
Full Name of Individual (Last, First, Middle II STANKIEWICZ, DENNIS, , ,	nitial) or Full O	rganization Name	Date o	f Receipt	t								
Mailing Address 17761 WEAVER LAKE DRIV	/E		06		30 / Y	2018	Y						
City MAPLE GROVE	State MN	Zip Code 55311-1328			D : PR2646 n Receipt th		2						
FEC ID number of contributing federal political committee.	С			, in Each		0.0)0						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	M	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.90	P/R Dec	luction (\$	0.00 Bi-We	ekly)							
SUBTOTAL of Receipts This Page (optional)						948.6	69						
TOTAL This Period (last page this line number	r only)				,								

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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 be to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Midd A. WELSH, MARY, , ,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 4532 BLUEBELL TRAIL	SOUTH		M M / D D / Y Y Y Y 06 30 2018										
City MEDINA	State MN	Zip Code 55340-4575	Transaction ID : PR2646306950492 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) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$500.00 Bi-Weekly)										
Full Name of Individual (Last, First, Midd B. ZENICK, GEOFFREY, , ,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 7714 TWISTED OAKS C			06 / 06 / Y Y Y Y Y 06 2018										
City DALLAS	State TX	Zip Code 75231-4711	Transaction ID : PR2698410850492 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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Midd C. DAVIS, MARK, , ,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 14907 SE 138TH PL RE			06 / D D / Y Y Y Y 2018										
City RENTON	State WA	Zip Code 98059-6757	Transaction ID : PR2698418150492 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		1000.00										
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 ▼ 1000.00	P/R Deduction (\$1000.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	al)		1615.38										
TOTAL This Period (last page this line num	nber only)												

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a		_	11b 14		11c	12							
	y information copied from such Reports and Stat for commercial purposes, other than using the na					or th		ırp	ose			g contribu							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)														
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GROSSMAN, BEVERLY, , ,							Date of Receipt											
	Mailing Address 5 BROOKSIDE AVE	State		Zip Code	06 30 2018 Transaction ID : PR2699179850492														
	MENANDS	NY		12204-2301															
	FEC ID number of contributing federal political committee.	С	1		Amount of Each Receipt this Period 130.41 Memo Item														
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) t Affs															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 448.92		/R De	educ	tio	on (\$	43.4	7 Bi-W	eekly)							
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SELIG, JOHN, , , Mailing Address 6406 WESTMINSTER							lec /	ceipt	D	/ Y	YY	Y						
										30	L	2018							
	City BENTON	State AR	Transaction ID : PR2699184650492 Amount of Each Receipt this Period																
	FEC ID number of contributing federal political committee.	С		230.76 Memo Item															
	Name of Employer (for Individual) Optum Services, Inc	Occ VP,																	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 999.96	P/	P/R Deduction (\$76.92 Bi-Weekly)													
с.	Full Name of Individual (Last, First, Middle Initial AHLSTROM, ALEXIS, , ,) or Full O	rga	nization Name		Date	of R	lec	ceipt	:									
	Mailing Address 3421 OAKWOOD TERRACE	1				06 30 / Y Y Y Y													
	City WASHINGTON	State DC		Zip Code 20010-1819	-							1871504 nis Period							
	FEC ID number of contributing federal political committee.	С					, ,		,	115	_								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Gov		Memo Item															
	Receipt For: Primary General Other (specify)	Aggregate	ggregate Year-to-Date ▼ 498.68						P/R Deduction (\$38.36 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)								,		9	476	.25						
Т	OTAL This Period (last page this line number on	ly)																	

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 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	United Health Group P/	4C)										
Full Name of Individual (Last, First, Middle I A. ZHOU, JINGXIN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 12011 FAIRVIEW CT			M M / D D / Y Y Y Y 06 30 2018										
City MINNETONKA	State MN	Zip Code 55343-4516	Transaction ID : PR2699187850492										
FEC ID number of contributing	_		Amount of Each Receipt this Period										
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 ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
		Aga 1 Aga 1 Aga 1											
Full Name of Individual (Last, First, Middle I FARRELL, ELIZABETH, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 18777 THE PINES			06 30 2018 Transaction ID : PR2699980050492 Amount of Each Beceint this Period										
City EDEN PRAIRIE	State MN	Zip Code 55347											
FEC ID number of contributing	_	00047	Amount of Each Receipt this Period										
federal political committee.	С		576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I C. PERRY, KIMBERLY, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5045 LINDELL BLVD			06 30 2018										
City SAINT LOUIS	State MO	Zip Code 63108-1219	Transaction ID : PR2700918050492 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) 1ed Dir	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 205.26	P/R Deduction (\$13.90 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			733.98										
TOTAL This Period (last page this line numbe	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)

PAGE 180 OF

	EMIZED RECEIPTS			Detailed Summary Page	×						,					
	y information copied from such Reports and State for commercial purposes, other than using the na								se of	soli						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated							unc			Such	commu				
A.	Full Name of Individual (Last, First, Middle Initial) MCSWEENEY, ERIN, , ,) or Full O	rgar	nization Name		Date of Receipt										
	Mailing Address 10 NOUVELLE WAY SUITE 805				M M / D D / Y Y Y Y 06 30 2018											
	City NATICK	State MA		Zip Code 01760-1570	A	Transaction ID : PR2701818050492 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		•	ion (for Individual) kt Grp CHRO		Memo Item										
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Initial) FRINGER, TRICIA, , ,) or Full O	rgar	nization Name	C	Date of	Re	cei	pt							
	Mailing Address 2809 STANFORD AVE					06 / 0 / Y Y Y Y Y 06 2018										
	City DALLAS	State TX		Zip Code 75225-7917				-				1865049 s Period				
	FEC ID number of contributing federal political committee.	С				576.90										
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Inderwriting		Memo Item										
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2499.90	P/	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial)) or Full O		Date of	Re	cei	pt									
	Mailing Address 3325 W 18TH AVENUE	1		1		^M 06	/	L	30	J.		2018 Y				
	City DENVER	State CO		Zip Code 80204-1681	A							1965049 s Period				
	FEC ID number of contributing federal political committee.	С				_		y			y	271.	14			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir (•	ion (for Individual) Affs		Memo Item										
	Receipt For: // Primary General Other (specify)	r-to-Date ▼ 1174.94	P/R Deduction (\$90.38 Bi-Weekly)													
s	UBTOTAL of Receipts This Page (optional)			•	[,			9	1424.	94			
т	OTAL This Period (last page this line number onl	y)		••••••				,			-					

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

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	Use separate schedule(s)	(ch	(check only one)							
111	EMIZED RECEIPTS		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 n									
<u> </u>	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)						
Α.	Full Name of Individual (Last, First, Middle Initia BRUCE, JAMIE, , ,	l) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 336 THOREAU BLVD	1			^M 06	/	D D 30	/ Y	2018	Y
	O FALLON	State MO	Zip Code 63366-7451						32305049 is Period	2
	FEC ID number of contributing federal political committee.	С					,		576.	90
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 2499.90		P/R Dedu	uctic	on (\$192	2.30 Bi-W	′eekly)	
в.	Full Name of Individual (Last, First, Middle Initia SPARKS, KEVIN, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt			
	Mailing Address 10681 S CEDAR NILES BLVD						30	/ Y	2018	Y
	City OLATHE	State KS	Zip Code 66061-7415						2555049 is Period	2
	FEC ID number of contributing federal political committee.								288.4	45
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item			
		Aggregate	lear-to-Date ▼							
	Other (specify) ▼		1249.95		P/R Dedu	ıctic	on (\$96.′	15 Bi-We	ekly)	
С.	Full Name of Individual (Last, First, Middle Initia ROTH, TROY, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt			
	Mailing Address 7982 WOOD COURT				06	/	D D D 30	L	2018 Y	
	City FRISCO	State TX	Zip Code 75034-8203				-		32895049 is Period	2
	FEC ID number of contributing federal political committee.	С					,	. ,	115.:	38
	Name of Employer (for Individual) Optum360 Services Inc		pation (for Individual) en Mgmt		Me	emo	Item			
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			•			, ,		980.	73
Т	OTAL This Period (last page this line number on	ly)		•				-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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IT.			Use separate schedule(s)	(che	ck only	/ on	e)	L			
	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				or the p		oose of	soliciting	contribu	tions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P	AC)							
A.	Full Name of Individual (Last, First, Middle Initia KRAMER, NANCY, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 5701 STONE TRACE DRIVE				06 30 2018						
	City MASON	State OH	Zip Code 45040-8315	A					50145049 is Period	2	
	FEC ID number of contributing federal political committee.	C					7		115.	38	
	Name of Employer (for Individual) Optum Services, Inc	Occu Dir F	upation (for Individual)		Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/	ſR Dedu	uctio	on (\$38.	46 Bi-We	ekly)		
B.	Full Name of Individual (Last, First, Middle Initia	al) or Full Oi	rganization Name		Date of	Re	ceipt				
	Mailing Address 1245 4TH ST SW APT E709	01-1-		м м 06	/	D D 30	/ Y	2018	Y		
	City WASHINGTON	State DC	Zip Code 20024-2318						0385049 is Period	2	
	FEC ID number of contributing federal political committee.	C							57.	69	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99				uctio	on (\$19.2	23 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initia BRENNER, JEFFREY, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 4610 CEDAR AVE APT 301				м м 06	/	D D D 30	L	2018 [°]		
	City PHILADELPHIA	State PA	Zip Code 19143-2118	A			-		50635049 is Period	2	
	FEC ID number of contributing federal political committee.	С			_		y	, , ,	696.	00	
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Integrated Hlth Human Svs	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1970.14]	/R Dedi	uctio	on (\$232	2.00 Bi-W	/eekly)		
	UBTOTAL of Receipts This Page (optional)		,		-	_	, . 		869.)7	
	OTAL This Period (last page this line number of	···y/·····			-	- 4	1	-	1		

SCHEDULE A (FEC Form 3X)

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T	Use separate schedule(s)	Use separate schedule(s)	(ch	eck only	one	e))			
	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					ourpo				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated									
	Full Name of Individual (Last, First, Middle Initia MORRIS, MITCHELL, , ,	al) or Full Or	ganization Name		Date of	Rece	eipt			
	Mailing Address 200 CONGRESS AVE 47Y	State			06 30 2018					
	City AUSTIN		Zip Code 78701-4507						50845049 is Period	2
	FEC ID number of contributing federal political committee.	С				-7		- 4P-	0.0)0
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Advisory Svc		Me	mo I	ltem			
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 4999.90		P/R Dedu	ictior	n (\$0.00) Bi-Wee	ekly)		
	Full Name of Individual (Last, First, Middle Initia MERZLICKER, CAREY, , ,	al) or Full Or	ganization Name		Date of	Rece	eipt			
	Mailing Address 950 BENTLEY PARK CIRCLE			06	/	D D 30	/ Y	2018	Y	
	City O FALLON	State MO	Zip Code 63368-8022	-					46950492 is Period	2
	FEC ID number of contributing federal political committee.	С		Amount				108.0	00	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	ipation (for Individual) Fin		Me	mo I	ltem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 532.00	P	9/R Dedu	ction	n (\$36.0	00 Bi-We	ekly)	
	Full Name of Individual (Last, First, Middle Initia HARVEY, CATHERINE, , ,	al) or Full Or	ganization Name		Date of	Rece	eipt			
	Mailing Address 541 E ERIE ST UNIT 602				06 ^M	1	D D 30		2018	
	City MILWAUKEE	State WI	Zip Code 53202-6251	_					53705049 is Period	2
	FEC ID number of contributing federal political committee.	С				y		, ,	288.4	15
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1057.65]	P/R Dedu	uctior	n (\$96.1	15 Bi-We	ekly)	
SI	JBTOTAL of Receipts This Page (optional)			•					396.4	15
т	OTAL This Period (last page this line number or	nly)	b	•						

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

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		Use separate schedule(s)	(ch	(check only one)						
	MIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12	
	information copied from such Reports and Sta									
	or commercial purposes, other than using the n	ame and a	ddress of any political committee	to so	olicit con	itrid	utions t	rom sucr		ee.
	JnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)						
	ull Name of Individual (Last, First, Middle Initia YOUNG, DAVID, , ,	l) or Full O	rganization Name	Date of Receipt						
N	Iailing Address 654 CHISWELL CT				06 30 2018					Y
	Sity BRENTWOOD	State TN	Zip Code 37027-3109	_					6 5545049 iis Period	2
	EC ID number of contributing ederal political committee.	С							789.	45
C	lame of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	Item			
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1578.90	F	P/R Dedu	uctio	on (\$26	3.15 Bi-W	/eekly)	
Б	ull Name of Individual (Last, First, Middle Initia ROLLINS, CARISSA, , ,	l) or Full O	rganization Name		Date of	Re	ceipt			
_	Aailing Address 6805 CHEYENNE TRAIL	Chata		M M 06	/	D D D 30		ү ү 2018	Y	
	Sity EDINA	State MN	Zip Code 55439-1158				-		18895049 iis Period	2
F	EC ID number of contributing ederal political committee.	С				U			576.	90
	lame of Employer (for Individual) Inited HealthCare Services Inc	Occu VP I	upation (for Individual) IT		Me	emo	Item			
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	F	P/R Dedu	ıctic	on (\$192	2.30 Bi-W	/eekly)	
	ull Name of Individual (Last, First, Middle Initia HOROHO, PATRICIA, , ,	l) or Full O	rganization Name		Date of	Re	ceipt			
_	Aailing Address 13516 COMPTON ROAD				^M 06	/	30		ү ү 2018	Y
	Sity CLIFTON	State VA	Zip Code 20124-1203						19465049 iis Period	2
	EC ID number of contributing ederal political committee.	С			<u> </u>		y .	. ,	666.	66
C	lame of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		Me	emo	ltem			
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 666.66	P/R Deduction (\$333.33 Bi-Weekly)						
SU	BTOTAL of Receipts This Page (optional)		•				, .	. ,	2033.)1
то	TAL This Period (last page this line number on	ly)		-				-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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			Use separate schedule(s)	(ch	(check only one)						
	MIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12] 17
	v information copied from such Reports and Sta for commercial purposes, other than using the r										
<u> </u>	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)							
	Full Name of Individual (Last, First, Middle Initia DELANY, ANDREW, , ,	al) or Full Or	rganization Name	Date of Receipt							
-	Mailing Address 209 GARLAND AVENUE				06 30 2018						
(City DECATUR	State GA	Zip Code 30030-4940					PR27041 eceipt th			
	FEC ID number of contributing rederal political committee.	С						-	57	6.90	
I	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs		M	emo	Item				
I	Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 2499.90]	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)		
B. _	Full Name of Individual (Last, First, Middle Initia HAYEK, ANDREW, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
-	Mailing Address 500 ADAMS AVENUE			06	/	^D 30	/ Y	2018	Y		
	City GLENCOE	State IL	Zip Code 60022-1865					PR27050		-	
-	FEC ID number of contributing rederal political committee.	С						eceipt th		6.90	
	Name of Employer (for Individual) Dptum Services, Inc	Occupation (for Individual) Bus Segment CEO			Memo Item						
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.20	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia SHARFF, RICHARD, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
I	Mailing Address 508 RUMSON ROAD				06	/	D D D 30	/ Y	2018	Y	1
(City BIRMINGHAM	State AL	Zip Code 35209-4312					PR27050 eceipt th			
	FEC ID number of contributing iederal political committee.	С			<u> </u>		y .	y	57	6.90	
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Segment Gen Counsel		М	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
รเ	JBTOTAL of Receipts This Page (optional)			•			, .	,	173	0.70	
тс	TAL This Period (last page this line number or	nly)		•						-	

SCHEDULE A (FEC Form 3X) •

Use separate schedule(s)

FOR LINE NUMBER:

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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 Sta or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (UnitedHealth Group PA	.C)						
Full Name of Individual (Last, First, Middle Initia BUNTEN, BRIAN, , ,	al) or Full C	Organization Name	Date of Receipt						
Mailing Address 401 TATLOW DR			06 / D D / Y Y Y Y 2018						
City COLUMBIA	State MO	Zip Code	Transaction ID : PR2705070550492						
	INIC	65203-6130	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		178.29						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For:		Year-to-Date V	_						
Primary General Other (specify) ▼		727.20	P/R Deduction (\$59.43 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initia B. SPADE, NATHAN, , ,	al) or Full C	Organization Name	Date of Receipt						
Mailing Address 12 WARWICK CIRCLE			06 30 2018						
City MECHANICSBURG	State PA	Zip Code 17050-2643	Transaction ID : PR2705987050492 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) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 999.96	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name	Date of Receipt						
Mailing Address 180 HIGH PARK LANE #433			06 / D D / Y Y Y Y 06 30 2018						
	State MD	Zip Code	Transaction ID : PR2705987450492						
SILVER SPRING		20910-3198	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 ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			697.50						
TOTAL This Period (last page this line number o		F							

SCHEDULE A (FEC Form 3X) DEAEIDTA

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			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 STILLO, KATHLEEN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 15 HENDERSON AVE			06 30 / Y Y Y Y 2018						
City PRINCETON	State NJ	Zip Code 08540-2607	Transaction ID : PR2706451050492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		150.00						
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 ▼ 350.00	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BARTHOLET, DANIEL , , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5918 VALEWOOD DRIVE			06 30 / Y Y Y Y 2018						
City MINNETONKA	State MN	Zip Code 55345-6545	Transaction ID : PR2706451150492 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) Tax	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MULDOON, ALLISON, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2500 CLARENDON BLVD APT 435			06 / D D / Y Y Y Y 2018						
City ARLINGTON	State VA	Zip Code 22201-3828	Transaction ID : PR2706452750492 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) t Affs Assc Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			786.90						
TOTAL This Period (last page this line numb	er only)								

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Use separate schedule(s)

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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 State for commercial purposes, other than using the nar			erson for the purpose of soliciting contributions						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	AC)						
Α.	Full Name of Individual (Last, First, Middle Initial) MADRID, MERLE, , ,	or Full O	Organization Name	Date of Receipt						
	Mailing Address 514 SOUTH 3RD STREET	Otata	Zin Oode	06 / D D / Y Y Y Y 2018						
	City COLUMBUS	State OH	Zip Code 43215-5756	Transaction ID : PR2740510350492						
		С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) • Govt Affs	Memo Item						
	Receipt For: A Primary General Other (specify) ▼	ggregate	e Year-to-Date ▼ 1248.00	P/R Deduction (\$96.00 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) KORPMAN, RALPH, , ,	or Full O	Organization Name	Date of Receipt						
	Mailing Address 102 WOODMONT BLVD SUITE 2			06 / D D / Y Y Y Y 06 2018						
	City NASHVILLE	State TN	Zip Code 37205-2216	Transaction ID : PR2740514650492 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		0.00						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) hief Scientific Officer	Memo Item						
	Receipt For: A Primary General Other (specify) ▼	ggregate	e Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial) MATHIS, BRIAN, , ,	or Full O	Organization Name	Date of Receipt						
	Mailing Address 4632 RESERVOIR ROAD NW			06 / D D / Y Y Y Y 06 2018						
	City WASHINGTON	State DC	Zip Code 20007-1917	Transaction ID : PR2740758750492 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		cupation (for Individual) P Bus Dev	Memo Item						
	Receipt For: A Primary General Other (specify)	ggregate	e Year-to-Date ▼ 1760.22	P/R Deduction (\$248.50 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			1033.50						
т	OTAL This Period (last page this line number only	r)								

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 189 OF

	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
> UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middle A. MUHLBAUER, CYNTHIA, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 5211 TIMBERRIDGE DR			06 30 2018				
City	State	Zip Code	Transaction ID : PR2748019550492				
PAPILLION	NE	68133-2781	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		157.89				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
United HealthCare Services Inc	Dir	Gen Mgmt					
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		315.78	P/R Deduction (\$52.63 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. FEHR, STEPHANIE, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 6601 BLACKFOOT PASS			06 / Y Y Y Y Y 2018				
City EDINA	State MN	Zip Code 55439-1103	Transaction ID : PR2748020550492				
		33439-1103	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		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 🔻					
Primary General Other (specify) ▼		1578.90	P/R Deduction (\$263.15 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. PRONOVOST, PETER, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 6960 WOODLANDS LANE			06 / Y Y Y Y Y 06 30 2018				
City SOLON	State OH	Zip Code 44139-4664	Transaction ID : PR2750286350492				
		44139-4004	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		789.45				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Clin Off	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1578.90	P/R Deduction (\$263.15 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			1736.79				
TOTAL This Period (last page this line numb	er only)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 190 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIFIƏ		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 using	nd Statements ma g the name and a	l ay not be sold or used by any p address of any political committe	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. SIMON, JOHN, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1388 DIAMOND COURT			06 30 2018						
City PITTSBURGH	State PA	Zip Code 15241-1220	Transaction ID : PR2754663250492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		789.45						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1578.90	P/R Deduction (\$263.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. EHLERT, KENNETH, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 10431 TOLEDO DR N			06 / Y Y Y Y Y 2018						
City BROOKLYN PARK	State MN	Zip Code 55443-4501	Transaction ID : PR2755316150492 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		4999.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middl	e Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address			M = M / D = D / Y = Y = Y						
City	State	Zip Code	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify)		Year-to-Date]						
SUBTOTAL of Receipts This Page (optiona	l)		5789.35						
TOTAL This Period (last page this line num	ber only)		194878.76						

SCHEDULE B (FEC Form 3X)							NUMBER: PAGE 191 OF 2					
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c	heck	c only 21b	one) 22 🗶 23 26 27					
		Detailed	Summary Page		\square	28a	28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_							
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	ip F	PAC))					
A.	Full Name (Last, First, Middle Initial) Dr. Raul Ruiz For Congress						Date of Disbursement					
	Mailing Address PO Box 3433						06 / D D / Y Y Y Y 06 04 2018					
	City	State	Zip Code				FEC Identification Number					
	Palm Desert Purpose of Disbursement	CA	92261									
	Contribution			C)11		C C00502575					
	Candidate Name			Cate	egor	v/	Transaction ID : 42266116 Amount of Each Disbursement this Period					
	Ruiz, Raul, , Rep.,				ype	<i>y</i> ,						
		ement For: 2					2500.00					
	Senate x President	Primary Other (spe	General				Contribution					
	State: CA District: 36		city) 🔻				Memo Item					
	Full Name (Last, First, Middle Initial)											
В.	Jim Costa for Congress						Date of Disbursement					
							M M / D D / Y Y Y Y 06 04 2018					
	Mailing Address 2037 W Bullard Avenue, #355											
	City	State CA	Zip Code				FEC Identification Number					
	Fresno Purpose of Disbursement	CA	93711-1200			_	C C00391029					
	Contribution			011			Transaction ID : 42266118					
	Candidate Name			Cate	egor	y/	Amount of Each Disbursement this Period					
	Costa, James 'Jim', Manuel, Rep.,			T	ype		4500.00					
		ement For: ; Primary	2018 General				1500.00					
	President	Other (spe					Contribution					
	State: CA District: 16						Memo Item					
~	Full Name (Last, First, Middle Initial)						Date of Disbursement					
0.	Julia Brownley For Congress											
	Mailing Address PO Box 2018						06 04 2018					
	City Thousand Oaks	State CA	Zip Code 91358				FEC Identification Number					
	Purpose of Disbursement	-		-	-		C C00513077					
	Contribution			C	011		Transaction ID : 42266119					
	Candidate Name				egor	y/	Amount of Each Disbursement this Period					
	Brownley, Julia, , Rep.,	ement For: 2	2019	T	ype		1000.00					
	Senate Disburse	Primary	General									
	President	Other (spe					Contribution Memo Item					
	State: CA District: 26	۔ 										
s	UBTOTAL of Disbursements This Page (optional).					•	5000.00					
\vdash						_						
т	OTAL This Period (last page this line number only	/)					, ,					

S	CHEDULE B (FEC Form 3X)			F	DR I	INF	NUMBER: PAGE 192 OF 226
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			heck	only	/ one)
			Summary Page			21b 28a	22 X 23 26 27 28b 28c 29 30b
Ar	ny information copied from such Reports and State	ements mav	not be sold or use	l ed bv			
	for commercial purposes, other than using the na						
\mathbb{N}	NAME OF COMMITTEE (In Full)			_	_		
/	UnitedHealth Group Incorporated	PAC (Ur	litedHealth C	irou	рΡ	AC	,)
<u> </u>	Full Name (Last, First, Middle Initial)						
Α.	Julia Brownley For Congress						Date of Disbursement
	Mailing Address PO Box 2018					06 04 2018	
	City	State	Zip Code				FEC Identification Number
	Thousand Oaks	se of Disbursement					
	Purpose of Disbursement Contribution			0	11	ЪÌ	C C00513077
	Candidate Name			<u></u>	egory		Transaction ID : 42266120 Amount of Each Disbursement this Period
	Brownley, Julia, , Rep.,				ype	/	Amount of Each Dispursement this Ferror
		ement For:					4000.00
	Senate President	Primary Other (spe	cifu)				Contribution
	State: CA District: 26		oliy) v				Memo Item
	Full Name (Last, First, Middle Initial)						
В.	Pete Aguilar For Congress						Date of Disbursement
	Mailing Address PO Box 10954						06 04 2018
	City	State CA	Zip Code				FEC Identification Number
	San Bernardino Purpose of Disbursement	011 Category/			_	_	C C00510461
	Contribution)11		Transaction ID : 42266122
	Candidate Name					Amount of Each Disbursement this Period	
	Aguilar, Pete, , Rep., Office Sought: x House Disburse	ement For:	2018	L)	ype		2500.00
	Senate	Primary					Contribution
	President	Other (spe					Memo Item
	State: CA District: 31						
C.	Full Name (Last, First, Middle Initial) Susan Davis for Congress						Date of Disbursement
-							M M / D D / Y Y Y Y
	Mailing Address PO Box 84049						06 04 2018
	City See Diago	State CA	Zip Code 92138				FEC Identification Number
	San Diego Purpose of Disbursement		32130	_	_		C C00344671
	Contribution			0	11		Transaction ID : 42266123
	Candidate Name				egory	/	Amount of Each Disbursement this Period
	Davis, Susan, A., Rep., Office Sought: x House Disburse	ement For:	2018	ſ	ype		2000.00
	Senate	Primary	General				Contribution
	President	Other (spe	cify) 🔻				Memo Item
_	State: CA District: 53						
s	UBTOTAL of Disbursements This Page (optional)						8500.00
 _	OTAL This Deviad (last page this line quarter a	۵					
11	OTAL This Period (last page this line number only	/)			•••••		

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 193 OF 226		
	EMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b		
	y information copied from such Reports and State for commercial purposes, other than using the na						
\setminus	NAME OF COMMITTEE (In Full)			_			
$ \rangle$	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth	Group PAC			
Α.	Full Name (Last, First, Middle Initial) Vargas for Congress				Date of Disbursement		
	Mailing Address 330 Encinitas Boulevard Suite 101	06 04 2018					
	City	State CA	Zip Code		FEC Identification Number		
	Encinitas Purpose of Disbursement	UA	92024		C C00497321		
	Contribution			011	Transaction ID : 42266125		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	Vargas, Juan, C., Rep.,			Туре	5000.00		
	Office Sought: X House Disburse Senate X	ement For: Primary	2018 General		5000.00		
	President	Other (spe			Contribution		
	State: CA District: 51				Memo Item		
_	Full Name (Last, First, Middle Initial)						
В.	Himes For Congress				Date of Disbursement		
	Mailing Address 857 Post Road, #312		06 / 04 / Y Y Y Y 2018				
	City		FEC Identification Number				
	Fairfield Purpose of Disbursement	СТ	06824				
	Contribution	011	C C00434191				
	Candidate Name			Category/ Type	Transaction ID : 42266134 Amount of Each Disbursement this Period		
	Himes, James, , Rep.,						
		ement For:			1000.00		
	Senate x President	Primary Other (spe	General		Contribution		
	State: CT District: 04		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;		Memo Item		
_	Full Name (Last, First, Middle Initial)				Data of Diaburgament		
С.	Bilirakis for Congress				Date of Disbursement		
	Mailing Address PO Box 606				06 / <u>21</u> / <u>Y Y Y Y</u> <u>2018</u>		
	City	State	Zip Code		FEC Identification Number		
	Tarpon Springs Purpose of Disbursement	FL	34688-0606		C C00409534		
	Contribution			011	C C00408534		
	Candidate Name			Category/	Transaction ID: 42329456 Amount of Each Disbursement this Period		
	Bilirakis, Gus, Michael, Rep.,			Туре			
	Office Sought: K House Disburse		2500.00				
	President	Primary Other (spe	K General (€		Contribution		
	State: FL District: 12		<i>37</i> •		Memo Item		
s	UBTOTAL of Disbursements This Page (optional)			•••••	8500.00		
Т	OTAL This Period (last page this line number only	y)		••••••	, ,		

SCHEDULE B (FEC Form 3X)			F	DR L	_INE N	IUMBER	:			PAGE	194 OF 226
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			heck	only o	one)		00			707
		Summary Page			21b 28a	22 28b		23 28c	20		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	itedHealth C	Grou	p F	PAC)						
Full Name (Last, First, Middle Initial) A. Charlie Crist For Congress								burse		V	YYYY
Mailing Address PO Box 1547							ĺ	2			2018
City	State FL	Zip Code				FEC Id	lentifi	catior	Numl	ber	
St. Petersburg Purpose of Disbursement	FL	33731			_	С	C001	59006	7		-
Contribution			0	11			1		-	22045	
Candidate Name			Cate	egor	v/				ID : 42 Disbur		nt this Period
Crist, Charlie, , Rep.,				ype							0500.00
Office Sought: X House Disburse Senate X President	ement For: 2 Primary Other (spe	General					mol		Contrib	ution	2500.00
State: FL District: 13	1					IVIE	emo l	lem			
Full Name (Last, First, Middle Initial) B. Debbie Wasserman Schultz For C Mailing Address 1071 Twin Branch Ln	Debbie Wasserman Schultz For Congress							Date of Disbursement			
City Weston	State Zip Code FL 33326						lentifi	catior	Numl	oer	
Purpose of Disbursement Contribution	C)11		C C00385773 Transaction ID : 42329463							
Candidate Name		Category/ Type									nt this Period
Wasserman Schultz, Debbie, , ,							1500.00				
	ment For:										1500.00
State: FL District: 23	Primary Other (spe	Cify)				Me	emo l		Contrib	oution	
Full Name (Last, First, Middle Initial) C. Stephanie Murphy For Congress						Date of Disbursement					
Mailing Address PO Box 205						м м 06	/	D 2			2018
City Winter Park	State FL	Zip Code 32790				FEC ld	lentifi	catior	Numl	oer	
Purpose of Disbursement Contribution			0	11	٦	C	1. A 1	62044 ction	13 ID : 4 2	32946	64
Candidate Name Murphy, Stephanie, , Rep.,				egory /pe	y/						nt this Period
											500.00
State: FL District: 07	Primary Other (spe	General cify) ▼				Me	emo l		Contrik	oution	
						_					4500.00
SUBTOTAL of Disbursements This Page (optional).						÷			-	y	
TOTAL This Period (last page this line number only	/)							7		,	

SCHEDULE B (FEC Form 3X)				NE NUMBER: PAGE 195 OF 226		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		only one) 21b 22 ¥ 23 26 27 28a 28b 28c 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 (Ur	nitedHealth G	Group P	AC)		
Full Name (Last, First, Middle Initial) A. Stephanie Murphy For Congress				Date of Disbursement		
Mailing Address PO Box 205	06 21 2018					
City Winter Park Purpose of Disbursement	State FL	Zip Code 32790		FEC Identification Number		
Contribution			011	C C00620443 Transaction ID : 42329465		
Murphy, Stephanie, , Rep.,	ment For:	2018	Category Type	Amount of Each Disbursement this Period 2500.00		
State: FL District: 07	Primary Other (spe	x General		Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Val Demings For Congress Mailing Address PO Box 536926	Date of Disbursement					
City	FEC Identification Number					
Orlando Purpose of Disbursement Contribution	011	C C00590489 Transaction ID : 42329467				
••	ement For: Primary Other (spe	General	Category Type	Amount of Each Disbursement this Period 1000.00 Contribution Memo Item		
State: FL District: 10 Full Name (Last, First, Middle Initial)	a					
C. Schneider For Congress Mailing Address PO Box 1318				Date of Disbursement		
City Deerfield	State IL	Zip Code 60015		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name Schneider, Brad, , Rep.,	Purpose of Disbursement Contribution Candidate Name					
Office Sought: House Disburse Senate President State: IL District: 10	ement For: Primary Other (spe	x General		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional).				8500.00		
TOTAL This Period (last page this line number only	/)			, ,		

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 196 OF 226			
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 na							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	roup PAC)			
Full Name (Last, First, Middle Initial) A. Excelsior PAC				Date of Disbursement			
Mailing Address 824 S Milledge Avenue Suite 101	06 21 2018						
City Athens	State GA	Zip Code 30605		FEC Identification Number			
Contribution	UT						
Excelsior PAC	ment For:		Category/ Type	Amount of Each Disbursement this Period 5000.00			
Senate President State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item			
Full Name (Last, First, Middle Initial) B. Terri Sewell For Congress Mailing Address P.O. Box 1964	Date of Disbursement						
City Birmingham Purpose of Disbursement Contribution	FEC Identification Number						
Candidate Name Sewell, Terri, , Rep.,	ment For: ; Primary Other (spec	x General	011 Category/ Type	Transaction ID : 42345451 Amount of Each Disbursement this Period 2000.00 Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. Denham for Congress				Date of Disbursement			
Mailing Address 2150 River Plaza Dr., #150	2			06 26 2018			
City Sacramento Purpose of Disbursement Contribution	State CA	Zip Code 95833	011	FEC Identification Number C C00473272 Transaction ID : 42345452			
Candidate Name Denham, Jeff, , Rep., Office Sought: Senate President	m, Jeff, , Rep., ght: House Disbursement For: 2018 Senate Primary & Gene			Amount of Each Disbursement this Period 2500.00 Contribution			
State: CA District: 10	Other (spe	ony) V		Memo Item			
SUBTOTAL of Disbursements This Page (optional).				9500.00			

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 197 OF 226					
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 Stat or for commercial purposes, other than using the n									
				A A A A A A A A A A A A A A A A A A A					
UnitedHealth Group Incorporated	PAC (UI	nitedHealth G)					
Full Name (Last, First, Middle Initial) A. Jim Costa for Congress									
Mailing Address 2037 W Bullard Avenue, #355				06 / 26 / Y Y Y Y 26					
City Fresno	State CA	Zip Code 93711-1200		FEC Identification Number					
Purpose of Disbursement Contribution		33711-1200	011	С сооз91029					
Candidate Name			Category/	Transaction ID: 42345454 Amount of Each Disbursement this Period					
Costa, James 'Jim', Manuel, Rep.			Туре						
Office Sought: X House Disburs Senate President State: CA District: 16	sement For: Primary Other (spe	X General		5000.00 Contribution Memo Item					
Full Name (Last, First, Middle Initial)									
B. Tony Cardenas for Congress	Date of Disbursement								
Mailing Address 410 1st St, SE Suite 310	Suite 310								
City Washington	ashington DC 20003								
Purpose of Disbursement Contribution			011	C C00498873					
Candidate Name			Category/	Transaction ID : 42345455 Amount of Each Disbursement this Period					
Cardenas, Tony, , Rep., Office Sought:	ement For:	2018	Туре	5000.00					
Senate	Primary	General		Contribution					
State: CA District: 29	Other (spe	ecify)		Memo Item					
Full Name (Last, First, Middle Initial) C. Valadao For Congress				Date of Disbursement					
Mailing Address 5132 North Palm Avenue #227				06 / 26 / Y Y Y Y 2018					
City Fresno	State CA	Zip Code 93704		FEC Identification Number					
Purpose of Disbursement Contribution			011	C C00499392					
Candidate Name			Category/	Transaction ID : 42345456 Amount of Each Disbursement this Period					
Valadao, David, , Rep., Office Sought: x House Disburs	sement For:	2018	Туре	1000.00					
Senate President	Primary Other (spe	x General		Contribution Memo Item					
State: CA District: 21									
SUBTOTAL of Disbursements This Page (optional)		····· ►	11000.00					
TOTAL This Period (last page this line number on	ly)		····· ►	, ,					

SCHEDULE B (FEC Form 3X)			FC	DR L	INE N	UMBER	:			PAGE	E 198 OF 226	
ITEMIZED DISBURSEMENTS	Use sep for each	(cl		only 21b								
	Detailed	Summary Page			210 28a	22 28b	×	23 28c		20	27 	
Any information copied from such Reports and Stat or for commercial purposes, other than using the n				any	persor	n for the		ose o			contributions	
NAME OF COMMITTEE (In Full)			_	_								
UnitedHealth Group Incorporated	PAC (U	nitedHealth G	Grou	p F	PAC)							
Full Name (Last, First, Middle Initial) A. Coffman For Congress				Date o	f Dis	burse	ment					
Mailing Address 4950 S Yosemite Street F2 #511								06 / D D / Y Y Y Y 26 2018				
City Greenwood Village	State CO	Zip Code 80111				FEC Id	lentif	icatio	n Nun	nber		
Purpose of Disbursement Contribution			0	11		С	1 - A	5704		00.45		
Candidate Name			Cate	aor	v/					23454 rseme	ent this Period	
Coffman, Mike, , Rep.,				ype	<i>.</i>							
Senate President	ement For: Primary Other (spe	x General				L	emo		Contri	bution	1000.00	
State: CO District: 06						L.						
Full Name (Last, First, Middle Initial) B. Cory Gardner For Senate Mailing Address 9227 E Lincoln Ave #200-234						Date o		D		Y	2018	
	City State Zip Code											
City Lone Tree	CO 80124					FEC Id	lentif	icatio	n Nun	nber		
Purpose of Disbursement Contribution	Purpose of Disbursement					С	1. A	49245				
Candidate Name			Cate	aon	v/					23456 rseme	88 ent this Period	
Gardner, Cory, , Sen.,				/pe	y,	7 (moun		Luon	DIODU			
	ement For:	2020						-			2500.00	
	Primary	General						,		bution		
State: CO District:	Other (spe	ecify)				Me	emo	ltem				
Full Name (Last, First, Middle Initial) C. Charlie Crist For Congress						Date of Disbursement						
Mailing Address PO Box 1547						м м 06	/	D 2		Y	2018	
City	State FL	Zip Code 33731				FEC Id	lentif	icatio	ח Nun	nber		
St. Petersburg Purpose of Disbursement Contribution	I L	33731	0	11		С		5900	-			
Candidate Name Crist, Charlie, , Rep.,	Candidate Name Catego							Transaction ID : 42345711 Amount of Each Disbursement this Period				
	ement For:	2018		,	+	2500.00						
Senate President	Primary Other (spe	x General				Me	emo		Contr	ibution	40.	
State: FL District: 13							-					
SUBTOTAL of Disbursements This Page (optional))				►			,		-y	6000.00	
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 199 OF 226				
ITEMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and Stat or for commercial purposes, other than using the na								
		· · · · · · · ·						
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (Foup PAC)				
Full Name (Last, First, Middle Initial) A. Debbie Wasserman Schultz For (Full Name (Last, First, Middle Initial) Debbie Wasserman Schultz For Congress							
Mailing Address 1071 Twin Branch Ln				06 26 2018				
City Weston	State FL	Zip Code 33326		FEC Identification Number				
Purpose of Disbursement Contribution	1		011	С С00385773				
Candidate Name			Category/	Transaction ID : 42345717 Amount of Each Disbursement this Period				
Wasserman Schultz, Debbie, , , Office Sought: X House Disburs	ement For:	2018	Туре	2500.00				
Senate President		General		Contribution Memo Item				
State: FL District: 23 Full Name (Last, First, Middle Initial)	_							
B. Stephanie Murphy For Congress Mailing Address PO Box 205	Date of Disbursement							
City Winter Park								
Purpose of Disbursement Contribution	011	C C00620443 Transaction ID : 42345720						
Candidate Name Murphy, Stephanie, , Rep.,			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: x House Disburs	ement For:	·	Type	2500.00				
State: FL District: 07	Primary Other (spe	General (Kale)		Contribution Memo Item				
Full Name (Last, First, Middle Initial)								
C. Mike Crapo For US Senate				Date of Disbursement				
Mailing Address P.O. Box 1948				06 26 2018				
City Boise	State ID	Zip Code 83701		FEC Identification Number				
Purpose of Disbursement Contribution			011	C C00330886 Transaction ID : 42345723				
Candidate Name Crapo, Mike, , Sen.,	Candidate Name Category/							
Office Sought: House Disburs								
State: ID District:	Other (spe	General cify) ▼		Contribution Memo Item				
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 200 OF 226
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check onl) 21b 28a	
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	Group PAC	2)
Full Name (Last, First, Middle Initial) A. Dan Lipinski For Congress Mailing Address P.O. Box 520				Date of Disbursement
City Western Springs	State IL	Zip Code 60558		FEC Identification Number
Purpose of Disbursement Contribution Candidate Name			011 Category/	C C00405431 Transaction ID : 42345724 Amount of Each Disbursement this Period
Lipinski, Daniel, , Rep., Office Sought: Image: House Senate President State: IL	ement For: ; Primary Other (spe	x General	Туре	2500.00 Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Rodney for Congress Mailing Address PO Box 344				Date of Disbursement
City Taylorville Purpose of Disbursement Contribution Candidate Name Davis, Rodney, L., Rep., Office Sought:	State IL ement For: Primary Other (spe	x General	011 Category/ Type	FEC Identification Number C C00521948 Transaction ID : 42345725 Amount of Each Disbursement this Period 2500.00 Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Friends Of Todd Young, Inc. Mailing Address PO Box 1053				Date of Disbursement
City Bloomington Purpose of Disbursement Contribution Candidate Name Young, Todd, , Rep.,	State IN	Zip Code 47402	011 Category/ Type	FEC Identification Number C C00459255 Transaction ID : 42345727 Amount of Each Disbursement this Period 2500.00

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	EDULE B (FEC Form 3X)	Use sen	arate schedule(s)	FOR LINE		
	MIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b	
	nformation copied from such Reports and State r commercial purposes, other than using the na					
	AME OF COMMITTEE (In Full)				х.	
/ι	InitedHealth Group Incorporated	PAC (Ur	nitedHealth (Group PAC)	
	Ill Name (Last, First, Middle Initial) Andy Barr for Congress, Inc.	Date of Disbursement				
M	ailing Address PO Box 2059	06 / D D / Y Y Y Y 06 / 26 / 2018				
Ci	-	State KY	Zip Code		FEC Identification Number	
	exington urpose of Disbursement	KI	40588		C C00467571	
	Contribution	011	C C00467571			
Ca	andidate Name			Category/	Transaction ID: 42345729 Amount of Each Disbursement this Period	
	arr, Garland, Andy, Rep.,			Type		
Of	ffice Sought: x House Disburse Senate President	ment For: Primary Other (spe	x General		2500.00 Contribution	
St	ate: KY District: 06		(only) v		Memo Item	
B. ⊢	Ill Name (Last, First, Middle Initial)	Date of Disbursement				
Ma	ailing Address 700 13th Street NW, Suite 600	06 26 2018				
Ci W	ty /ashington	State DC	Zip Code 20005		FEC Identification Number	
Ρι	urpose of Disbursement Contribution			011	C C00140715	
Ca	andidate Name			Category/	Transaction ID: 42345733 Amount of Each Disbursement this Period	
F	loyer, Steny, Hamilton, Rep.,			Туре		
Of	fice Sought: 🗶 House Disburse	ement For:	2018		5000.00	
	Senate	Primary	K General		Contribution	
St	ate: MD District: 05	Other (spe	eCity)		Memo Item	
	III Name (Last, First, Middle Initial)	oian			Date of Disbursement	
0. д	Ingus King For US Senate Camp	aign				
Ma	ailing Address 114 Maine Street Suite 1A PO Box 368				06 26 2018	
Ci Br	ty runswick	State ME	Zip Code 04011		FEC Identification Number	
	urpose of Disbursement Contribution			011	C C00516047	
Ca	andidate Name				Transaction ID : 42345734 Amount of Each Disbursement this Period	
k	King, Angus, , Sen.,			Category/ Type	Amount of Each Disbursement this Fellou	
		ment For:	2018		1000.00	
0.	X Senate President	Primary Other (spe	General (Carlet) x General (Carlet) x		Contribution Memo Item	
St	ate: ME District:					
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S	CHEDULE B (FEC Form 3X)			F	OR L	INE N	NUMBER: PAGE 202 OF 22					
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		Detailed	Summary Page			210 28a	22 x 23 20 27 28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		17 JFT 1.1 -	~	_		X X					
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (rou	p F	AC))					
Α.	Full Name (Last, First, Middle Initial) Peters For Michigan						Date of Disbursement					
	Mailing Address PO Box 32072						06 / 26 / Y Y Y Y 26 2018					
	City	State MI	Zip Code				FEC Identification Number					
	Detroit Purpose of Disbursement	IVII	48244			_	C C00427890					
	Contribution			C)11		C C00437889					
	Candidate Name			Cate	egory	y/	Transaction ID: 42345737 Amount of Each Disbursement this Period					
	Peters, Gary, , Sen.,				ype		1000.00					
		ement For:					1000.00					
	X Senate President	Other (spe					Contribution Memo Item					
	State: MI District:	-										
Р	Full Name (Last, First, Middle Initial)						Data of Diskumament					
в.	Emmer For Congress		Date of Disbursement									
	Mailing Address PO Box 998		06 / D D / Y Y Y Y 26 2018									
	City	State Zip Code MN 55303										
	Anoka Purpose of Disbursement	_	C C00545749									
	Contribution	011		Transaction ID : 42345738								
	Candidate Name				egory	y/	Amount of Each Disbursement this Period					
	Emmer, Thomas, , , Jr Office Sought: x House Disburse	ement For:	0010	T	уре		2500.00					
	Office Sought: K House Disburse	Primary					Contribution					
	President	Other (spe										
	State: MN District: 06						Memo Item					
C.	Full Name (Last, First, Middle Initial) Tina Smith for Minnesota						Date of Disbursement					
							M M / D D / Y Y Y Y					
	Mailing Address PO Box 14362						06 26 2018					
	City Saint Paul	State MN	Zip Code 55114				FEC Identification Number					
	Purpose of Disbursement			_	-		C C00663781					
	Contribution			C)11		Transaction ID : 42345740					
	Candidate Name Smith, Tina, , Sen.,				egory vpe	y/	Amount of Each Disbursement this Period					
		ement For:	2018	1	100		2500.00 Contribution					
	× Senate	Primary	General									
	President x	Other (spe					Memo Item					
_	State: MN District:		Special-General2	2018			-					
s	UBTOTAL of Disbursements This Page (optional).						6000.00					
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SC	HEDULE B (FEC Form 3X)			FC		IE NUMBER: PAGE 203 OF 226			
ITEMIZED DISBURSEMENTS		Use sep for each		heck o	one)				
			Summary Page		21				
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or us lress of any polition	ed by cal com	any pe nmittee	e to solicit contributions from such committee.			
\backslash	NAME OF COMMITTEE (In Full)			_					
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (Grou	p PA	(C)			
	Full Name (Last, First, Middle Initial) Billy Long For Congress	Date of Disbursement							
	Mailing Address 3246 E. Ridgeview Street					06 26 2018			
	City Springfield	State MO	Zip Code			FEC Identification Number			
	Springfield Purpose of Disbursement	MO	65804	_		C C00460063			
	Contribution			0	11	Transaction ID : 42345742			
	Candidate Name				egory/	Amount of Each Disbursement this Period			
	Long, Billy, , Rep., Office Sought: x House Disburse	ement For:	2010	Ту	/pe	2500.00			
	Senate X	Primary	General			Contribution			
	State: MO District: 07	Other (spe	ecity) 🔻			Memo Item			
	Full Name (Last, First, Middle Initial)								
В.	Graves for Congress	Date of Disbursement							
	Mailing Address 2345 Grand Blvd Suite 2400	06 26 2018							
	City Kansas City		FEC Identification Number						
	Purpose of Disbursement	C C00359034							
	Contribution		0	11	Transaction ID : 42345745				
	Candidate Name				egory/	Amount of Each Disbursement this Period			
	Graves, Samuel, B., Rep., Office Sought: x House Disburse	ment For: 2018				2500.00			
	Senate	1	General			Contribution			
	President	Other (spe	ecify)						
	State: MO District: 06	-							
-	Full Name (Last, First, Middle Initial) Jason Smith For Congress					Date of Disbursement			
						M M / D D / Y Y Y Y			
	Mailing Address PO Box 1324					06 26 2018			
	City Cape Girardeau	State MO	Zip Code 63702			FEC Identification Number			
	Purpose of Disbursement		00102	_		C C00541862			
	Contribution			0	11	Transaction ID : 42345746			
	Candidate Name	Amount of Each Disbursement this Period							
	Smith, Jason, , , Office Sought:	ement For:	2018	Ťŷ	/pe	2500.00			
	Senate Disburse	Primary	General			Contribution			
	President	Other (spe							
_	State: MO District: 08	-							
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S	CHEDULE B (FEC Form 3X)			FC	OR L	INE	NUMBER: PAGE 204 OF 226				
IT	EMIZED DISBURSEMENTS	Use sepa for each	(C		only 21b	/ one) □ 22					
			Summary Page			210 28a	22 X 23 26 27 28b 28c 29 30b				
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or use ress of any politic	ed by al con	any j	pers	on for the purpose of soliciting contributions o solicit contributions from such committee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			-	_						
	UnitedHealth Group Incorporated	PAC (Un	litedHealth (rou	рΡ		;)				
A.	Full Name (Last, First, Middle Initial) Vicky Hartzler for Congress						Date of Disbursement				
	Mailing Address PO Box 531						06 26 2018				
	City	State MO	Zip Code				FEC Identification Number				
	Harrisonville Purpose of Disbursement	IVIO	64701				C 000404000				
	Contribution			0	11		C C00464602				
	Candidate Name			Cate	egory	/	Transaction ID : 42345747 Amount of Each Disbursement this Period				
	Hartzler, Vicky, , Rep.,				ype	'					
		ment For: 2					2500.00				
	Senate x	Primary	General				Contribution				
	State: MO District: 04	Other (spe	city) 🔻				Memo Item				
	Full Name (Last, First, Middle Initial)										
В.	Elise For Congress	Date of Disbursement									
	Mailing Address PO Box 500	06 26 2018									
	City Glens Falls				FEC Identification Number						
	Purpose of Disbursement	_	C C00547893								
	Contribution	011									
	Candidate Name	Category/					Transaction ID: 42345748 Amount of Each Disbursement this Period				
	Stefanik, Elise, , ,				ype						
		ment For:					2500.00				
	Senate President	Primary Other (spe	General				Contribution				
	State: NY District: 21	Other (spec	city)				Memo Item				
~	Full Name (Last, First, Middle Initial)						Date of Disbursement				
0.	Faso For Congress										
	Mailing Address PO Box 448						06 26 Y Y Y Y Y 2018				
	City Kinderhook	State NY	Zip Code 12106				FEC Identification Number				
	Purpose of Disbursement Contribution		12100		4.4	٦	C C00580415				
	Candidate Name				11		Transaction ID : 42345751				
	Faso, John, , ,		egory ype	//	Amount of Each Disbursement this Period						
		ment For: 2	2018				2500.00				
	Senate	Primary	x General				Contribution				
	President	Other (spe	cify) 🔻				Memo Item				
_	State: NY District: 19										
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SCH	IEDULE B (FEC Form 3X)			FC	DR LIN	INE NUMBER: PAGE 205 OF 22
ITEI	MIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		heck o	only one) 21b 22 X 23 26 27 28a 28b 28c 29 30b
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	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	PAC (Ur	nitedHealth (Grou	p P/	AC)
-	all Name (Last, First, Middle Initial) Cathleen Rice For Congress					Date of Disbursement
_	ailing Address PO Box 744					06 26 2018
	ineola	State NY	Zip Code 11501			FEC Identification Number
C	Contribution			0	11	C C00555813 Transaction ID : 42345795
R	andidate Name Lice, Kathleen, , ,				egory/ /pe	
	ffice Sought: Senate President ate: NY Disburse Disburse NY Disburse Disburse Disburse NY Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse Disburse	Contribution Memo Item				
B. F	ailing Address 320 Kenarden Drive	Date of Disbursement				
Pu	leveland urpose of Disbursement	_	_	FEC Identification Number		
टः J ठा	Contribution andidate Name Oyce, Dave, , Rep., ffice Sought: Senate President ate: OH District: 14	ement For: Primary Other (spe	2018 X General cify)	Cate	egory/ /pe	Transaction ID : 42345799
-	ull Name (Last, First, Middle Initial) ohnson for Congress					Date of Disbursement
M	ailing Address PO Box 906					06 26 2018
Ρι	ty arietta urpose of Disbursement Contribution	State OH	Zip Code 45750	0	11	FEC Identification Number C C00476820 Transaction ID : 42345801
J	andidate Name Iohnson, William, Leslie, Rep., ffice Sought: 🙀 House Disburse		egory/ /pe			
	Arte: OH District: 06	Primary Other (spe	X General			Contribution Memo Item
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S	CHEDULE B (FEC Form 3X)			FC	R LIN	IE NUMBER: PAGE 206 OF 226				
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(ch	21					
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	y information copied from such Reports and State for commercial purposes, other than using the na									
\square	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group	o PA	(C)				
Α.	Full Name (Last, First, Middle Initial) Friends Of Glenn Thompson					Date of Disbursement				
						M M / D D / Y Y Y Y				
	Mailing Address 400 N Michael St					06 26 2018				
	City St. Marys	State PA	Zip Code 15857			FEC Identification Number				
	Purpose of Disbursement		13637			C C00444620				
	Contribution			0'	11	Transaction ID : 42345802				
	Candidate Name			Cate	gory/	Amount of Each Disbursement this Period				
	Thompson, Glenn, , Rep.,			Ту	pe	2000.00				
	Office Sought: X House Disburse Senate	ement For: 2	2018 X General			200.00				
	President	Other (spec				Contribution Memo Item				
	State: PA District: 15	1								
D	Full Name (Last, First, Middle Initial)									
в.	Tom Rice For Congress					Date of Disbursement				
	Mailing Address PO Box 70098	06 / 26 / Y Y Y Y Y 06 26								
	City	State SC	Zip Code 29572			FEC Identification Number				
	Myrtle Beach Purpose of Disbursement									
	Contribution			0	11	C C00506048				
	Candidate Name			Cate	gory/	Transaction ID : 42345825 Amount of Each Disbursement this Period				
	Rice, Tom, , Rep.,	_			pe					
	Office Sought: X House Disburse Senate	ment For: 2				1000.00				
	President	Primary Other (spec	General			Contribution				
	State: SC District: 07					Memo Item				
	Full Name (Last, First, Middle Initial)									
C.	Bill Flores for Congress					Date of Disbursement				
	Mailing Address PO Box 6207					06 / D D / Y Y Y Y 06 26 2018				
	City	State	Zip Code			FEC Identification Number				
	Bryan Purpose of Disbursement	ТХ	77805							
	Contribution			01	11	C C00472241				
	Candidate Name	Transaction ID : 42345831 Amount of Each Disbursement this Period								
	Flores, Bill, , Rep.,									
		ment For: 2				2500.00				
	Senate Primary X General President Other (specify) V					Contribution				
	State: TX District: 17		(), ∀			Memo Item				
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 207 OF 226				
ITEMIZED DISBURSEMENTS	for each Detailed	parate schedule(s) h category of the d Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b				
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NAME OF COMMITTEE (In Full)			_					
UnitedHealth Group Incorporate	d PAC (U	nitedHealth (Group PAC)				
Full Name (Last, First, Middle Initial) A. Brady For Congress								
Mailing Address PO Box 8277				06 26 20 <u>18</u>				
City The Woodlands	State TX	Zip Code 77387		FEC Identification Number				
Purpose of Disbursement Contribution		11301		C C00311043				
Candidate Name			011	Transaction ID : 42345832				
Brady, Kevin, Patrick, Rep.,			Category/ Type	Amount of Each Disbursement this Period				
	rsement For:	2018	. , , , , , , , , , , , , , , , , , , ,	5000.00				
Senate	Primary	x General		Contribution				
State: TX District: 08	Other (sp	ecify) 🔻		Memo Item				
Full Name (Last, First, Middle Initial)								
B. Texans For Henry Cuellar Cong	ressional	Campaign		Date of Disbursement				
Mailing Address 1519 Washington Street Suite 200	Suite 200							
City Laredo		FEC Identification Number						
Purpose of Disbursement Contribution	Contribution							
Candidate Name			011	Transaction ID : 42345834 Amount of Each Disbursement this Period				
Cuellar, Henry, , Rep.,			Category/ Type	Amount of Each Disbursement this Fellou				
	rsement For:	·		2500.00				
President	Primary Other (sp	General		Contribution				
State: TX District: 28				Memo Item				
Full Name (Last, First, Middle Initial) C. Friends for Chris Stewart, Inc.				Date of Disbursement				
Mailing Address PO Box 540370								
City	State	Zip Code		FEC Identification Number				
North Salt Lake Purpose of Disbursement	UT	84054		C C00506931				
Contribution			011	Transaction ID : 42345835				
Candidate Name	Category							
Stewart, Chris, , Rep.,	Туре	2500.00						
Senate				Contribution				
President	Other (sp	ecify)		Memo Item				
State: UT District: 02								
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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 208 OF 226					
	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 nar									
$\left \right\rangle$	NAME OF COMMITTEE (In Full)				N N N N N N N N N N N N N N N N N N N					
	UnitedHealth Group Incorporated	PAC (Un	litedHealth G	FOUP PAC)					
Α.	Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Cong	ress			Date of Disbursement					
	Mailing Address Box 137		1		06 26 2018					
	City Spokane	State WA	Zip Code 99210-0137		FEC Identification Number					
	Purpose of Disbursement Contribution			011	C C00390476					
	Candidate Name			Category/	Transaction ID : 42345836 Amount of Each Disbursement this Period					
	McMorris Rodgers, Cathy, , Rep.,			Туре	2500.00					
	Office Sought: House Disburse Senate President State: WA District: 05	ment For: 2 Primary Other (spec	General		Contribution Memo Item					
	Full Name (Last, First, Middle Initial)									
в.	DelBene for Congress		Date of Disbursement							
	Mailing Address PO Box 477		06 26 2018							
	City Kirkland		FEC Identification Number							
	Purpose of Disbursement Contribution	011	C C00459099							
	Candidate Name			Category/	Transaction ID: 42345837 Amount of Each Disbursement this Period					
	DelBene, Suzan, K., Rep.,			Туре	2500.00					
	Office Sought: K House Disburse Senate K	ment For: 2 Primary	2018 General		2500.00					
	State: WA District: 01	Other (spec			Contribution Memo Item					
С.	Full Name (Last, First, Middle Initial) Mike Gallagher For Wisconsin				Date of Disbursement					
					M M / D D / Y Y Y					
	Mailing Address PO Box 1027				06 26 2018					
	City Green Bay	State WI	Zip Code 54305		FEC Identification Number					
	Purpose of Disbursement Contribution			011	C C00610212					
	Candidate Name	Category/	Transaction ID : 42345839 Amount of Each Disbursement this Period							
	Gallagher, Michael, , , Office Sought: x House Disburse	Туре	2500.00							
	Office Sought: Senate President	Primary Other (spec	General		Contribution					
	State: WI District: 08				Memo Item					
s	UBTOTAL of Disbursements This Page (optional)			····· ►	7500.00					
Т	OTAL This Period (last page this line number only)		••••••	, ,					

	CHEDULE B (FEC Form 3X)		Use separate schedule(s)				NUMBER: PAGE 209 OF 226						
IT	EMIZED DISBURSEMENTS	for each	(c		only 21b	/ one) 22 🗶 23 🗌 26 🗌 27							
		Detailed	Summary Page			28a	28b 28c 29 30b						
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may i me and addi	not be sold or us ress of any politic	ed by cal con	any nmitt	perso ee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_								
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	р Р)						
Α.	Full Name (Last, First, Middle Initial) CHC BOLD PAC						Date of Disbursement						
	Mailing Address PO Box 75357						06 / 26 / Y Y Y Y 2018						
	City	State	Zip Code				FEC Identification Number						
	Washington Purpose of Disbursement	DC	20013				0 000005500						
	Contribution			0	011	Ш	C C00365536						
	Candidate Name			Cate	egory	/	Transaction ID : 42345840 Amount of Each Disbursement this Period						
	CHC BOLD PAC				ype		5000.00						
	Office Sought: House Disburse	ement For: Primary	General				5000.00						
	President	Other (spe					Contribution						
	State: District:		- ,, .				Memo Item						
B.	Full Name (Last, First, Middle Initial) Majority Committee PAC		Date of Disbursement										
	Mailing Address PO Box 10134												
	City Bakersfield		FEC Identification Number										
	Purpose of Disbursement	-			C C00428052								
	Contribution Candidate Name	011					Transaction ID : 42345841						
	Majority Committee PAC				egory ype	/	Amount of Each Disbursement this Period						
		ement For:	Турс			5000.00							
	Senate	Primary				Contribution							
	State: District:	Other (spec	cify)				Memo Item						
	Full Name (Last, First, Middle Initial) Hoosiers First PAC						Date of Disbursement						
0.	HUUSIEIS FIISI FAC												
	Mailing Address 115 W Washington St Suite 1165						06 26 2018						
	City Indianapolis	State IN	Zip Code 46204				FEC Identification Number						
	Purpose of Disbursement Contribution				С С00492082								
	Candidate Name)11	.,	Transaction ID: 42345842 Amount of Each Disbursement this Period									
	Hoosiers First PAC	egory ype		Amount of Lacit Disbursement this Fellou									
	Office Sought: House Disburse				5000.00								
	Senate President						Contribution						
	State: District:	Uther (spe	city) 🔻				Memo Item						
<u> </u>							15000.00						
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S	CHEDULE B (FEC Form 3X)			FC	DR LIN	NE NUMBER: PAGE 210 OF 226					
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page			neck d	only one) 1b 22 X 23 26 27					
	winformation conied from such Departs and Otate					Ba 28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na										
\land	NAME OF COMMITTEE (In Full)				D 4						
\bigvee	UnitedHealth Group Incorporated	PAC (Un	litedHealth G	irou	рΡА	AC)					
~	Full Name (Last, First, Middle Initial)					Date of Disbursement					
А.	The Madison PAC										
	Mailing Address 235 State Street #206					06 26 2018					
	City Springfield	State MA	Zip Code 01103			FEC Identification Number					
	Purpose of Disbursement		01100	_	_	C C00426809					
	Contribution Candidate Name			0	11	Transaction ID : 42345843					
	The Madison PAC				egory/ /pe	Amount of Each Disbursement this Period					
		ement For:		,		5000.00					
	Senate President	Primary Other (spec	General			Contribution					
	State: District:		(iii) V			Memo Item					
D	Full Name (Last, First, Middle Initial)	Date of Diskursement									
р.	ICE PAC					Date of Disbursement					
	Mailing Address PO BOX 752	06 26 2018									
	City LONG LAKE	State MN	Zip Code 55356	FEC Identification Number							
	Purpose of Disbursement	C C00484667									
	Contribution Candidate Name	01			011	Transaction ID : 42345844					
	ICE PAC				egory/ /pe	Amount of Each Disbursement this Period					
		ement For:		71		2500.00					
	Senate President	Primary Other (spec	Primary General Other (specify)			Contribution					
	State: District:		ony)			Memo Item					
~	Full Name (Last, First, Middle Initial)										
С.	Next Century Fund					Date of Disbursement					
	Mailing Address 116 S Royal Street				06 26 2018						
	City Alexandria	State VA	Zip Code 22314			FEC Identification Number					
	Purpose of Disbursement	VA	22314	_	_	C C00343947					
	Contribution Candidate Name	Transaction ID: 42345845									
	Next Century Fund	Amount of Each Disbursement this Period									
	Office Sought: House Disburse	ement For:		,	/pe	5000.00					
		Senate Primary General President Other (specify)				Contribution					
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			Summary Page		21b 22 ¥ 23 26 27 28a 28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na			d by any	person for the purpose of soliciting contributions	;				
\backslash	NAME OF COMMITTEE (In Full)									
Ľ	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Foup F	PAC)					
A.	Full Name (Last, First, Middle Initial) All For Our Country Leadership P	Date of Disbursement								
	Mailing Address 611 Pennsylvania Avenue, SE #143		1		06 26 2018					
	City Washington	State DC	Zip Code 20003		FEC Identification Number					
	Purpose of Disbursement		20003		C C00629212					
	Contribution Candidate Name			011	Transaction ID : 42345846					
	All For Our Country Leadership PA	٩C		Category Type	y/ Amount of Each Disbursement this Perio	bd				
	Office Sought: House Disburse	ement For:			5000.00					
	Senate President	Primary Other (spe	General cify) ▼		Contribution Memo Item					
	State: District:	-								
B.	Full Name (Last, First, Middle Initial) Heartland Values PAC	Date of Disbursement	Date of Disbursement							
	Mailing Address PO Box 505	06 26 2018								
		00 20 2010								
	City Sioux Falls	State SD	Zip Code 57101		FEC Identification Number	_				
	Purpose of Disbursement Contribution	C C00409003	С С00409003							
	Candidate Name			011	Transaction ID : 42345847					
	Heartland Values PAC			Category Type	y/ Amount of Each Disbursement this Perio	od				
		ment For:			2500.00					
	Senate President	Primary Other (spe	General		Contribution					
	State: District:		city)		Memo Item					
~	Full Name (Last, First, Middle Initial)				Date of Disbursement					
0.	Joe Kennedy For Congress									
	Mailing Address PO Box 590464				06 26 2018					
	City Newton	State MA	Zip Code 02459		FEC Identification Number					
	Purpose of Disbursement		02400		C C00512970					
	Contribution Candidate Name	011	Transaction ID : 42345916							
	Kennedy, Joseph, , Rep.,	y/ Amount of Each Disbursement this Perio	od							
	Office Sought: X House Disburse	Туре	500.00							
	Senate X	Primary Other (spe	General		Contribution					
	State: MA District: 04		city) 🔻		Memo Item					
	UBTOTAL of Disbursements This Page (optional).				8000.00	٦				
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SCHEDULE B (FEC Form 3X)		ovoto cohodula ()	FO	R LINE	NUMBER: PAGE 212 OF 226						
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(ch	eck only 21b 28a	/ one) 22 ★ 23 26 27 28b 28c 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 (Ur	nitedHealth (Group	PAC	;)						
Full Name (Last, First, Middle Initial) A. Joe Kennedy For Congress	Date of Disbursement										
Mailing Address PO Box 590464					06 26 2018						
City Newton Purpose of Disbursement	State MA	Zip Code 02459			FEC Identification Number						
Contribution			01		C C00512970 Transaction ID : 42345917						
Kennedy, Joseph, , Rep.,	ement For:	2018	Cate Ty		Amount of Each Disbursement this Period 2000.00						
State: MA District: 04	Senate Primary ✗ General President Other (specify) ▼										
Full Name (Last, First, Middle Initial) B. Klobuchar For Minnesota		Date of Disbursement									
Mailing Address PO Box 4146		06 26 2018									
City St Paul Purpose of Disbursement Contribution	0	11	FEC Identification Number								
Candidate Name Klobuchar, Amy, J., Sen., Office Sought: House Disburse	ement For:	2018	Cate Ty	gory/	Transaction ID : 42345918 Amount of Each Disbursement this Period 2500.00						
State: MN District:	Primary Other (spe	General ccify)			Contribution Memo Item						
Full Name (Last, First, Middle Initial) C. Klobuchar For Minnesota					Date of Disbursement						
Mailing Address PO Box 4146					06 / 26 / Y Y Y Y 2018						
City St Paul	State MN	Zip Code 55104			FEC Identification Number						
Contribution Candidate Name Klobuchar, Amy, J., Sen.,	Candidate Name										
Office Sought: House Disburse X Senate President State: MN District:	ement For: Primary Other (spe	x General			Contribution Memo Item						
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		Detailed Summary Page			22 28b		23 28c		20	-	27 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			ed by any p		on for the	purp	ose c		olicitin		ontributions
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (Group PA	٩C)						
Full Name (Last, First, Middle Initial) A. Republican Party of Kentucky - Fe		Date of Disbursement									
Mailing Address PO Box 1068	ailing Address PO Box 1068									2	018
City	State	Zip Code			FEC Id	entifi	catior	ηN	umbei	r	
Frankfort	KY	40602				-					-
Purpose of Disbursement Contribution			011	11	С		ation	ID	: 4234	502	
Candidate Name			Category/	1							t this Period
Office Sought: House Disburse	ement For:		Туре	_				1			5000.00
Senate	Primary	General					(Cor	ntributi	on	48
State: District:	Other (spe	ecity) 🔻			Me	mo I	tem				
Full Name (Last, First, Middle Initial) B. ICE PAC		Date of	Disl	burse	me	nt					
Mailing Address PO BOX 752	Mailing Address PO BOX 752							D 8	/		018
City		+	EEC Id	ontifi	cation	n N	umbo				
LONG LAKE	FEC Identification Num					umber	_	_			
Purpose of Disbursement Void - ICE PAC; check dated 3/24/16	011	11	С	C004	48466	67			_		
Candidate Name		Category/	44					4234			
ICE PAC							ach	Dis	burse	men	t this Period
	ement For:		Туре					1		:	5000.00
Senate	Primary	General						Voi	d - ICE	E PA	C; check dated
State: District:	Other (spe	cify)			Ме	mo I	tem	3/24	4/16		
Full Name (Last, First, Middle Initial)					_						
C. Jimmy Panetta For Congress					Date of	Disl	burse		nt	(YY
Mailing Address PO Box 1579					06	ĺ	18				018
City	State	Zip Code			FEC Id	entifi	catior	ηN	umbei	r	
Carmel Valley Purpose of Disbursement	CA	93924			0	0.5.5	·		-		-
Void - Jimmy Panetta For Congress; check dated	11/7/16		011	11	C		59218 ction	-	- 4234	1932	5
Candidate Name			Category/		Transaction ID : 42349325 Amount of Each Disbursement this Period						
Panetta, James, , ,			Туре			_					1000.00
	ement For:						_	-	-9-	1	1000.00
President	Senate Primary X General President Other (specify) V						Void - Jimmy Panetta For Congress; check dated 11/7				
State: CA District: 20		(Ciry) V			Me	mo I	tem	00	igiese	5, UN	
SUBTOTAL of Disbursements This Page (optional).				•			,			-	1000.00
TOTAL This Period (last page this line number only				_	Γ.		,		,		

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 214 OF 226					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	y one) 22 ¥ 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and Stat or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (Group PAC	;)					
Full Name (Last, First, Middle Initial) A. Young For Iowa, Inc. Mailing Address PO Box 162				Date of Disbursement					
City Van Meter	State IA	Zip Code 50261		FEC Identification Number					
Purpose of Disbursement Void - Young For Iowa, Inc.; check dated 11/18/1	6	011	C C00545616 Transaction ID : 42349326						
Candidate Name Young, David, , Rep.,			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: X House Disburs Senate President State: IA District: 03	ement For: Primary Other (spe	🗴 General		- 2500.00 Void - Young For Iowa, Inc.; check Memo Item dated 11/18/16					
Full Name (Last, First, Middle Initial) B. Future Forum PAC Mailing Address PO Box 83142	Future Forum PAC								
City Gaithersburg	State MD	Zip Code 20883		FEC Identification Number					
Purpose of Disbursement Contribution Candidate Name Future Forum PAC	1		011 Category/	C C00625988 Transaction ID : 42352960 Amount of Each Disbursement this Period					
	ement For: Primary Other (spe	General Gerify)	Туре	5000.00 Contribution Memo Item					
Full Name (Last, First, Middle Initial) C. Kathleen Rice For Congress				Date of Disbursement					
Mailing Address PO Box 744				06 / 29 / Y Y Y Y 2018					
City Mineola Purpose of Disbursement Void - Kathleen Rice For Congress; check dated (State NY	Zip Code 11501	044	FEC Identification Number					
Candidate Name Rice, Kathleen, , ,			011 Category/ Type	Transaction ID : 42352961 Amount of Each Disbursement this Period					
Office Sought: X House Disburs Senate President State: NY District: 04	ement For: Primary Other (spe		- 1500.00 Void - Kathleen Rice For Congress check dated 6/26/18						
SUBTOTAL of Disbursements This Page (optional))		····· ►	1000.00					
TOTAL This Period (last page this line number on	ly)		••••••	, ,					

SCHEDULE B (FEC Form 3X)	vinto ochodulo(o)	FOR LINE					
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 (Un	itedHealth G	Group PAC)			
Full Name (Last, First, Middle Initial) A. Kathleen Rice For Congress Mailing Address PO Box 744	Date of Disbursement						
	State	Zip Code		FEC Identification Number			
Mineola Purpose of Disbursement Contribution	NY	11501	011	C C00555813			
Candidate Name Rice, Kathleen, , ,			Category/ Type	Transaction ID : 42352963 Amount of Each Disbursement this Period			
	ment For: 2 Primary Other (spec	X General		Contribution Memo Item			
Full Name (Last, First, Middle Initial) B.	Date of Disbursement						
Mailing Address							
City Purpose of Disbursement	Zip Code		FEC Identification Number				
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General		Memo Item			
State: District:							
C. Mailing Address				Date of Disbursement			
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement	Purpose of Disbursement						
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Senate President	ment For: Primary Other (spec	General cify) ▼		Memo Item			
State: District:							
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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 216 OF 226					
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 nar									
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth C	Group PAC)					
Α.	Full Name (Last, First, Middle Initial) Friends of Mike Hanna Mailing Address 50 Sylvan Drive				Date of Disbursement					
	5	State	Zip Code		FEC Identification Number					
	Lock Haven Purpose of Disbursement Contribution	PA	17745	011	C Transaction ID : 42306160					
	Candidate Name Hanna, Michael, K., , Office Sought: House Disburse	ment For:		Category/ Type	Amount of Each Disbursement this Period 1000.00					
	State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item					
B.	Full Name (Last, First, Middle Initial) Senate Republican Campaign Cor Mailing Address PO Box 792		Date of Disbursement							
	City Harrisburg Purpose of Disbursement Contribution	State PA	Zip Code 17108	011	FEC Identification Number					
	Candidate Name			Category/ Type	Transaction ID : 42306161 Amount of Each Disbursement this Period					
	Office Sought: House Disburse Senate President District:	ment For: Primary Other (spec	General cify)		4000.00 Contribution Memo Item					
C.	Full Name (Last, First, Middle Initial) Senate Majority Fund				Date of Disbursement					
	Mailing Address 2318 Curtis Street				06 15 2018					
	City Denver Purpose of Disbursement Contribution	State CO	Zip Code 80205		FEC Identification Number					
	Candidate Name	011 Category/ Type	Transaction ID : 42306163 Amount of Each Disbursement this Period							
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼		5000.00 Contribution Memo Item					
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 217 OF 226					
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Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may me and add	not be sold or use ress of any politic	ed by any perse al committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
		· · · · · · ·		х.					
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Froup PAC	·)					
Full Name (Last, First, Middle Initial) A. Mike Turzai Leadership Fund	Date of Disbursement								
Mailing Address P.O. Box 92				06 / 15 / Y Y Y Y					
City	State	Zip Code		FEC Identification Number					
Harrisburg Purpose of Disbursement	PA	17108		С					
Contribution			011	Transaction ID : 42306164					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General		1000.00 Contribution					
State: District:		-) / •		Memo Item					
Full Name (Last, First, Middle Initial) B. PA House Republican Campaign Mailing Address 500 N Third St. 4th Floor		Date of Disbursement 06 / D D / Y Y Y Y 2018							
PO Box 11787 City	State	Zip Code		FEC Identification Number					
Harrisburg Purpose of Disbursement Contribution	PA	17108		С					
Candidate Name			011 Category/ Type	Transaction ID : 42306167 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4000.00 Contribution					
State: District:	1			Memo Item					
Full Name (Last, First, Middle Initial) C. Texas Association of Health Plans	Full Name (Last, First, Middle Initial) • Texas Association of Health Plans (TAHP) PAC								
Mailing Address 1001 Congress Avenue, Suite 300)			06 / 15 / Y Y Y Y 2018					
City Austin	State TX	Zip Code 78701		FEC Identification Number					
Purpose of Disbursement Contribution			011	C Transaction ID : 42306168					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
	ment For:			5000.00					
Senate President	Primary Other (spe	General		Contribution					
State: District:		ony) ▼		Memo Item					
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SCHEDULE B (FEC Form 3X)				NUMBER: PAGE 218 OF 226					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	y one) 22 23 26 27 28b 28c x 29 30b					
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (Ur	nitedHealth G	Group PAC	C)					
Full Name (Last, First, Middle Initial) A. Citizens for Hughes				Date of Disbursement					
Mailing Address PO Box 13031				06 26 2018					
City Philadelphia Purpose of Disbursement	State PA	Zip Code 19101		FEC Identification Number					
Contribution Candidate Name		011 Category/	Transaction ID : 42345848 Amount of Each Disbursement this Period						
Hughes, Vincent, , PA Sen., Office Sought: House Disb Senate President State: District:	Primary Other (spe	General cify) ▼	Туре	Contribution Memo Item					
Full Name (Last, First, Middle Initial) B. Citizens for Patrick Browne Mailing Address 1111 N 11TH ST				Date of Disbursement					
City Whitehall Purpose of Disbursement Contribution	State PA	011	FEC Identification Number						
Candidate Name Browne, Patrick, , PA Sen., Office Sought: House Senate President State: District:	ursement For: Primary Other (spe	General cify)	Category/ Type	Transaction ID : 42345849 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item					
Full Name (Last, First, Middle Initial) C. Citizens for Stan Saylor									
Mailing Address 649 Runkle Rd				06 / 26 / Y Y Y Y 26 2018					
City Felton Purpose of Disbursement Contribution	State PA	Zip Code 17322	011	FEC Identification Number					
Candidate Name			Category/ Type	Transaction ID : 42345850 Amount of Each Disbursement this Period					

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IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(c		only 21b	one)	one)						
			Summary Page			210 28a	22 28b		3 80	26 ¥ 29	\vdash	27 30b		
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso	on for the	purpo	se o	f solicit		ontributions		
$\left \right\rangle$	NAME OF COMMITTEE (In Full)				-									
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Brou	рР	AC)							
Α.	Full Name (Last, First, Middle Initial) Friends for Judy Schwank						Date of							
	Mailing Address PO BOX 12424							06 / D D / Y Y Y Y Y 26 2018						
	City	State	Zip Code				FEC Id	entifica	ation	Numb	er			
	Reading Purpose of Disbursement	PA	19612									-		
	Contribution			C)11		C Transaction ID : 42345881					1		
	Candidate Name				egory	/		t this Period						
	Schwank, Judith, , PA Sen., Office Sought: House Disburse	mont For		Ţ	уре			-				1000.00		
	State: District:	Senate Primary General President Other (specify) ▼						mo Ite		Contribu				
	Full Name (Last, First, Middle Initial)													
В.	B. Friends of Frank Dermody							ⁱ Disbu	urser		Y	(YYY		
	Mailing Address PO Box 274								06 26 2018					
	City	City State Zip Code Farentum PA 15084-0274						FEC Identification Number						
	Purpose of Disbursement Contribution)11		С										
	Candidate Name			Transaction ID : 42345909 Amount of Each Disbursement this Period					-					
	Dermody, Frank, , PA Rep.,				egory ype		Amouni		acri	Jisbuis	emen			
		ment For:										2000.00		
	President	Primary Other (anal	General				_		C	Contribu	ution			
	State: District:	Other (spec	city)				Me	mo Ite	əm					
c.	Full Name (Last, First, Middle Initial) Friends of Jake Corman							Disbu	urser	ment				
	Mailing Address PO Box 421		06 26 2018											
		-					00		20					
	City Bellefonte	State PA	Zip Code 16823				FEC Id	entifica	ation	Numb	er			
	Purpose of Disbursement Contribution	10023		11		С								
	Candidate Name)11					ID:42		1 t this Period		
	Corman, Jacob, D., PA Sen., III				egory ype	"	Amoun			Jisbuis	GINE			
												3000.00		
	Senate President	Primary Other (spe	General Gify) ▼					,		Contrib	ution			
	State: District:		,, ▼				Me	mo Ite	əm					
s	UBTOTAL of Disbursements This Page (optional).					►	_					6000.00		
Т	OTAL This Period (last page this line number only	/)												

	(check on 21b 28a sed by any per cal committee	22 23 26 27 28b 28c 29 30b on for the purpose of soliciting contributions from such committee.					
Zip Code 19132	Cal committee to Group PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.					
Zip Code 19132	011 Category/	Date of Disbursement Define the second secon					
19132	Category/	FEC Identification Number C Transaction ID : 42345912 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item					
19132	Category/	FEC Identification Number C Transaction ID : 42345912 Amount of Each Disbursement this Perio 1000.00 Contribution Memo Item					
19132	Category/	C Transaction ID : 42345912 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item					
General	Category/	Amount of Each Disbursement this Period 1000.00 Contribution Memo Item					
General	Туре	Contribution Memo Item					
		Date of Disbursement					
State: District: Full Name (Last, First, Middle Initial) Jay Costa Jr. for State Senate Mailing Address 314 Newport Road							
City State Zip Code Pittsburgh PA 15221							
Purpose of Disbursement Contribution Candidate Name Costa, Jay, , PA Sen., Jr.							
General Gecify)	Category/ Type 10 Contribution Memo Item						
State: District: Full Name (Last, First, Middle Initial) Christi Craddick Campaign							
Mailing Address 1500 Dillman St							
City State Zip Code Austin TX 78703 Purpose of Disbursement Void - Christi Craddick Campaign: check dated 5/18/16							
Candidate Name Craddick, Christi, , , Office Sought: House Disbursement For:							
General Gecify)		- 1000.00 Void - Christi Craddick C check dated 5/18/16					
	15221 Decify) General Zip Code 78703 Decify) ▼	15221 011 Category/ Type General Decify) Zip Code 78703 011 Category/ Type					

	CHEDULE B (FEC Form 3X)		rate schedule(s)				NUMBER:			PA	GE	221 OF 226	
IT	EMIZED DISBURSEMENTS	for each	category of the	(c	heck	only 21b	one)	23		26		27	
		Detailed Summary Page				28a	28b	28c	×	29		30b	
	ny information copied from such Reports and State for commercial purposes, other than using the na												
\backslash	NAME OF COMMITTEE (In Full)	// .			_								
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	rou	p P)						
Α.	Full Name (Last, First, Middle Initial) Don Shooter 2016						Date of	Disburse		nt			
	Mailing Address 2109 S Palo Verde Ln #44		06 / 18 / Y Y Y Y 2018										
	City Yuma	State AZ	Zip Code 85365				FEC Id	entificatio	n N	umber		_	
	Purpose of Disbursement 011 Void - Don Shooter 2016; check dated 6/27/16 011							C Transaction ID : 42349320					
	Candidate Name			Cate	egory	/	Amount of Each Disbursement this Period						
	Shooter, Don, , , Office Sought: House Disburse			T	уре							1000.00	
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General cify) ▼					mo Item	Void	d - Doi	n Sh	ooter 2016; check	
	State: District:		., .				IVIE	mo item	uait	JU 0/2	//10		
B.	Full Name (Last, First, Middle Initial) Leslie Herod for Colorado Mailing Address POB 7445							Disburse		nt		018	
	City		06		0		2	018					
	CityStateZip CodeDenverCO80207							entificatio	n N	umber			
	Purpose of Disbursement Void - Leslie Herod for Colorado; check dated 10/0 Candidate Name	-)11 egory			nsaction		-		I t this Period			
	Herod, Leslie, , ,			ype				-	-				
	Senate President	ement For: Primary Other (spec	General Gify)				Me				slie H	- 200.00 Herod for Colorado 0/6/16	
	State: District:												
C.	Full Name (Last, First, Middle Initial) Leslie Herod for Colorado						Date of	Disburse		nt			
	Mailing Address POB 7445		06	/ D	8	/ Y		018					
	City	State	Zip Code				FEC. Ide	entificatio	n N	umhei			
	Denver	СО	80207				C	Shimbatio			-		
	Purpose of Disbursement Void - Leslie Herod for Colorado; check dated 10/6/16 Candidate Name							insaction		-			
	Herod, Leslie, , , Type							of Each	DIS	burse	men	t this Period	
	Office Sought: House Disbursement For:										<u> </u>	- 100.00	
	State: District:	Senate Primary General President Other (specify)						mo Item				Herod for Colorado 0/6/16	
s	UBTOTAL of Disbursements This Page (optional).					•				-	-	1300.00	
T T	OTAL This Period (last page this line number only	/)				►							

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE				PA	GE	222 OF 226			
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	22								
Any information copied from such Reports and Sta or for commercial purposes, other than using the n			d by any perso	on for the	purp	ose of	solicitir		ntributions			
			D 4 0									
UnitedHealth Group Incorporated	I PAC (Ur	itedHealth G	roup PAC)								
Full Name (Last, First, Middle Initial) A. Leslie Herod for Colorado	Date of Disbursement											
Mailing Address POB 7445		06 18 2018										
City Denver	State CO	Zip Code 80207		FEC Ide	entifi	cation I	lumbe	r	_			
Purpose of Disbursement Void - Leslie Herod for Colorado; check dated 10	/26/16	1	011	С								
Candidate Name		I	Category/				ion ID : 42349324 ach Disbursement this Period					
Herod, Leslie, , ,			Type	, iniouni			ob ul o o					
Office Sought: House Disburs	Primary	General		<u> </u>		Vo	id - Le:	slie H	100.00 erod for Colorado			
State: District:	Other (spe	city) 🔻		Mer	mo I	tem ch	eck dat	ed 10	0/26/16			
Full Name (Last, First, Middle Initial)												
B. Committee to Elect Mary Caferro	Committee to Elect Mary Caferro						Date of Disbursement					
Mailing Address 607 North Davis Street	06	ĺ	18			018						
City Helena	State MT	Zip Code 59601	FEC Ide	entifi	cation I	Numbe	r					
Purpose of Disbursement Void - Committee to Elect Mary Caferro; check d	011	С		ction ID	. 4024	0207						
Candidate Name	Category/				-		this Period					
Caferro, Mary, , MT Sen.,			Туре		-				170.00			
Office Sought: House Disburs	sement For:	General				Vc	id - Co		170.00 tee to Elect Mary			
State: District:	Other (spe	cify)		Mer	mo I	Ca			dated 7/26/16			
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)											
c. Committee to Elect Bob Keenan				Date of	UISI ,	D			YY			
Mailing Address PO Box 697	Mailing Address PO Box 697								018			
City Bigfork	State MT	Zip Code 59911		FEC Ide	entifi	cation I	lumbe	r				
Purpose of Disbursement	Purpose of Disbursement											
Candidate Name							: 423 4 sburse		this Period			
Keenan, Bob, , MT Sen.,	Туре	_	_									
Office Sought: House Disburs								. 7	170.00			
President	Primary Other (spe	General cify) ▼		Mer	mo I	K			tee to Elect Bob < dated 7/26/16			
State: District:												
SUBTOTAL of Disbursements This Page (optional)		••••••			y	9		- 440.00			
TOTAL This Period (last page this line number or	nly)		····· ►			,	,					

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE (check only				
		category of the Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
ight angle UnitedHealth Group Incorporated I	PAC (Un	itedHealth G	Group PAC)			
Full Name (Last, First, Middle Initial) A. Rothfuss for Senate	Date of Disbursement						
Mailing Address PO Box 1791	06 18 2018						
Laramie	State WY	Zip Code 82073		FEC Identification Number			
Purpose of Disbursement Void - Rothfuss for Senate; check dated 7/26/16			011	С			
Candidate Name				Transaction ID: 42349329 Amount of Each Disbursement this Period			
Rothfuss, Christopher, , WY Sen.,			Category/ Type	Amount of Lach Disbursement this Penod			
	ment For:			- 250.00			
State: District:	Primary Other (spec	ify) ▼		Void - Rothfuss for Senate; check Memo Item dated 7/26/16			
Full Name (Last, First, Middle Initial)							
B. Jodie Laubenberg Campaign							
Mailing Address PO Box 1154	Mailing Address PO Box 1154						
Wylie	State TX	Zip Code 75098		FEC Identification Number			
Purpose of Disbursement Void - Jodie Laubenberg Campaign; check dated 5	5/18/16	011	С				
Candidate Name			Category/	Transaction ID : 42349876 Amount of Each Disbursement this Period			
Laubenberg, Jodie, , TX Rep., Office Sought: House Disburse	ment For:		Туре	- 1000.00			
Senate President State: District:	Primary Other (spec	General ify)		Void - Jodie Laubenberg Campaig check dated 5/18/16			
Full Name (Last, First, Middle Initial) C. Cindy Burkett for State Representa	Full Name (Last, First, Middle Initial)						
Mailing Address 226 Magic Ln	, , , , , , , , , , , , , , , , , , ,						
City Sunnyvale	State TX	Zip Code 75182		FEC Identification Number			
Purpose of Disbursement							
Candidate Name			Category/	Transaction ID : 42349877 Amount of Each Disbursement this Period			
Burkett, Cindy, , TX Rep., Office Sought: House Disburse	ment For:		Туре	- 1000.00			
State: District:	Memo Item Kepresentative; check dated 5/18/16						
SUBTOTAL of Disbursements This Page (optional)				- 2250.00			
TOTAL This Period (last page this line number only							

S	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER PAGE 224 OF 226						
	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only							
			Summary Page	21b	22 23 26 27						
<u> </u>				28a	28b 28c x 29 30b						
	ny information copied from such Reports and State for commercial purposes, other than using the na										
$\left \right\rangle$	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Froup PAC)						
Α.	Full Name (Last, First, Middle Initial) Todd Hunter Campaign				Date of Disbursement						
					M M / D D / Y Y Y Y						
	Mailing Address 445 Cape Henry				06 18 2018						
	City Corpus Christi	State TX	Zip Code 78412		FEC Identification Number						
	Purpose of Disbursement		70412		С						
	Void - Todd Hunter Campaign; check dated 5/18/1	6		011	Transaction ID : 42349878						
	Candidate Name			Category/	Amount of Each Disbursement this Period						
	Hunter, Todd, , TX Rep., Office Sought: House Disburse	ement For:		Туре	- 1000.00						
	Senate	Primary	General		Void - Todd Hunter Campaign;						
	President	Other (spec	cify) 🔻		Memo Item check dated 5/18/16						
	State: District: Full Name (Last, First, Middle Initial)										
в.	Friends of Brandon Creighton	Date of Disbursement									
					M M / D D / Y Y Y Y						
	Mailing Address 2257 N Loop 336 Ste 140-366	06 18 2018									
	City Conroe	State TX	Zip Code 77304		FEC Identification Number						
	Purpose of Disbursement	С									
	Void - Friends of Brandon Creighton; check dated	5/18/16		011	Transaction ID : 42349879						
	Creighton, Brandon, , ,			Category/ Type	Amount of Each Disbursement this Period						
		ement For:		1900	- 1000.00						
	Senate	Primary	General		Void - Friends of Brandon						
	State: District:	Other (spec	cify)		Creighton; check dated 5/18/16						
_	Full Name (Last, First, Middle Initial)										
C.	Texans for Joan Huffman				Date of Disbursement						
	Mailing Address 3375 WestPark Dr. Ste 135				06 / D D / Y Y Y Y 2018						
	City	State	Zip Code		FEC Identification Number						
	Houston Purpose of Disbursement	ТХ	77005		С						
	Void - Texans for Joan Huffman; check dated 5/18	011	Transaction ID : 42349880								
	Candidate Name			Category/	Amount of Each Disbursement this Period						
	Huffman, Joan, , TX Sen., Office Sought: House Disburse	Туре	- 1000.00								
	Senate	Primary	General		Void - Texans for Joan Huffmar						
	President	Other (spec	cify) 🔻		Memo Item Kenck dated 5/18/16						
_	State: District:										
s	UBTOTAL of Disbursements This Page (optional).			••••••	- 3000.00						
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ΙT	<b>OTAL</b> This Period (last page this line number only	/)		•••••• •							

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EMIZED DISBURSEMENTS       Use separate schedule(s) for each category of the Detailed Summary Page         ny information copied from such Reports and Statements may not be sold or us for commercial purposes, other than using the name and address of any politic         NAME OF COMMITTEE (In Full)         UnitedHealth Group Incorporated PAC (UnitedHealth Of CunitedHealth Of Steineke for Assembly         Mailing Address N2352 Vandenbroek Road         City       State         Void - Steineke for Assembly: check dated 6/27/16         Candidate Name         Steineke, Jim, , WI Rep.,         Office Sought:       House         President       Disbursement For:         President       Other (specify)         Jim Marleau for State Senate       Primary         Mailing Address 3181 Sandoval       City         City       State         Mailing Address 3181 Sandoval       City         City       State Senate         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16         Candidate Name       Disbursement For:         General       President         Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16         Candidate Name       Disbursement For:         Mailing Address 3756 Top Rock       Primary         <	Interference only one)       21b       22       23       26       27         28a       28b       28c       29       30b         used by any person for the purpose of soliciting contributions from such committee to solicit contributions from such committee.       Interference         Officiency       Date of Disbursement       06       18       2018         Image: Particular of the purpose of the purpos
In the date of the date	e 210 222 23 20 27 28a 28b 28c x 29 30b used by any person for the purpose of soliciting contributions litical committee to solicit contributions from such committee. <b>Group PAC)</b> Date of Disbursement 06 18 22018 FEC Identification Number C Transaction ID : 42349881 Amount of Each Disbursement this Period - 500.00
y information copied from such Reports and Statements may not be sold or us for commercial purposes, other than using the name and address of any politic NAME OF COMMITTEE (in Full) UnitedHealth Group Incorporated PAC (UnitedHealth G Full Name (Last, First, Middle Initial) Steineke for Assembly Mailing Address N2352 Vandenbroek Road City Kaukauna State Zip Code Kaukauna Void - Steineke, Jim, , WI Rep., Office Sought: House Disbursement For: General President Other (specify) ▼ Full Name (Last, First, Middle Initial) Jim Marleau for State Senate Mailing Address 3181 Sandoval City Void - Jisbursement Void - State Senate Disbursement For: General President State City Code State Senate Disbursement For: General President City Code State Senate Disbursement For: General President State Senate Senate Disbursement For: General President State Senate S	28a       28b       28c       x       29       30b         used by any person for the purpose of soliciting contributions from such committee to solicit contributions from such committee.       Itical committee to solicit contributions from such committee.         In Group PAC)       Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Disbursement       Image: Date of Disbursement       Itical committee         Image: Date of Date of Disbursement       Image: Date of Date
for commercial purposes, other than using the name and address of any politic         NAME OF COMMITTEE (In Full)         UnitedHealth Group Incorporated PAC (UnitedHealth G         Full Name (Last, First, Middle Initial)         Steineke for Assembly         Mailing Address N2352 Vandenbroek Road         City       State         Yaling Address N2352 Vandenbroek Road         City       State         Void - Steineke for Assembly; check dated 6/27/16         Candidate Name         Steineke, Jim, , WI Rep.,         Office Sought:       House         District:         Full Name (Last, First, Middle Initial)         Jim Marleau for State Senate         Mailing Address 3181 Sandoval         City       State         City on the formary indicate Name         Mailing Address 3181 Sandoval         City on the formary indicate Name         Mailing Address 3181 Sandoval         City in Marleau for State Senate; check dated 7/26/16         Candidate Name         Marleau, James, , MI Sen.,         Office Sought:       House         Disbursement       Other (specify)         Void - Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City Round Rock       Tx	Itical committee to solicit contributions from such committee.         A Group PAC)         Date of Disbursement         06         18         2018         FEC Identification Number         C         Transaction ID : 42349881         Amount of Each Disbursement this Period         - 500.00
UnitedHealth Group Incorporated PAC (UnitedHealth G         Full Name (Last, First, Middle Initial)         Steineke for Assembly         Mailing Address N2352 Vandenbroek Road         City       State       Zip Code         Kaukauna       WI       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16       Candidate Name         Steineke, Jim, , WI Rep.,       Disbursement For:	011       Category/ Type         011       Category/ Type
Full Name (Last, First, Middle Initial)         Steineke for Assembly         Mailing Address N2352 Vandenbroek Road         City       State       Zip Code         Kaukauna       WI       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16       Candidate Name         Steineke, Jim, , WI Rep.,       Office Sought:       House       Disbursement For:         Senate       President       Other (specify)          State:       District:       Other (specify)          Full Name (Last, First, Middle Initial)       Jim Marleau for State Senate       Mil       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name       Malling Address 3181 Sandoval         City       State       Disbursement For:       Senate       Primary       General         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name       Malling Address 3756 Top Rock         City       State:       District:       Disbursement For:       General         President       Larry Gonzales Campaign       Mailing Address 3756 Top Rock       TX       78681         City       State       Zip Code       78681 <t< td=""><td>011       Category/ Type         011       Category/ Type</td></t<>	011       Category/ Type         011       Category/ Type
Steineke for Assembly         Mailing Address N2352 Vandenbroek Road         City       State       Zip Code         Kaukauna       WI       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16       Candidate Name         Steineke, Jim, , WI Rep.,       Disbursement For:	011       C         Category/ Type       Fach Disbursement this Period
Mailing Address N2352 Vandenbroek Road         City       State       Zip Code         Kaukauna       Wi       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16       Candidate Name         Steineke, Jim, , WI Rep.,       Disbursement For:       Senate         Office Sought:       House       Disbursement For:       General         President       Other (specify) ▼       State:       District:         Full Name (Last, First, Middle Initial)       Jim Marleau for State Senate       Mil       48360         Mailing Address 3181 Sandoval       City       State       Zip Code         City or Jim Marleau for State Senate; check dated 7/26/16       Candidate Name       Marleau, James, , MI Sen.,         Office Sought:       House       Disbursement For:       General         Office Sought:       House <td< td=""><td>011       C         Category/ Type       Fach Disbursement this Period</td></td<>	011       C         Category/ Type       Fach Disbursement this Period
City       State       Zip Code         Kaukauna       WI       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16       Candidate Name         Steineke, Jim, , WI Rep.,       Office Sought:       House       Disbursement For:         Senate       President       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Tull Name (Last, First, Middle Initial)       Jim Marleau for State Senate       Void - State Senate         Mailing Address 3181 Sandoval       City       State       Zip Code         City Lake Orion       MI       Zip Code       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name         Marleau, James, , MI Sen.,       Disbursement For:       Senate       Primary       General         Office Sought:       House       Disbursement For:       Senate       Other (specify)       State:       District:         Full Name (Last, First, Middle Initial)       Larry Gonzales Campaign       Mailing Address 3756 Top Rock       Zip Code         Round Rock       TX       78681       TX       78681         Purpose of Disbursement       Void - Larry Gonzales Campaign; check d	06 18 2018 FEC Identification Number C Transaction ID : 42349881 Amount of Each Disbursement this Period - 500.00
City       State       Zip Code         Kaukauna       WI       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16       Candidate Name         Steineke, Jim, , WI Rep.,       Office Sought:       House       Disbursement For:         Senate       President       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Tull Name (Last, First, Middle Initial)       Jim Marleau for State Senate       Void - State       Zip Code         Mailing Address 3181 Sandoval       City       State       Zip Code         City Lake Orion       Ma       Zip Code       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name         Marleau, James, , MI Sen.,       Disbursement For:       Senate       Primary       General         Office Sought:       House       Disbursement For:       Senate       Other (specify)       State:       District:         Full Name (Last, First, Middle Initial)       Larry Gonzales Campaign       Mailing Address 3756 Top Rock       Zip Code       TX       78681         City       State       Zip Code       TX       78681       Purpose of Disbursement       Vo	011       Category/ Type         Transaction ID : 42349881         Amount of Each Disbursement this Period         - 500.00
Kaukauna       WI       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16	011       C         Category/ Type       Transaction ID : 42349881         Amount of Each Disbursement this Period         - 500.00
Kaukauna       WI       54130         Purpose of Disbursement       Void - Steineke for Assembly; check dated 6/27/16	011       C         Category/ Type       Transaction ID : 42349881         Amount of Each Disbursement this Period         - 500.00
Void - Steineke for Assembly; check dated 6/27/16         Candidate Name         Steineke, Jim, , WI Rep.,         Office Sought:       House         President       Disbursement For:         State:       District:         Full Name (Last, First, Middle Initial)         Jim Marleau for State Senate         Mailing Address       3181 Sandoval         City       State       Zip Code         Lake Orion       Mil       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name         Marleau, James, , MI Sen.,       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       District:       Other (specify)       General         Full Name (Last, First, Middle Initial)       Larry Gonzales Campaign       Mailing Address 3756 Top Rock       Tx       Zip Code         City       State       Zip Code       TX       78681       Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	011 Category/ Type Type D11 Transaction ID : 42349881 Amount of Each Disbursement this Period - 500.00
Candidate Name         Steineke, Jim, , WI Rep.,         Office Sought:       House         Senate       Disbursement For:         State:       District:         Full Name (Last, First, Middle Initial)       Jim Marleau for State Senate         Mailing Address       3181 Sandoval         City       State       Zip Code         Lake Orion       Mi       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name         Marleau, James, , MI Sen.,       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       District:       Primary       General         Office Sought:       District:       Disbursement For:       General         President       Other (specify)       State:       District:         Full Name (Last, First, Middle Initial)       Larry Gonzales Campaign       Mailing Address 3756 Top Rock         City       State       Zip Code       78681         Purpose of Disbursement       Yoid - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	011 Category/ Type Type D11 Transaction ID : 42349881 Amount of Each Disbursement this Period - 500.00
Steineke, Jim, , WI Rep.,         Office Sought:       House       Disbursement For:         Senate       President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Jim Marleau for State Senate         Mailing Address 3181 Sandoval         City       State         Lake Orion       Mil         Purpose of Disbursement         Void - Jim Marleau for State Senate; check dated 7/26/16         Candidate Name         Marleau, James, , MI Sen.,         Office Sought:       House         President       Disbursement For:         Senate       Primary         Office Sought:       House         District:       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State       Zip Code         Round Rock       TX       78681         Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	Category/ Type - 500.00
Office Sought:       House       Disbursement For:         Senate       President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Jim Marleau for State Senate         Mailing Address 3181 Sandoval         City       State         Lake Orion       Mil         Purpose of Disbursement         Void - Jim Marleau for State Senate; check dated 7/26/16         Candidate Name         Marleau, James, , MI Sen.,         Office Sought:       House         President       Disbursement For:         Senate       Primary         General         Office Sought:       House         District:       Disbursement For:         Senate       Primary         President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State       Zip Code         Round Rock       TX       78681         Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	Type
Senate       Primary       General         Other (specify)       ✓         Full Name (Last, First, Middle Initial)       Jim Marleau for State Senate         Mailing Address 3181 Sandoval       City         City       State       Zip Code         Lake Orion       Mil       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name         Marleau, James, , MI Sen.,       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       District:       President       Other (specify)         State:       District:       Other (specify)       General         Full Name (Last, First, Middle Initial)       Larry Gonzales Campaign       Mailing Address 3756 Top Rock         City       State       Zip Code       TX       78681         Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	
State:       District:         Full Name (Last, First, Middle Initial)         Jim Marleau for State Senate         Mailing Address 3181 Sandoval         City       State         Lake Orion       MI         Purpose of Disbursement         Void - Jim Marleau for State Senate; check dated 7/26/16         Candidate Name         Marleau, James, , MI Sen.,         Office Sought:       House         President       Disbursement For:         Senate       Primary         General       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)       President         Larry Gonzales Campaign       Other (specify)         Mailing Address 3756 Top Rock       Tx         City       State         Round Rock       TX         Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name       Gandidate Name	
State:       District:         Full Name (Last, First, Middle Initial)         Jim Marleau for State Senate         Mailing Address 3181 Sandoval         City       State         Lake Orion       MI         Purpose of Disbursement         Void - Jim Marleau for State Senate; check dated 7/26/16         Candidate Name         Marleau, James, , MI Sen.,         Office Sought:       House         President       Disbursement For:         Senate       Primary         General         Office Sought:       House         District:       Disbursement For:         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name	
Full Name (Last, First, Middle Initial)         Jim Marleau for State Senate         Mailing Address 3181 Sandoval         City       State         Lake Orion       MI         Purpose of Disbursement         Void - Jim Marleau for State Senate; check dated 7/26/16         Candidate Name         Marleau, James, , MI Sen.,         Office Sought:       House         President       Disbursement For:         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name	Memo Item check dated 6/27/16
Jim Marleau for State Senate         Mailing Address 3181 Sandoval         City       State       Zip Code         Lake Orion       MI       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Candidate Name         Marleau, James, , MI Sen.,       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       House       Disbursement For:       General         Office Sought:       District:       Other (specify)       General         State:       District:       Other (specify)       General         Full Name (Last, First, Middle Initial)       Larry Gonzales Campaign       Mailing Address 3756 Top Rock         City       State       Zip Code       TX       78681         Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	
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Lake Orion       MI       48360         Purpose of Disbursement       Void - Jim Marleau for State Senate; check dated 7/26/16       Image: Check dated 7/26/16         Candidate Name       Marleau, James, , MI Sen.,       Image: Check dated 7/26/16         Office Sought:       House       Disbursement For:         Senate       Primary       General         Other (specify)       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name	06 18 2018
Purpose of Disbursement Void - Jim Marleau for State Senate; check dated 7/26/16 Candidate Name Marleau, James, , MI Sen., Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Larry Gonzales Campaign Mailing Address 3756 Top Rock City State Zip Code Round Rock TX 78681 Purpose of Disbursement Void - Larry Gonzales Campaign; check dated 8/11/16 Candidate Name	FEC Identification Number
Void - Jim Marleau for State Senate; check dated 7/26/16   Candidate Name   Marleau, James, , MI Sen.,   Office Sought:   House   Disbursement For:   Senate   President   Other (specify)   Full Name (Last, First, Middle Initial) Larry Gonzales Campaign Mailing Address 3756 Top Rock   City   Round Rock   Purpose of Disbursement   Void - Larry Gonzales Campaign; check dated 8/11/16	
Candidate Name       Marleau, James, , MI Sen.,         Office Sought:       House       Disbursement For:         Senate       Primary       General         President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name	
Marleau, James, , MI Sen.,         Office Sought:       House         Senate       Primary         President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16	011 Transaction ID : 42349882
Office Sought:       House       Disbursement For:         Senate       Primary       General         President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name	Category/ Amount of Each Disbursement this Period
Senate       Primary       General         President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name	Туре
President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State         Round Rock       TX         Purpose of Disbursement         Void - Larry Gonzales Campaign; check dated 8/11/16         Candidate Name	- 500.00
State:     District:       Full Name (Last, First, Middle Initial)       Larry Gonzales Campaign       Mailing Address 3756 Top Rock       City     State       Round Rock     TX       Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16	
Full Name (Last, First, Middle Initial)         Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State       Zip Code         Round Rock       TX       78681         Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	Memo Item check dated 7/26/16
Larry Gonzales Campaign         Mailing Address 3756 Top Rock         City       State       Zip Code         Round Rock       TX       78681         Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16       Candidate Name	
Mailing Address 3756 Top Rock       City     State       Round Rock     TX       Purpose of Disbursement       Void - Larry Gonzales Campaign; check dated 8/11/16	
City     State     Zip Code       Round Rock     TX     78681       Purpose of Disbursement     Void - Larry Gonzales Campaign; check dated 8/11/16     Image: Campaign of the second	Date of Disbursement
City     State     Zip Code       Round Rock     TX     78681       Purpose of Disbursement     Void - Larry Gonzales Campaign; check dated 8/11/16     Image: Campaign of the second	
Round Rock     TX     78681       Purpose of Disbursement     Void - Larry Gonzales Campaign; check dated 8/11/16     Candidate Name	06 18 2018
Round Rock     TX     78681       Purpose of Disbursement     Void - Larry Gonzales Campaign; check dated 8/11/16     Candidate Name	
Purpose of Disbursement Void - Larry Gonzales Campaign; check dated 8/11/16 Candidate Name	FEC Identification Number
Void - Larry Gonzales Campaign; check dated 8/11/16 Candidate Name	
Gonzales, Larry, , TX Rep.,	
	011 Transaction ID : 42349883
Office Sought: House Disbursement For:	011     Transaction ID : 42349883       Category/     Amount of Each Disbursement this Period
Senate Primary General	011 Transaction ID : 42349883
President Other (specify)	011 Category/ Type Type - 1000.00
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SUBTOTAL of Disbursements This Page (optional)	011 Category/ Type Type Void - Larry Gonzales Cam check dated 8/11/16
	011 Category/ Type Type Void - Larry Gonzales Cam Memo Item Concernment
OTAL This Period (last page this line number only)	011 Category/ Type Type Void - Larry Gonzales Cam Memo Item Concernment

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 226 OF 226						
TTEMIZED DISBORSEMENTS	for each category of the Detailed Summary Page	21b 28a	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
Any information copied from such Reports and State or for commercial purposes, other than using the na			son for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (UnitedHealth	Group PAC	;)						
Full Name (Last, First, Middle Initial) A. Friends of Matt Dolan Mailing Address 2226 Edgeview Dr	Date of Disbursement								
City Hudson	State Zip Code OH 44236		FEC Identification Number						
Purpose of Disbursement Void - Friends of Matt Dolan; check dated 9/6/16		011	C Transaction ID : 42349884						
Candidate Name Dolan, Matt, , , Office Sought: House Disburse	ement For:	Category/ Type	Amount of Each Disbursement this Period						
Senate       President	Primary General Other (specify) ▼		Void - Friends of Matt Dolan; che Memo Item dated 9/6/16						
Full Name (Last, First, Middle Initial)  3.	State: District: Full Name (Last, First, Middle Initial)								
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Purpose of Disbursement Candidate Name		Category/	Amount of Each Disbursement this Period						
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре							
State: District:	]		Memo Item						
· · · · · · · · · · · · · · · · · · ·			Date of Disbursement						
Mailing Address									
City Purpose of Disbursement	State Zip Code		FEC Identification Number						
Candidate Name		Category/ Type	Amount of Each Disbursement this Period						
Senate	ement For: Primary General	1940	Memo Item						
State: District:	President     Other (specify) ▼       State:     District:								
SUBTOTAL of Disbursements This Page (optional)		•••••	- 500.00						
TOTAL This Period (last page this line number only	у)	••••••	21510.00						