FEC FORM 3X	AND DI	OF RECE	NTS	(Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT	 Example: over the 	If typing, type nes.	12FE4M5	
	up Incorporated F	PAC (UnitedHealth	Group PAC)		
ADDRESS (number and str Check if differen than previously	Suite 200	nia Ave, NW			20004
reported. (ACC)					
2. FEC IDENTIFICATIO	ON NUMBER ▼	CITY ▲	:	STATE 🔺	ZIP CODE
C C00274431		3. IS THIS REPORT	(NEW (N) OR	AMEI (A)	NDED
 4. TYPE OF REPOR (Choose One) (a) Quarterly Reports April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterly Re January 31 	port (Q1) port (Q2) port (Q3)	Election rt for the: Conv	May 20 (M5) Jun 20 (M6) Jul 20 (M7) ry (12P) ention (12C)	Aug 20 X Sep 20 Oct 20 General (12 Special (12	(M9) Dec 20 (M12) (Non-Election Year Only) (M10) Jan 31 (YE) 2G) Runoff (12R) S)
Year-End Re July 31 Mid- Report (Non- Year Only) (I Termination (TER)	Year (d) 30-D. election POS MY) Repo		al (30G)	Runoff (30F	State of Special (30S) in the State of
5. Covering Period	08 / D D /	2017 thr	bugh 08	/ D D / 31	2017
I certify that I have examinated and the second sec	Sherwood, Sus		e and belief it is tru	ie, correct and c	complete.
Signature of Treasurer	Sherwood, Susan, , ,	[Elect	onically Filed]	Date 09	/ D D / Y Y Y Y 20 / 2017
NOTE: Submission of false	, erroneous, or incomplet	e information may subject	he person signing th	nis Report to the	penalties of 52 U.S.C. § 30109
Office Use Only					FEC FORM 3X Rev. 05/2016

09/20/2017 21 : 19

PAGE 1 / 271

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	eport Covering the Period: From: 08	M / D D / Y Y Y Y 3 01 2017 To	o: 08 / 0 0 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		242591.24
	(b) Cash on Hand at Beginning of Reporting Period	614395.03	
	(c) Total Receipts (from Line 19)	123172.64	1009034.74
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	737567.67	1251625.98
7.	Total Disbursements (from Line 31)	9500.00	523558.31
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	728067.67	728067.67
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:	/ 01 / 2017 To:	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
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Dalitical Committees		
Than Political Committees (i) Itemized (use Schedule A)	119420.06	855318.32
(ii) Unitemized	3752.58	145016.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	123172.64	1000334.74
(b) Political Party Committees	0.00	0.00
 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	123172.64	1000334.74
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
 (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made 4. Sedeval Contributions Made 	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	7500.00
(Dividends, Interest, etc.)	0.00	1200.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	123172.64	1009034.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)►	123172.64	1009034.74

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B
I. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees		
and Other Political Committees Independent Expenditures	9500.00	499000.00
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	1208.31
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs) (d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	1208.31
Other Disbursements (Including		
Non-Federal Donations)	0.00	23350.00
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
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9500.00	523558.31
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9500.00	523558.31
L		

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form	3X	(Rev.	05/2016)
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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	123172.64
1				
4			-	0.00
				400470.04
4	7		- 7	123172.64
				0.00
 4	7		-7	0.00
1				0.00
	7	 	-7-	0.00
1				0.00
-	-7-	-	-7-	0.00

1000334.74 1208.31 999126.43 0.00 0.00 0.00

COLUMN B

Calendar Year-to-Date

Page 5

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

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 usir			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Mide A. Walker, Jonathan, , ,	dle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 136 Devonwood Dr	04-14-	Zin Ood-	08 / D D / Y Y Y Y 23 2017							
City Pittsburgh	State PA	Zip Code 15241-2235	Transaction ID : 41313508							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Med Express		upation (for Individual) sident/CFO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00]							
Full Name of Individual (Last, First, Mido B. STREB, DEBORAH S, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2201 NORTH STAR RO	AD		08 31 2017							
City UPPER ARLINGTON	State OH	Zip Code 43221-3810	Transaction ID : PR1159794147039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Mido C. WATSON III, JAMES S, , ,	dle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 6520 SHENANDOAH D			08 / D D / Y Y Y Y 2017							
City LINCOLN	State NE	Zip Code 68510-5159	Transaction ID : PR1159806047039							
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) c Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 425.00	P/R Deduction (\$25.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		5078.00							
TOTAL This Period (last page this line nur	mber only)	•••••								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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PAGE 7 OF

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	MIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12			
	information copied from such Reports and Stat or commercial purposes, other than using the n										17 S	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)								
	Full Name of Individual (Last, First, Middle Initial GAUDIO, JOSEPH G, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
Ν	Jailing Address 4842 E MOUNTAIN VIEW RD				м м 08	1	31) / Y	ү ү 2017	Y		
	City PARADISE VALLEY	State AZ	Zip Code 85253-1539					PR11598 Receipt th				
	EC ID number of contributing ederal political committee.	С							90).90		
ι	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emc	ltem					
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 545.40	i	P/R Ded	uctio	on (\$45.	.45 Bi-We	eekly)			
Б. В.	Full Name of Individual (Last, First, Middle Initial WICHMANN, DAVID S, , ,	Name of Individual (Last, First, Middle Initial) or Full Organization Name										
Ν	Aailing Address 7000 ANTRIM ROAD				M M / 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 EDINA	State MN	Zip Code 55439-1708		Transaction ID : PR1159814747039 Amount of Each Receipt this Period							
	EC ID number of contributing ederal political committee.	С		384.60								
- 1 L	Name of Employer (for Individual) Inited HealthCare Services Inc	Occu Pres		Memo Item								
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	F	P/R Deduction (\$192.30 Bi-Weekly)							
	ull Name of Individual (Last, First, Middle Initial MEAD, BRUCE E, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
_	Mailing Address 1232 GRAY BRANCH RD	1			08	/	31		2017 Y			
	City MCKINNEY	State TX	Zip Code 75071-6495					PR1159				
	EC ID number of contributing ederal political committee.	С			<u> </u>		,	y	553	3.44		
(Name of Employer (for Individual) Dptum Services, Inc	Occu SVP	upation (for Individual) 9 SIs		Memo Item							
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2509.44	P/R Deduction (\$276.72 Bi-Weekly)								
su	BTOTAL of Receipts This Page (optional)		•				, .	. ,	1028	3.94		
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SCHEDULE A (FEC Form 3X) DEOEIDTO

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PAGE 8 OF

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	2	4 11a		11b	11c	12					
	y information copied from such Reports and Stal for commercial purposes, other than using the n													
$\overline{)}$	NAME OF COMMITTEE (In Full)		Inited Lookh Crown DA											
/	UnitedHealth Group Incorporated	PAC (C		C)										
Α.	Full Name of Individual (Last, First, Middle Initial PENSHORN, JOHN S, , ,) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 120 BLACK OAKS LANE				м м 08	1	31) / Y	ү 2017	Y				
	City WAYZATA	State MN	Zip Code 55391-1363					PR11598 leceipt th						
	FEC ID number of contributing federal political committee.	С			[.			- 45-	384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) UnitedHlth Group		Me	emc	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate `	/ear-to-Date ▼ 3269.10	F	P/R Ded	ucti	on (\$192	2.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Initial KALLMEYER, PAUL D, , ,) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 468 HERALD DR			08 31 2017										
	City AMBLER	State PA	Zip Code 19002-1530	-	Transaction ID : PR1159817447039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		100.00										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Depu		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 850.00	F	P/R Dedu	uctio	on (\$50.	00 Bi-We	ekly)					
С.	Full Name of Individual (Last, First, Middle Initia QUIRK, THOMAS J, , ,) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 6458 ORCHID LANE	1			08	1	31) / Y	2017	Y				
	City DALLAS	State TX	Zip Code 75230-4121					PR11598 leceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>		y :		192.	_				
Name of Employer (for Individual) United HealthCare Services Inc			Occupation (for Individual) HIth Care Initiv				Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)										
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PAGE 9 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 (UnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle BARATZ, MEREDITH C, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 1850 SOLEDAD AVENUE	State	Zip Code	08 / D D / Y Y Y Y 31 2017							
City LA JOLLA	CA	92037-3820	Transaction ID : PR1159820047039							
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. FALK, DAVID J, , ,	Date of Receipt									
Mailing Address 323 LAWRENCE AVE	08 31 2017									
City HIGHLAND PARK	State NJ	Zip Code 08904-1851	Transaction ID : PR1159820247039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. MIGLIORI, RICHARD J, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address PO BOX 72	1		08 / D D / Y Y Y Y 2017							
City WAYZATA	State MN	Zip Code 55391-0072	Transaction ID : PR1159827447039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, UHG Chief Medical Officer	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			440.68							
TOTAL This Period (last page this line numb	er only)	·····								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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PAGE 10 OF

ı ب	EMIZED RECEIPTS	Use separate schedule(s)			(check only one)							
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17	
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	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini RIVET, JEANNINE M, , ,	tial) or Full O	rganization Name	D	ate of	f Re	eceipt					
	Mailing Address 4305 TRILLIUM WAY			м м 08	1	31) / Y	ү 20	17	Ŷ		
	City MINNETRISTA	State MN	Zip Code 55364-7708					PR1159 Receipt th				
	FEC ID number of contributing federal political committee.	С					- 1 -			384.6	0	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHlth Grp		М	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/f	R Ded	ucti	on (\$19)	2.30 Bi-V	Veekly	y)		
в.	Full Name of Individual (Last, First, Middle Ini MATTEO, MICHAEL C, , ,	tial) or Full O	rganization Name	D	ate of	f Re	eceipt					
	Mailing Address 25 JEREMIAHS WAY			M M / 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	State CT		Transaction ID : PR1551133447039								
	SOUTH GLASTONBURY		06073-3621	A	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) ef Growth Off		М	emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1961.46	P/F	P/R Deduction (\$115.38 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Ini CARR, ANTHONY R, , ,	tial) or Full O	rganization Name	D	ate of	f Re	eceipt					
	Mailing Address 5201 THOROUGHBRED LN				08 ^M	/	31		201	Y 17	Ŷ	
	City SOUTHWEST RANCHES	State FL	Zip Code 33330-2406				-	PR1554 Receipt th				
	FEC ID number of contributing federal political committee.	С					<u>,</u>	. ,		476.1	3	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP PEOs Trusts		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$238.09 Bi-Weekly)					y)				
s	UBTOTAL of Receipts This Page (optional)						,	. ,	1(091.54	4	
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SCHEDULE A (FEC Form 3X) DEOEIDTO

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PAGE 11 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	13 14 15 16 r the purpose of soliciting contributions from such comminities contribution from such contribution from suc		<u> </u>						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the		pose of	soliciting	contribut					
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I MILLER, KATHERINE V, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt							
Mailing Address 2321 HARBOR LAKE DRIV	E											
City ORANGE PARK	State FL	Zip Code 32003-7799	Transaction ID : PR1554324347039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt		Memo	ttem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R De	ducti	on (\$38.	46 Bi-We	eekly)					
Full Name of Individual (Last, First, Middle I B. ANDERSON, CRAIG C, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt							
Mailing Address 47 AMATO CIRCLE			08 31 2017									
City WETHERSFIELD	State CT	Zip Code 06109-3971)				
FEC ID number of contributing federal political committee.	С		457.86									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn Pres Ntwk Mgmt	1	Vemo	tem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2939.46	P/R Deduction (\$228.93 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. ERICKSON, KAREN L, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt							
Mailing Address 15348 RED OAKS ROAD S			08		31		2017					
City PRIOR LAKE	State MN	Zip Code 55372-1834						9				
FEC ID number of contributing federal political committee.	C				y .	9	384.6	60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	_ U '	Memo	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)					,		919.3	88				
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PAGE 12 OF

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	D RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12				
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\	ercial purposes, other than using the	name and a	doress of any political committee	to so	licit con	trid	utions n	rorm sucr	Committ	ee.			
	COMMITTEE (In Full) Health Group Incorporated	d PAC (L	JnitedHealth Group PA	C)									
	of Individual (Last, First, Middle Initia ETTO, ERNEST, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt						
Mailing Ad	dress 3062 COMFORT ROAD				M M 08	/	D D D 31	/ Y	ү ү 2017	Y			
City NEW HOP	ΡĒ	State PA	Zip Code 18938-5622		Transaction ID : PR1575958147039 Amount of Each Receipt this Period								
	umber of contributing litical committee.	C		153.84									
United Hea	Employer (for Individual) althCare Services Inc		upation (for Individual) Ntwk Prgms		Me	emo	Item						
Receipt Fo		Aggregate	Year-to-Date ▼ 1307.64	Р	/R Dedu	uctic	on (\$76.)	92 Bi-We	ekly)				
	of Individual (Last, First, Middle Initiat, LEE D, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt						
Mailing Ad	dress 5033 PARK TERRACE				08	/	D D D 31	/ Y	2017	Y			
City		State MN	Zip Code						5854703	9			
EDINA		IVIIN	55436-1098	- '	Amount	of	Each R	eceipt th	is Period				
	umber of contributing litical committee.	С			60								
Name of I Optum Ser	Employer (for Individual) vices, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item									
Receipt Fo		Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
	of Individual (Last, First, Middle Initia , JOHN W, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	dress 568 HAWTHORNE WOODS D				08	/	D 31	/ Y	2017	Y			
City EAGAN		State MN	Zip Code 55123-3059				-		5974703 is Period	9			
	umber of contributing litical committee.	С					y	.,	409.	70			
United He	Employer (for Individual) althCare Services Inc	Occu VP T	upation (for Individual) Fax		Me	emo	Item						
Receipt Fo		Aggregate	Year-to-Date ▼ 3156.35	P/R Deduction (\$204.85 Bi-Weekly					/eekly)				
SUBTOTAL	of Receipts This Page (optional)			.					948. <i>′</i>	14			
TOTAL This	Period (last page this line number o	nly)					,	,					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 13 OF

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	y information copied from such Reports and State for commercial purposes, other than using the na														
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Unite	edHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) CAHILL, LAURA A, , ,	or Full O	Organiz	ation Name		Date of	Re	ecei	ipt						
	Mailing Address 119 SILVER BEECH ROAD					м м 08	/	[D D D		/ Y	y y 2017	Y		
	City	State	Z	ip Code		Trans	acti	ion	ID :	PR	15808	636470	39		
	SOUTHBURY	СТ		06488-2786	_ /	Amount	t of	Ea	ach R	ece	eipt thi	s Perio	t		
	FEC ID number of contributing federal political committee.	С				28.08									
	Name of Employer (for Individual) Optum Services, Inc		•	n (for Individual) n Sales Executive		M	emo	o Ite	em						
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-t	o-Date ▼ 238.68	P	/R Ded	uctio	on	(\$14.	04	Bi-We	ekly)			
В.	Full Name of Individual (Last, First, Middle Initial) WEBB, ROBERT THOMAS, , ,	or Full O	Organiz	ation Name		Date of	Re	ecei	ipt						
	Mailing Address 4516 DREXEL AVENUE	1				M M 08	/	Ľ	D D 31]	/ Y	2017	Y		
	City	State		ip Code		Transaction ID : PR1580865347039									
	EDINA	MN		55424-1130		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С						,			-1	384	.60		
	Name of Employer (for Individual) United HealthCare Services Inc		•	n (for Individual) edHlth Grp		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-t	o-Date ▼ 3269.10	P	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial) HUGHES, RICHARD J, , ,	or Full O	Organiz	ation Name		Date of	Re	ecei	ipt						
	Mailing Address 3905 COUNTY ROAD 44					м м 08	1	[D D 31		/ Y	ү ү 2017	Y		
	City	State		ip Code								041470			
	MINNETRISTA	MN		55364-9572		Amount	of	Ea	ach R	ece	eipt this	s Perio	k		
	FEC ID number of contributing federal political committee.	С						y			y	200	.00		
	Name of Employer (for Individual) United HealthCare Services Inc		•	n (for Individual) of Human Capital		M	emo	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Year-t	no-Date ▼ 1700.00	 P	/R Ded	uctio	on	(\$100	0.00) Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•••••				1		Ì	,	612	.68		
т	OTAL This Period (last page this line number only	y)		•••••				7		I	-				

Use separate schedule(s)

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PAGE 14 OF

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Any information copied from such Reports and											
or for commercial purposes, other than using t	he name and a	ddress of any political committee	e to solicit c	ontrib	outions f	rom such	n committe	96.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle JOHNSON, THAD C, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 9741 GLACIER BAY			M 08		31	/ Y	y y 2017	Y			
City EDEN PRAIRIE	State MN	Zip Code 55347-2615	Transaction ID : PR1596304347039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С			_	-ge 1	-	384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel		Memo	o Item						
Receipt For: Primary General Other (specify) \mathbf{v}	Aggregate	Year-to-Date ▼ 3269.10	P/R De	≥ducti	ion (\$192	2.30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Middle B. SCHUMACHER, DANIEL J, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 5401 LARADA LANE			M 08		31	/ Y	2017	Y			
City EDINA	State MN	Zip Code 55436-1024			-		0544703 is Period)			
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Pres & COO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle THEISEN, SCOTT E, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 1950 MEADOWWOODS Th			M 08	3	31		2017				
City LONG LAKE	State MN	Zip Code 55356-9312					30564703 is Period	9			
FEC ID number of contributing federal political committee.	С		Ē	_	y		38.4	16			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Ops		Memo	o Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1326.91	P/R D	əducti	ion (\$19.	.23 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional).				_	, .	9	807.6	6			
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 15 OF

•••		Detailed Summary Page							11b	11c	12	2		
						13			14	15	16	-	17	
	y information copied from such Reports and S for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Un	itedHealth Group PA	AC)									
	Full Name of Individual (Last, First, Middle Init			· · · · ·	,									
Α.	OBERRENDER, ROBERT W, , ,					Date	of I	Re	ceipt					
	Mailing Address 4505 MOORLAND AVENUE					™ 08		/	D D D 31	/ Y	y 201		Y	
	City	State		Zip Code		Tra	nsa	cti	on ID : I	PR15963	807047	7039		
	EDINA	MN		55424-1158		Amou	int (of	Each Re	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С							,		3	84.6	0	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) easurer			Mer	mo	Item					
	Receipt For:	Aggregate	Yea	ur-to-Date ▼										
	Primary General				F	P/R D	edu	ctic	on (\$192	.30 Bi-W	(eekly)			
	Other (specify) v	L	7	3269.10										
В.	Full Name of Individual (Last, First, Middle Init ANDERSON, KENNETH J, , ,	ial) or Full C	Orga	nization Name		Date of Receipt								
	Mailing Address 12700 NE 245TH AVE					M 08		1	31	/ Y	2017		Y	
	City	State		Zip Code		Tra	nsa	cti	on ID : F	PR15963	09247	039		
	BRUSH PRAIRIE	WA		98606-7761		Amou	int (of	Each Re	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С					39.8	2						
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) iness Development Exe	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ur-to-Date ▼ 320.86	P/R Deduction (\$19.91 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Init	ial) or Full C	Orga	nization Name	_									
C.	ANDERSON, MICHAEL J, , ,					Date	of I	Re	ceipt					
	Mailing Address 17907 INVERNESS CURVE					M 08	3	/	31	. L	2017	,		
	City EDEN PRAIRIE	State MN		Zip Code 55347-2155						PR15963				
			_	55547-2155		Amoι	int (of	Each Re	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С				Ē	_		y			28.0	0	
	Name of Employer (for Individual)		•	tion (for Individual)			Mei	mo	Item					
	United HealthCare Services Inc	VP I	Med	Clin Ops	_									
	Receipt For: Primary General	Aggregate	e Yea	ur-to-Date ▼	_ .		l		··· (@4.4.)					
	Other (specify)		-	238.00	P/R Deduction (\$14.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)				•				, .	,	4	52.42	2	
т	OTAL This Period (last page this line number of	only)			•	Γ.			,			-40		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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PAGE 16 OF

177			Use separate schedule(s)	(ch	neck only	/ or	ne)	L			
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	47	
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
$\overline{\}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated		InitedHealth Group PA								
	officed realin Group incorporated			(0)							
Α.	Full Name of Individual (Last, First, Middle Initia FLYNN, DIANE BEDNAR, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt				
	Mailing Address 3318 FOXRIDGE CIRCLE				м м 08	/	D D D 31) / Y	ү ү 2017	Ŷ	
	City TAMPA	State FL	Zip Code 33618-2149					PR15963 leceipt th			
	FEC ID number of contributing federal political committee.	С							78.		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) n Exec Dir		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 663.00		P/R Dedi	uctio	on (\$39.	.00 Bi-We	eekly)		
	Full Name of Individual (Last, First, Middle Initia DAVIDSON, TRACY L, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt				
	Mailing Address 6058 HARBOUR TOWN CIR				M M 08	1	D D D 31	/ Y	y y 2017	Y	
	City WESTERVILLE	State OH	Zip Code 43082-8144	_			-	PR15963 leceipt th		-	
	FEC ID number of contributing federal political committee.	С				U			384.	_	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Hlth	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia GARCIA, STEVAN D, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt				
	Mailing Address 1375 GRAYHAWK PLACE				08	1	31) / Y	ү 2017	Y	
	City LARKSPUR	State CO	Zip Code 80118-8623					PR1596: leceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y :		0.	00	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu SVP	pation (for Individual) Ops		Me	emc) Item				
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 4999.90		P/R Ded	ucti	on (\$0.0	00 Bi-Wee	ekly)		
s	UBTOTAL of Receipts This Page (optional)			•					462.	60	
	OTAL This Period (last page this line number on		•	- •	<u> </u>		, . , .	,			

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PAGE 17 OF

	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12									
			13 14 15 16 17 version for the purpose of soliciting contributions a to collicit contributions from such committee									
NAME OF COMMITTEE (In Full)	ig the name and a	doress of any political committee	e to solicit contributions from such committee.									
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Mide A. HEUMANN, KURT A, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9825 GERALD DR			08 / D D / Y Y Y Y 08 31 2017									
City SAINT LOUIS	State MO	Zip Code 63128-1767	Transaction ID : PR1596313747039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		40.00									
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 ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Mide B. MALLATT, KATHLEEN A, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4304 SOUTH 167 AVEN			08 31 / Y Y Y Y 2017									
City	State NE	Zip Code	Transaction ID : PR1596315447039									
OMAHA		68135-1353	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
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 ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Mide C. ROSENTHAL, DANIEL I, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 8 VIA HERMOSA			08 / D D / Y Y Y Y 2017									
City ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR1596317347039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)		501.52									
TOTAL This Period (last page this line nu	mber only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 18 OF

		Detailed Summary Page	×	11a]11b		11c	12				
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Any information copied from such Reports an or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle RUTH, KEVIN J, , ,	Initial) or Full C	rganization Name		ate of	Re	eceip	t						
Mailing Address 16621 ALEXANDER MAN	OR DRIVE			м м 08	/		^р 31	/ Y	2017	Y			
City SILVER SPRING	State MD	Zip Code 20905-5028	A						31744703 iis Period	9			
FEC ID number of contributing federal political committee.	С			_		- -		-	384.	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9, HIth Advancement		Me	emo) Iter	m						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/	R Dedi	uctio	on (\$	\$192.3	30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Middle B. STURKEY, DAVID C, , ,	Initial) or Full C	rganization Name		ate of	Re	eceip	t						
Mailing Address 1941 MARINA ROAD				08 / D D / Y Y Y 2017									
City IRMO	State SC	Zip Code 29063-8579		Transaction ID : PR1596318447039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C			78.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt		Me	emo) Iter	n						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 663.00	P/I	R Dedu	uctic	on (\$	39.00) Bi-We	ekly)				
Full Name of Individual (Last, First, Middle TODD, JEFFREY ALAN, , ,	Initial) or Full C	rganization Name		Date of	Re	eceip	t						
Mailing Address 467 PRAIRIE WAY SOUT				м м 08	/		^р 31		2017				
City BAYPORT	State MN	Zip Code 55003-1607	A						31904703 iis Period	9			
FEC ID number of contributing federal political committee.	С			_		y		7	50.	00			
Name of Employer (for Individual) United HealthCare Services Inc Receipt For: Primary General Other (specify)	VP	upation (for Individual) Jnderwriting Year-to-Date ▼ 425.00	P/			o Iter on (\$		0 Bi-We	eekly)				
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PAGE 19 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	47							
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	AC)								
Full Name of Individual (Last, First, Middle I TURNAU, CHRIS B, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address PO BOX 43216 3741 DUNBAR KNOLL			M M / D D / Y Y Y Y 08 31 2017	Y							
City	State	Zip Code	Transaction ID : PR1596319147039 Amount of Each Receipt this Period								
BROOKLYN PARK	MN	55443-0216									
FEC ID number of contributing federal political committee.	С		76.9)2							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	VP	Tax									
Receipt For:	Aggregate	Year-to-Date V									
Primary General		050.00	P/R Deduction (\$38.46 Bi-Weekly)								
Other (specify) V		653.82									
Full Name of Individual (Last, First, Middle I B. WASSERSTEIN, M LAURIE, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 92 GOODWIN CIRCLE			08 / D D / Y Y Y 2017	Y							
City	State	Zip Code	Transaction ID : PR1596319547039)							
HARTFORD	СТ	06105-5205	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.4	6							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		326.91	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I DODDY, JOHN P, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 50 WALSINGHAM ROAD			08 / D D / Y Y Y 2017	Y							
City MENDHAM	State NJ	Zip Code 07945-1827	Transaction ID : PR1600597347039 Amount of Each Receipt this Period)							
FEC ID number of contributing federal political committee.	С		78.0)0							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nfo Tech	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			193.3	18							
TOTAL This Period (last page this line numbe	r only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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PAGE 20 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 e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (L	InitedHealth Group PA	4C)
Full Name of Individual (Last, First, Middle A. ILE, MICHAEL L, , ,	e Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 14924 PONDVIEW CIRCI			08 31 / Y Y Y Y Y
City WAYZATA	State MN	Zip Code 55391-2249	Transaction ID : PR1600597647039 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	Occu VP F	pation (for Individual) Prod	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. MICHAUX, MICHAEL D, , ,	e Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 742 GOODRICH AVE			08 31 / Y Y Y Y Y 2017
City SAINT PAUL	State MN	Zip Code 55105-3343	Transaction ID : PR1600598547039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) GM PCM	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1700.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. SANDY, LEWIS G, , ,	e Initial) or Full Or	rganization Name	Date of Receipt
Mailing Address 4800 SUNNYSLOPE RO/			08 / D D / Y Y Y Y Y 2017
City EDINA	State MN	Zip Code 55424-1163	Transaction ID : PR1600598747039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Clin Advancement	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1700.00	P/R Deduction (\$100.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		784.60
TOTAL This Period (last page this line num	ber only)	••••••	

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PAGE 21 OF

		Use separate schedule(s)	(check only one)							
II LIVILLU KEVEIF 13		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)	ated PAC (UnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle			,							
PETERSON, MATTHEW W, , ,		nganization Name	Date of Receipt							
Mailing Address 2260 FOX STREET			08 31 2017							
City ORONO	State MN	Zip Code 55356-8316	Transaction ID : PR1602669947039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) O Ancillary & Ind/Sgt CAO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MALONEY, JEFFREY W, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 6327 PASADENA POINT B	LVD S		08 31 2017							
City GULFPORT	State FL	Zip Code 33707-3867	Transaction ID : PR1613243547039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
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 ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. CELLI, PAT, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 1210 COUNTRY CLUB DR	1		08 31 2017							
City CUTCHOGUE	State NY	Zip Code 11935-1728	Transaction ID : PR1613243747039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		265.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1306.17	P/R Deduction (\$132.65 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			842.20							
TOTAL This Period (last page this line number	er only)									

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FOR LINE NUMBER:

PAGE 22 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck onl	у о	ne)						
11			for each category of the Detailed Summary Page		1 1a		11b	11c	12				
	y information copied from such Reports and S												
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to so	olicit coi	ntrit	outions 1	from such	n commit	iee.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	NC)									
Α.	Full Name of Individual (Last, First, Middle Init KENNEDY, WILLIAM F, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 14 MYRA LN				м м 08	1	31) / Y	ү ү 2017	Y			
	City BURLINGTON	State CT	Zip Code 06013-1327						44314703 iis Period				
	FEC ID number of contributing federal political committee.	С		40.00									
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) IT		М	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	F	P/R Ded	ucti	on (\$20	.00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Init BELLAMY, THOMAS J, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 2743 THOMAS AVENUE SOU				08	1	31) / Y	ү 2017	Ŷ			
	City MINNEAPOLIS	State MN	Zip Code 55416-4346						14434703				
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 448.70										
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	F	P/R Deduction (\$224.35 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init SEVIGNY, BRIAN G, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 137 CREEKVIEW LANE	01-1-			08 M		31		2017				
	City LORETTO	State MN	Zip Code 55357-2111						44574703 iis Period				
	FEC ID number of contributing federal political committee.	С			Ľ.		,	,	28.	08			
	Name of Employer (for Individual) Optum Services, Inc	Occu Dir I	upation (for Individual) T		М	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68		P/R Ded	lucti	on (\$14	.04 Bi-We	eekly)				
⊢	UBTOTAL of Receipts This Page (optional)		, , , , , , , , , , , , , , , , , , ,	• •		-	y 1	, ,	516.	78			

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PAGE 23 OF

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 Incorpo	rated PAC (I	JnitedHealth Group PA	(C)					
Full Name of Individual (Last, First, Midd SULLIVAN, DANIEL T, , , Mailing Address 57 QUORN HUNT ROAE		organization Name	Date of Receipt					
City	State	Zip Code	08 31 2017 Transaction ID : PR1653445847039					
WEST SIMSBURY	CT	06092-2524	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 VP	upation (for Individual) IT	Memo Item					
Receipt For: Primary General Other (specify) ▼	Primary General Other (specify) ▼ 653.82							
Full Name of Individual (Last, First, Midd EMERSON, PAUL M, , ,	le Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 18855 MEADOW VIEW E			08 / D D / Y Y Y Y Y 2017					
City PRIOR LAKE	State MN	Zip Code 55372-3133	Transaction ID : PR1806750347039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) Optum360 Services Inc	Occ CO	upation (for Individual) O	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. ULLOA, SHAUNA D, , ,	le Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 9 STRATFORD ROAD	1		08 / D D / Y Y Y Y 2017					
City FARMINGTON	State CT	Zip Code 06032-1444	Transaction ID : PR1832379147039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) E3 NAs Ind Contr	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	al)		489.60					
TOTAL This Period (last page this line num	nber only)	·····						

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PAGE 24 OF

ITEMIZED RECI			for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
Annu linfo the state	from such D		, ,	13 14 15 16 17							
or for commercial purpo	oses, other than using the n			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMIT		I PAC (l	JnitedHealth Group PA	.C)							
Full Name of Individ A. ANDERSON, CA	lual (Last, First, Middle Initia THERINE K, , ,	l) or Full O	rganization Name	Date of Receipt							
Mailing Address 57	SIMMONS LANE			08 / D D / Y Y Y Y 08 31 2017							
City		State MD	Zip Code	Transaction ID : PR1903550747039							
SEVERNA PARK			21146-1921	Amount of Each Receipt this Period							
FEC ID number of c federal political com	0	С		503.74							
Name of Employer (United HealthCare So	, ,		upation (for Individual) 9 Strat Initiv	Memo Item							
Receipt For:		Aggregate	Year-to-Date ▼	1							
Primary Other (specify)	General) ▼	P/R Deduction (\$251.87 Bi-Weekly)									
	lual (Last, First, Middle Initia DUX, KATHLEEN L, , ,	l) or Full O	rganization Name	Date of Receipt							
Mailing Address 145	5 COTTAGE RD			08 31 2017							
City		State	Zip Code	Transaction ID : PR1903560847039							
ENFIELD		СТ	06082-2208	Amount of Each Receipt this Period							
FEC ID number of c federal political com	0	40.00									
Name of Employer (United HealthCare Se			upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary Other (specify)	General	Aggregate	Year-to-Date ▼ , 340.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individ c. DUFEK, ROB	lual (Last, First, Middle Initia ERT J, , ,	l) or Full O	rganization Name	Date of Receipt							
Mailing Address 816	6 PROMONTORY PLACE			08 31 2017							
City		State	Zip Code	Transaction ID : PR1903577147039							
EAGAN		MN	55123-2297	Amount of Each Receipt this Period							
FEC ID number of c federal political com	0	С		50.00							
Name of Employer (Optum Services, Inc	, ,	Occu Dir l	upation (for Individual) T	Memo Item							
Receipt For: Primary Other (specify)	General	Aggregate	Year-to-Date ▼ 425.00	P/R Deduction (\$25.00 Bi-Weekly)							
SUBTOTAL of Receipt	ts This Page (optional)		•	593.74							
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FOR LINE NUMBER:

PAGE 25 OF

		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 S or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle Ini A. JOHNSON, CHRISTOPHER T, , ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 12880 53RD STREET NORT			08 / D D / Y Y Y Y 2017						
City STILLWATER	State MN	Zip Code 55082-1063	Transaction ID : PR1903591147039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		78.00						
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 ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In B. PENN, STEVEN F, , ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6766 IDLEWOOD WAY			08 / D D / Y Y Y Y Y 08 31 2017						
City EDEN PRAIRIE	State MN	Zip Code 55346-3506	Transaction ID : PR1903612947039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In SANTELLI, JOHN C, , ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 25510 BIRCH BLUFF ROAD			08 / D D / Y Y Y Y Y 2017						
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622047039 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) °CIO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			490.60						
TOTAL This Period (last page this line number	only)								

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 26 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 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. STEERUP, LORI A, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7019 DONLEA LANE			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						
City EDEN PRAIRIE	State MN	Zip Code 55346-3164	Transaction ID : PR1903628647039						
		55540-5164	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	VP	Human Capital Partner							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. WEYMOUTH, PAUL D, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 317 WRIGHTS MILL RD	08 31 2017								
City	State	Zip Code	Transaction ID : PR1903636947039						
COVENTRY	СТ	06238-1559	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		38.46						
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 ▼ 326.91	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. BENNETT, RUSSELL A, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4 HALSEY AVE			08 / D D / Y Y Y Y 08 31 2017						
City	State	Zip Code	Transaction ID : PR2119468047039						
LAGUNA NIGUEL	CA	92677-5327	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		20.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Dvlp	Memo Item						
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 318.87	P/R Deduction (\$20.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		86.46						
TOTAL This Period (last page this line num	ber only)								

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PAGE 27 OF

	AC) Date of Receipt Magnetic Contribution ID: PR2119469447039 Amount of Each Receipt this Period Memo Item Memo Item Magnetic Contributions Memo Item Magnetic Contributions Magnetic Contributions Magne
nd address of any political committee C (UnitedHealth Group PA ull Organization Name Zip Code 92154-2537 Occupation (for Individual) Mktg Cnslt	AC) Date of Receipt Union Date of Receipt Union Date of Receipt Union Date of Receipt Date of
C (UnitedHealth Group PA ull Organization Name Zip Code 92154-2537 Occupation (for Individual) Mktg Cnslt	AC) Date of Receipt 08 / 31 / 2017 Transaction ID : PR2119469447039 Amount of Each Receipt this Period 50.00
ull Organization Name a Zip Code 92154-2537 Occupation (for Individual) Mktg Cnslt	Date of Receipt 08 / 31 / 2017 Transaction ID : PR2119469447039 Amount of Each Receipt this Period 50.00
e Zip Code 92154-2537 Occupation (for Individual) Mktg Cnslt	M M / D D / Y Y Y Y 08 31 2017 Transaction ID : PR2119469447039 Amount of Each Receipt this Period 50.00 50.00
92154-2537 Occupation (for Individual) Mktg Cnslt	08 31 2017 Transaction ID : PR2119469447039 Amount of Each Receipt this Period 50.00
92154-2537 Occupation (for Individual) Mktg Cnslt	Amount of Each Receipt this Period
Mktg Cnslt	
Mktg Cnslt	Memo Item
gate Year-to-Date ▼	
425.00	P/R Deduction (\$25.00 Bi-Weekly)
ull Organization Name	Date of Receipt
	08 / D D / Y Y Y Y 2017
	Transaction ID : PR2119469947039
32011-1403	Amount of Each Receipt this Period
Occupation (for Individual) Assc Dir Clin Qlty	Memo Item
gate Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)
ull Organization Name	Date of Receipt
	08 / D D / Y Y Y Y 2017
e Zip Code 90720-2931	Transaction ID : PR2119471847039 Amount of Each Receipt this Period
	50.00
Occupation (for Individual) Deputy Gen Counsel Mgr	Memo Item
gate Year-to-Date ▼ 425.00	P/R Deduction (\$25.00 Bi-Weekly)
	1
	Assc Dir Clin Qlty gate Year-to-Date ▼ 255,00 ull Organization Name e Zip Code 90720-2931 Occupation (for Individual) Deputy Gen Counsel Mgr gate Year-to-Date ▼

FOR LINE NUMBER:

PAGE 28 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle DEMBROSKI, TODD J, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1390 FINCH LN			08 / D D / Y Y Y Y Y 2017							
City GREEN BAY	State WI	Zip Code 54313-6400	Transaction ID : PR2119472847039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Svs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. GILDERNICK, AMY J, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2709 WILLIAMS GRANT			08 / D D / Y Y Y Y 2017							
City DE PERE	State WI	Zip Code 54115-9456	Transaction ID : PR2119475247039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		40.00							
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 ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. HANSEN, DAVID M, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 33 VIA CONOCIDO	Ototo	7.0.1	08 / D D / Y Y Y Y Y 2017							
City SAN CLEMENTE	State CA	Zip Code 92673-7044	Transaction ID : PR2119476747039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		270.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2295.00	P/R Deduction (\$135.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			340.00							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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PAGE 29 OF

			for each category of the Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17
	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the p		oose		oliciting	contribu	tions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initial HARLAN, MADELINE L, , ,	l) or Full O	organization Name		ate of	Re	ceipt				
	Mailing Address 3444 CORTES PLACE	Ctata	Zin Codo		08 08	/		31	/ Y	2017	
	City ROUND ROCK	State TX	Zip Code 78665-5666							17694703	9
	FEC ID number of contributing federal political committee.	С			mount	OI	Lach	Re	ceipt th	is Period 28.	08
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item							
	Receipt For:	Year-to-Date ▼ 238.68	 P/I	R Dedu	uctic	on (\$1	14.04	4 Bi-We	ekly)		
В.	Full Name of Individual (Last, First, Middle Initial	l) or Full O	Organization Name		ate of	Re	ceipt				
	Mailing Address 4220 OCEAN DR	Zin Codo		M M 08	/	D 3	D 31	/ Y	2017	Y	
	City MANHATTAN BEACH	State CA	Zip Code 90266-3059				-			7794703 is Period	9
	FEC ID number of contributing federal political committee.	С			_		-		-	384.	60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Grp Chief Clin Off		Me	emo	Item	I			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial KNUTSON, MARK C, , ,	l) or Full O	organization Name	D	ate of	Re	ceipt				
	Mailing Address 19312 FAIRHAVEN EXT				08	/	D	^р 31	/ Y	ү ү 2017	Y
	City SANTA ANA	State CA	Zip Code 92705-6310				-			48024703	9
	FEC ID number of contributing federal political committee.	C			mount	of	Each	Re	ceipt th	is Period 30.	00
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Cust Service		Me	emo	Item	I			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 255.00	P/	R Dedu	uctio	on (\$1	15.0	0 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)						,		9	442.	58
т	OTAL This Period (last page this line number on	ly)		Ī					-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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PAGE 30 OF

	EMIZED RECEIPTS			Detailed Summary Page	×] 11	- H	_	11c	12	<u> </u>
	y information copied from such Reports and State for commercial purposes, other than using the na								se of	soli			
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated								5.10 11				
<u> </u>	Full Name of Individual (Last, First, Middle Initial) MACE-MEADOR, HEATHER M, , ,	or Full Or	rgar	nization Name		Date of Receipt							
	Mailing Address 13531 CARLTON OAKS					м м 08	/		D D 31	/	Y	ү ү 2017	Y
		State TX		Zip Code	_			-			-	825470	-
	SAN ANTONIO FEC ID number of contributing federal political committee.	C		78232-4902	/	Amount	t of	Ea	ach Re	ecei	ipt this	s Perioo 40	.00
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Clin Ops		M	emo	o Ite	em				
	Receipt For: A Primary General Other (specify) ▼	r-to-Date ▼ 340.00	P.	/R Ded	uctio	on	(\$20.0	00 E	3i-Wee	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial) NEURURER, SCOTT A, , ,	or Full Or	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 23822 VIA MONTE						08 / D D / Y Y Y Y 08 31 2017						
	City COTO DE CAZA	Zip Code 92679-4001				-				8 49470 3 s Perioc			
	FEC ID number of contributing federal political committee.							-				233	04
	Name of Employer (for Individual) Optum Services, Inc	Occu VP 0	•	ion (for Individual)		M	emo	o Ite	em				
	Receipt For: A Primary General Other (specify) ▼	Aggregate `	Yea	r-to-Date ▼ 1451.37	P/	'R Dedi	uctic	on ((\$116	5.52	Bi-We	eekly)	
с.	Full Name of Individual (Last, First, Middle Initial) NYGARD, KEITH E, , ,	or Full Or	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 1139 E OCEAN BOULEVARD #106					08		L	31			y y 2017	
	City LONG BEACH	State CA		Zip Code 90802-6521								850470 s Period	
	FEC ID number of contributing federal political committee.	С				anoun		u					00
	Name of Employer (for Individual) UNITED HEALTHCARE SVS INC								em				
	Receipt For: A Primary General Other (specify)	Aggregate `	Yea	r-to-Date ▼ 340.00	P	/R Ded	uctio	on	(\$20.	00 E	Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)			••••••	•			,			9	313	04
Т	OTAL This Period (last page this line number only	y)		••••••				-			-		

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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PAGE 31 OF

	EMIZED RECEIPTS			Detailed Summary Page	×	11a		111		11c		12	
۸	w information conied from such Departs and Otat	monto		at he cold or used by any		13		14		15	inc	16	17
	y information copied from such Reports and State for commercial purposes, other than using the na												
$\overline{)}$	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	UnitedHealth Group Incorporated			· · · · · · · · · · · · · · · · · · ·	.C)								
Α.	Full Name of Individual (Last, First, Middle Initial) OLLMANN-WAGNER, TRACY L, , ,	or Full O	Drgan	nization Name		Date of	Re	eceip	pt				
	Mailing Address 2839 TIMBER LANE					м м 08	/	D	31	'	Y	y y 2017	Y
	City GREEN BAY	State WI		Zip Code 54313-5841				-			-	352470	
		•••	_	54515-5041	_ A	mount	of	Ead	ch Re	eceipt	this	s Perio	t
	FEC ID number of contributing federal political committee.	С			30.00								.00
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) · SIs Ops		Me	emo) Ite	em				
	Pagaint For:			r-to-Date ▼	-								
	Primary General Other (specify) ▼ 255.00							on (\$15.0)0 Bi-'	Wee	ekly)	
в.	Full Name of Individual (Last, First, Middle Initial) PAXSON, LYNDA A, , ,	or Full O	Drgan	nization Name		Date of	Re	eceip	pt				
	Mailing Address 3924 E GARNET PL					м м 08	1	D	31] ′ [Y	ү ү 2017	Y
	City	State		Zip Code				-				358470	
	HIGHLANDS RANCH	CO		80126-5044	A	mount	of	Ead	ch Re	eceipt	this	s Perio	tt
	FEC ID number of contributing federal political committee.	С						-		-,		50	.00
	Name of Employer (for Individual) UNITED HEALTHCARE SVS INC		•	ion (for Individual) Acct Mgr		Me	emo) Ite	em				
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 425.00	P/I	R Dedu	uctio	on (\$25.0)0 Bi-\	Nee	ekly)	
С.	Full Name of Individual (Last, First, Middle Initial) PETE, DIANA S, , ,	or Full O	Drgan	nization Name		Date of	Re	eceip	pt				
	Mailing Address 9010 MORNINGSTAR DRIVE					^M 08	/	D	31	1	Y	2017 ^Y	Y
	City	State		Zip Code								863470	
	SUGAR LAND	ТХ		77479-3316	A	mount	of	Ead	ch Re	eceipt	this	s Perio	tt
	FEC ID number of contributing federal political committee.	С				_		y		,		24	.00
	Name of Employer (for Individual)	Occi	upati	ion (for Individual)		Me	emo	b Ite	em				
	United HealthCare Services Inc	Asso	c Dir	Clin Qlty									
	Receipt For: A Primary General Other (specify)	Aggregate	Year	r-to-Date ▼ 204.00	P/	R Ded	uctio	on ((\$12.(00 Bi-'	Wee	ekly)	
s	UBTOTAL of Receipts This Page (optional)											104	.00
	OTAL This Period (last page this line number only				Ī			-					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 32 OF

	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 a or for commercial purposes, other than usir										
NAME OF COMMITTEE (In Full)	.9									
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mide PETERS, MICHELLE LYNN, , ,	lle Initial) or Full O	rganization Name	Date of F	Receipt						
Mailing Address 1128 COUNTRYSIDE D	R		08 31 / Y Y Y Y 08 31							
City DE PERE	State WI	Zip Code 54115-1040		Transaction ID : PR2119486447039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С			-19- 1 -19-	30.0	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Svs	Men	no Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	P/R Deduc	tion (\$15.00 Bi-\	Weekly)					
Full Name of Individual (Last, First, Mido B. PITTMAN, AUSTIN T, , ,	lle Initial) or Full O	rganization Name	Date of F	Receipt						
Mailing Address 4621 EDINA BLVD			M M 08	/ D D / 31	2017	Y				
City EDINA	State MN	Zip Code 55424-1154		tion ID : PR211)				
FEC ID number of contributing federal political committee.	С	33424-1134		of Each Receipt	384.6	60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Men	no Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3269.10	P/R Deduc	tion (\$192.30 Bi-	Weekly)					
Full Name of Individual (Last, First, Mido C. PROCHNOW, JAMES E, , ,	lle Initial) or Full O	rganization Name	Date of F	Receipt						
Mailing Address 143 RUSTIC OAK DRIV			08	/ D D / 31	y y y 2017					
City LUXEMBURG	State WI	Zip Code 54217-7320		ction ID : PR211 of Each Receipt		9				
FEC ID number of contributing federal political committee.	С			y y	28.0	0				
Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	upation (for Individual) Fin	Men	no Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduc	tion (\$14.00 Bi-∖	Weekly)					
SUBTOTAL of Receipts This Page (option	al)				442.6	0				
TOTAL This Period (last page this line nu	mber only)									

FOR LINE NUMBER:

PAGE 33 OF

		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 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 RICCIUTI, SHARON A, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 55 PERENNIAL			08 / D D / Y Y Y Y Y 08 2017						
City IRVINE	State CA	Zip Code 92603-0621	Transaction ID : PR2119487947039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Qlty	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle THOMSON, CHERYL A, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 222 FOREST DR			08 / D D / Y Y Y Y 2017						
City	State WI	Zip Code	Transaction ID : PR2119491647039						
SOBIESKI		54171-9748	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		30.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify) ▼		255.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. TUCKER, STEVEN M, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3784 8TH AVENUE			08 / D D / Y Y Y Y Y 08 31 2017						
City SAN DIEGO	State CA	Zip Code 92103-4305	Transaction ID : PR2119492047039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1632.00	P/R Deduction (\$96.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		250.08						
TOTAL This Period (last page this line numl	per only)								

FOR LINE NUMBER:

PAGE 34 OF

		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 1 erson for the purpose of soliciting contributions						
<u> </u>		e name and a	ddress of any political committe	e to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)						
Α.	Full Name of Individual (Last, First, Middle Ini VANASTEN, SUSAN, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address N2249 NICOLE COURT			08 31 Y Y Y Y 2017						
	City KAUKAUNA	State WI	Zip Code 54130-9462	Transaction ID : PR2119492647039 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		80.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Telesls Dir	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 680.00	P/R Deduction (\$40.00 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Ini DAUGHERTY, LINDA D, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 15442 NORTH 19TH WAY	1-		08 / D D / Y Y Y Y Y 2017						
		State AZ	Zip Code	Transaction ID : PR2119493547039						
	PHOENIX	AZ	85022-3329	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		40.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Ini WRIGHT, GREGORY, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 10471 STRAND TERRACE			08 / D D / Y Y Y Y 2017						
	City SANTA ANA	State CA	Zip Code 92705-1495	Transaction ID : PR2119494147039 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	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 ▼ 425.00	P/R Deduction (\$25.00 Bi-Weekly)						
	JBTOTAL of Receipts This Page (optional)			170.00						

FOR LINE NUMBER:

PAGE 35 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to collicit contributions from such committee						
		doress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Ful UnitedHealth Group In	,	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, F A. YOUNG, GEORGE M, , ,	irst, Middle Initial) or Full O	Date of Receipt 08 31 2017							
Mailing Address 36296 N 98TH	WAY								
City SCOTTSDALE	State AZ	Zip Code 85262-3138	Transaction ID : PR2119494447039 Amount of Each Receipt this Period 30.00						
FEC ID number of contributing federal political committee.	C								
Name of Employer (for Individua United HealthCare Services Inc		ipation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MASON, JOHN TYLER, J, ,								
Mailing Address PO BOX 2083	08 / D D / Y Y Y Y 08 31 2017								
City CYPRESS	State CA	Zip Code 90630-1583	Transaction ID : PR2126373847039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	384.60							
Name of Employer (for Individua United HealthCare Services Inc	,	upation (for Individual) Comm	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 3076.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, F C. BURKE, FORREST G,		Date of Receipt							
Mailing Address 380 LEAF STR		08 / D D / Y Y Y Y 2017							
City ORONO	State MN	Zip Code 55356-9733	Transaction ID : PR2133132447039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	384.60							
Name of Employer (for Individua United HealthCare Services Inc		ipation (for Individual) Unit CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Pag	e (optional)		799.20						
TOTAL This Period (last page this	s line number only)	••••••							

Use separate schedule(s)

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PAGE 36 OF

171			Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		4 11a		11b	11c	12			
	y information copied from such Reports and Stat for commercial purposes, other than using the n											
$\overline{\left(\right. \right. }$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COLEMAN, WILLIAM R, , ,						Date of Receipt						
	ailing Address 831 RATLEY ROAD					08 31 2017						
	City WEST SUFFIELD	State CT	Zip Code 06093-2400		Transaction ID : PR2133132547039 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		24.00								
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Dir Clms			Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$12.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CUMMINGS, DANIEL M, , ,				Date of	Re	ceipt					
	Mailing Address 1929 FAIRMOUNT AVE				08 / 31 / Y Y Y Y 08 / 31							
	City SAINT PAUL	State MN	Zip Code 55105-1539	-	Transaction ID : PR213313 Amount of Each Receipt this							
	FEC ID number of contributing federal political committee.	C				30.00						
	Name of Employer (for Individual) Optum Services, Inc	pation (for Individual) Fin		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 255.00	F	P/R Deduction (\$15.00 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HULTGREN, BROR O, , ,				Date of	Re	ceipt					
	Mailing Address 408 22ND ST				M M 08	1	31) / Y	2017	Y		
	City GOLDEN	State CO	Zip Code 80401-2452					PR21331 leceipt th				
	FEC ID number of contributing federal political committee.			<u> </u>		y .		384.	_			
	Name of Employer (for Individual) United HealthCare Services Inc	pation (for Individual) CEO		Me	emc	ltem						
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3269.10				ucti	on (\$19:	2.30 Bi-W	/eekly)			
s	UBTOTAL of Receipts This Page (optional)		•	•			,	. ,	438.	60		
т	OTAL This Period (last page this line number on	ly)		•			.	. .				

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PAGE 37 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			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 P/	AC)							
Full Name of Individual (Last, First, Middle MORISATO, SUSAN C, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 238 ARDMORE ROAD			M M / 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 DES PLAINES	State IL	Zip Code 60016-2119	Transaction ID : PR2133133847039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Insurance Sols	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. NETTLETON, KIMBERLY ALLE	Initial) or Full C NE, , ,	rganization Name	Date of Receipt							
Mailing Address 5003 DARNELL			08 / D D / Y Y Y Y Y 2017							
City HOUSTON	State TX	Zip Code 77096-1510	Transaction ID : PR2133133947039							
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) Prod	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle . PUTNAM, T JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 303 ELMWOOD PLACE V			08 / D D / Y Y Y Y 2017							
City MINNEAPOLIS	State MN	Zip Code 55419-1349	Transaction ID : PR2133134247039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Mkt	upation (for Individual) Group CFO	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		799.20							
TOTAL This Period (last page this line numl	per only)									

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

FOR LINE NUMBER:

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PAGE 38 OF

				or each category of the Detailed Summary Page		X 11a 13		11b	>	11c 15	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the n					for the				soliciting	contribu	utions				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Uni	tedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Initia SCHIMMELBUSCH, DIANE M, , ,	l) or Full O	Orgar	nization Name		Date of Receipt										
	Mailing Address 2203 LAKE GARDENS DRIVE					08	/	D	31	/ Y	2017	Y				
	City KINGWOOD	State TX		Zip Code 77339-3629							346470					
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period										
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		N	lemo	o Ite	m							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ir-to-Date ▼ 425.00	1	P/R Deduction (\$25.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia FALKENBERG, ROBERT C, , ,	l) or Full O	Drgar	nization Name		Date o	of Re	eceip	ot							
	Mailing Address 6 LANTANA					08	/ Y	y y 2017	Ŷ							
	City NEWPORT COAST	State CA		Zip Code 92657-1646				-			2844703 is Period					
	FEC ID number of contributing federal political committee.	С				163.88										
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) In CEO		N	lemo	b Ite	m							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1262.54		P/R Deduction (\$81.94 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initia RUMMEL, LEAH C, , ,	l) or Full O	Drgar	nization Name		Date o	of Re	eceip	ot							
	Mailing Address 12100 TRAUTWEIN ROAD	1		1		08	/	D	31	/ Y	y y 2017	Y				
	City AUSTIN	State TX		Zip Code 78737-9358							295470					
	FEC ID number of contributing federal political committee.	С				Amoun	it of	Eac	n Re	ceipt th	is Perioo 30	.00				
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) Affs		N	1emc	o Ite	m							
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00							on (\$15.0)0 Bi-We	ekly)					
s	UBTOTAL of Receipts This Page (optional)				•			9		. ,	243	.88				
Т	OTAL This Period (last page this line number or	ıly)			- -			-								

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FOR LINE NUMBER:

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PAGE 39 OF

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
Δn	y information copied from such Reports and Statem		u not be sold or used by any po	13 14 15 16 17							
	for commercial purposes, other than using the nam										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (U	InitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initial) c SMITH, DANNETTE L, , ,	or Full Or	ganization Name	Date of Receipt							
	Mailing Address 4200 ALDEN DRIVE			08 31 / Y Y Y Y 08 31 2017							
		State MN	Zip Code 55416-5010	Transaction ID : PR2145729947039							
			35410-5010	_ Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.			384.60							
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item							
	United HealthCare Services Inc	Sr De	eputy Gen Counsel								
	Receipt For: Ag	gregate \	lear-to-Date ▼								
	Other (specify) ▼		3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) c GIBSON, CHRISTINE W, , ,	or Full Or	ganization Name	Date of Receipt							
	Mailing Address 8516 29TH AVE N			08 31 2017							
		State	Zip Code	Transaction ID : PR2225166747039							
	NEW HOPE	MN	55427-2622	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.			76.92							
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Strat Initiv	Memo Item							
	Receipt For: Ag Primary General Other (specify) ▼	gregate \	fear-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) c BEAULE, JEAN-FRANCOIS, , ,	or Full Or	ganization Name	Date of Receipt							
	Mailing Address 7 STRATFORD RD			08 31 2017							
	5	State	Zip Code	Transaction ID : PR2225813647039							
		СТ	06032-1444	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.			230.76							
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item							
	United HealthCare Services Inc	SVP	HIth Advancement								
	Receipt For: Ag	gregate \	lear-to-Date ▼								
	Other (specify)		1961.46	P/R Deduction (\$115.38 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			692.28							
т	OTAL This Period (last page this line number only)		▶								

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 40 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	rated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middl CARRUTH, NANCY SUSAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 753 WOOD HILL DRIVE			08 / D D / Y Y Y Y Y 2017								
City CHANHASSEN	State MN	Zip Code 55317-9561	Transaction ID : PR2225818447039								
CHANNASSEN		55517-9561	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item								
Receipt For:		Year-to-Date ▼	-								
Primary General Other (specify) ▼	Aggregate	255.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. RYAN, JOHN D, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 45 WESTMORELAND LN	l		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								
City	State	Zip Code	Transaction ID : PR2225819647039								
NAPERVILLE	IL	60540-5817	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) P CInt Mgmt Svc	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 980.73	P/R Deduction (\$57.69 Bi-Weekly)								
Full Name of Individual (Last, First, Middl c. SAILOR, ROY THOMAS, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 276 COYOTE WILLOW E	DRIVE		08 31 / Y Y Y Y 08 31								
City	State	Zip Code	Transaction ID : PR2225819747039								
COLORADO SPRINGS	CO	80921-7631	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		153.84								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dvlp	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1307.64	P/R Deduction (\$76.92 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		299.22								
TOTAL This Period (last page this line num											

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

FOR LINE NUMBER:

(check only one)

PAGE 41 OF

			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 (I	UnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) CORNE, MICHAEL LEE, , ,	or Full C	Organization Name	Date of Receipt										
	Mailing Address 12642 CHIEFS COURT	01-1-	7.0.1	08 / D D / Y Y Y Y 2017										
	City FISHERS	State IN	Zip Code 46037-9553	Transaction ID : PR2231346947039										
	FFO ID number of contribution	C		Amount of Each Receipt this Period										
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item										
	United HealthCare Services Inc Receipt For: A Primary General Other (specify) ▼ A		Regl Affs e Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initial) GREENMAN, DEE A, , ,	or Full C	Drganization Name	Date of Receipt										
	Mailing Address 536 HIGH DR	<u>.</u>		08 / D D / Y Y Y Y Y 08 31 2017										
	City CARMEL	State IN	Zip Code 46033-2338	Transaction ID : PR2231350247039 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		30.40										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Regl Affs	Memo Item										
	Receipt For: A Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 228.00	P/R Deduction (\$15.20 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) CONNLY, MICHAEL R, , ,	or Full C	Organization Name	Date of Receipt										
	Mailing Address 570 MONTCALM PL			08 / D D / Y Y Y Y 08 31 2017										
	City SAINT PAUL	State MN	Zip Code 55116-1730	Transaction ID : PR2247625847039										
	FFO ID number of contribution	С		Amount of Each Receipt this Period 418.18										
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) ef Tech Off	Memo Item										
	Receipt For: A Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3118.17	P/R Deduction (\$209.09 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)		····· •	476.58										
Т	OTAL This Period (last page this line number only	/)	•											

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 42 OF

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										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	UnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Middle In A. CARCIONE JR, JOSEPH R, , ,	iitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 11 CARRIAGE WAY	State	Zip Code	08 / D / Y Y Y Y 08 / 31 / 2017							
WHITE PLAINS	NY	10605-5424	Transaction ID : PR2247626847039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.40							
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 ▼ 980.90	P/R Deduction (\$57.70 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In KANTOLA, KEVIN DAVID, , ,	itial) or Full C	Organization Name	Date of Receipt							
Mailing Address 7031 HALSTEAD DRIVE			08 31 2017							
City MINNETRISTA	State MN	Zip Code 55364-3201	Transaction ID : PR2247627047039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		78.00							
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 ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In C. O'BRIEN, DENNIS P, , ,	itial) or Full C	Organization Name	Date of Receipt							
Mailing Address 61 LOUGHLIN AVE			08 / D D / Y Y Y Y 2017							
City COS COB	State CT	Zip Code 06807-2621	Transaction ID : PR2247627347039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			578.00							
TOTAL This Period (last page this line number	only)	•								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 43 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 berson for the purpose of soliciting contributions te to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
> UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. VERNEY, JEFFERY RICHARD, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 266 WESTLEDGE ROAD			08 / D D / Y Y Y Y 08 31 2017							
City WEST SIMSBURY	State CT	Zip Code 06092-2017	Transaction ID : PR2247627447039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		486.42							
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 ▼ 2811.03	P/R Deduction (\$243.21 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. GARODIA, SANJAY, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 110 COVINGTON COURT			08 31 2017							
City OAK BROOK	State	Zip Code 60523-2574	Transaction ID : PR2247627847039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) Optum Services, Inc	Occ CO	upation (for Individual) O	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		653.82	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle OHMAN, DANIEL L, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 205 RIVERMERE WAY			08 / D D / Y Y Y Y 08 31 2017							
City ATLANTA	State GA	Zip Code 30350-6346	Transaction ID : PR2247628047039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional))		755.64							
TOTAL This Period (last page this line numb	per only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 44 OF

			Use separate schedule(s)	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
\setminus	NAME OF COMMITTEE (In Full)	//		-								
/	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia PRINCE, JOHN M, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 546 HARRINGTON ROAD			08 / D D / Y Y Y Y 2017								
	City WAYZATA	State MN	Zip Code 55391-1550	Transaction ID : PR2259738447039 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) Segment CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia CRONN, CHRISTOPHER L, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1122 COLORADO STREET SUITE 2399			08 / D D / Y Y Y Y Y 2017								
	City AUSTIN	State TX	Zip Code 78701-2132	Transaction ID : PR2270522947039 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		126.92								
	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 ▼ 928.82	P/R Deduction (\$63.46 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 411 FLEECE FLOWER DRIVE			08 / D D / Y Y Y Y Y 2017								
	City GAITHERSBURG	State MD	Zip Code 20878-2646	Transaction ID : PR2402315747039 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		28.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) roj Mgr II	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			539.52								
т	OTAL This Period (last page this line number o	nly)	•••••									

FOR LINE NUMBER:

PAGE 45 OF

IT.			Use separate schedule(s)	(check or	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12	1 1				
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any p address of any political committee	erson for the	e purpose o	f soliciting	g contrib	outions				
<u>,</u>	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initi FRASCINO, MJ, , ,	al) or Full O	Organization Name	Date of	of Receipt							
	Mailing Address 7 PIONEER DRIVE			M 08	/ D 31	D / Y	ү ү 2017	Ŷ				
	City ELLINGTON	State CT	Zip Code 06029-3221		saction ID							
	FEC ID number of contributing federal political committee.	С					28	8.00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg		lemo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initi KEPLEY CARRIER, ANGELA DAW		Organization Name	Date of	of Receipt							
	Mailing Address 3219 PENINSULA DRIVE	Ototo	Zin Oode	08	/ D 31		2017	Y				
	City JAMESTOWN	State NC	Zip Code 27282-8717		saction ID :							
	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) Med Clin Ops		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi LEVI-BAUMGARTEN, MARILYN,		Organization Name	Date o	of Receipt							
	Mailing Address 4800 W 27TH ST	01-1-	7.0.4	08	31	_ L	2017					
	City SAINT LOUIS PARK	State MN	Zip Code 55416-1933		saction ID							
	FEC ID number of contributing federal political committee.	С				. ,	4(0.00				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Ν	lemo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 340.00	P/R De	duction (\$20	0.00 Bi-W	eekly)					
\vdash	UBTOTAL of Receipts This Page (optional)				, , , , , , , , , , , , , , , , , , ,		108	3.00				
Т	OTAL This Period (last page this line number of	only)	••••••	·								

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FOR LINE NUMBER:

PAGE 46 OF

		Use separate schedule(s)	(check	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12					
Any information copied from such Reports and or for commercial purposes, other than using t				he pu								
NAME OF COMMITTEE (In Full)				Contin	DULIONS		1 commu	ee.				
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle LOGAN, JAKE, , ,	Initial) or Full O	rganization Name	Date	of R	eceipt							
Mailing Address 4826 EAST CALLE REDON	IDA			8	/ D 1) / Y	y y 2017	Y				
City PHOENIX	State AZ	Zip Code 85018-2931				PR24023 Receipt th	31824703 is Period	9				
FEC ID number of contributing federal political committee.	С						384.6	60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R D)educt	ion (\$19	2.30 Bi-W	/eekly)					
Full Name of Individual (Last, First, Middle MCGRATH, STACY S, , ,	Initial) or Full O	rganization Name	Date	e of R	eceipt							
Mailing Address 5801 CHOWEN AVE S			C C	8	31) / Y	2017	Y				
City EDINA	State MN	Zip Code 55410-2759				PR24023 Receipt th	1854703	9				
FEC ID number of contributing federal political committee.	С						34.2	24				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.04	P/R D	educt	ion (\$17.	.12 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle C. ROSSI, DAVID WILLIAM, , ,	Initial) or Full O	rganization Name	Date	e of R	eceipt							
Mailing Address 11632 KNOX STREET				8	31		2017 ^Y	Y				
City OVERLAND PARK	State KS	Zip Code 66210-3608				PR2402: Receipt th	31964703 is Period	9				
FEC ID number of contributing federal political committee.	С				, . ,	. y	36.5	50				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Mem	io Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 200.75	P/R [)educt	tion (\$18	.25 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional).					,	. ,	455.3	34				
TOTAL This Period (last page this line number	er only)											

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

FOR LINE NUMBER:

(check only one)

PAGE 47 OF

		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 Incorpo	rated PAC (JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middl A. CRANLEY, SHELLEY WIKE, , ,	e Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 3801 MAURICE COURT			M = M / D = D / Y = Y = Y Y 08 31 2017										
City	State	Zip Code	Transaction ID : PR2402444447039										
LAS VEGAS	NV	89108-5245	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		50.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item										
Receipt For:	I	Year-to-Date ▼	—										
Primary General Other (specify) ▼		425.00	P/R Deduction (\$25.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middl B. ANLIKER, JAY M, , ,	e Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 4306 MOUNTAIN LANE			08 31 2017										
City	State	Zip Code	Transaction ID : PR2402445047039										
WAUSAU	WI	54401-8543	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		40.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) O TPA	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. BECKER, JAMES H, , ,	e Initial) or Full C	Prganization Name	Date of Receipt										
Mailing Address 378 FERNDALE ROAD	WEST		08 31 2017										
City	State	Zip Code	Transaction ID : PR2402445147039										
WAYZATA	MN	55391-1559	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	ı)		474.60										
TOTAL This Period (last page this line num	nber only)												

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

FOR LINE NUMBER:

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PAGE 48 OF

ITEIWIZED RECEIPTS		Detailed Summary Page	X	1 1a		11b	11c		12				
		Detailed Summary Faye		13		14	15		16	17			
Any information copied from such Reports and or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle COLEMAN, JAMES C, , ,	Initial) or Full C	rganization Name		Date of Receipt									
Mailing Address 4720 WEST 66TH STREE	т			08 M	1	31	D / Y		ү 017	Y			
City	State	Zip Code		Trans	acti	on ID :	PR2402	4452	24703	9			
EDINA	MN	55435-1506		Amount	of	Each F	Receipt th	nis P	'eriod				
FEC ID number of contributing federal political committee.	С					,		_	428.5	56			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp SVP, Human Capital		Me	emo	Item							
Receipt For:			_										
Primary General	Aggregate	Year-to-Date ▼		P/R Ded	uctio	on (\$21.	4.28 Bi-V	Veek	(v)				
Other (specify)		3071.36		in Dou	uotit	οπ (ψ 2 Γ	4.20 DI V	VCCN	uy)				
Full Name of Individual (Last, First, Middle B. LARSEN, JOHN L, , ,	Initial) or Full C	rganization Name		Date of	Re	ceipt							
Mailing Address 11688 TANGLEWOOD DR	RIVE			08	/	31) / Y)17	Y			
City	State	Zip Code		Trans	acti	on ID :	PR2402	4456	347039)			
EDEN PRAIRIE	MN	55347-4726		Amount	of	Each F	Receipt th	nis P	'eriod				
FEC ID number of contributing federal political committee.	С			384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		Me	emo	Item							
Receipt For:	Aggregate	Year-to-Date V											
Other (specify)		3269.10		P/R Dedu	uctio	on (\$192	2.30 Bi-V	Veek	ly)				
Full Name of Individual (Last, First, Middle C. HIGA, JOY O, , ,	Initial) or Full C	rganization Name		Date of	Re	ceipt							
Mailing Address 2208 ELM AVENUE				08 ^M	/	31) 17	Y			
City	State	Zip Code		Trans	acti	ion ID :	PR2402	4462	24703	9			
MANHATTAN BEACH	CA	90266-2809		Amount	of	Each F	Receipt th	nis P	'eriod				
FEC ID number of contributing federal political committee.	С					,	, <u>,</u>		60.0	00			
Name of Employer (for Individual)	Occ	upation (for Individual)		M	emo	Item							
United HealthCare Services Inc		Regl Affs											
Receipt For:	Aggregate	Year-to-Date V											
Primary General Other (specify)		510.00		P/R Ded	uctio	on (\$30	.00 Bi-W	eekly	y)				
SUBTOTAL of Receipts This Page (optional)								-	873.1	6			
TOTAL This Period (last page this line numb		· · · · · · · · · · · · · · · · · · ·	•			,	,	-					

FOR LINE NUMBER:

PAGE 49 OF

	-	Use separate schedule(s)	(check only one)												
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17												
			person for the purpose of soliciting contributions be 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 ALEXANDER, CORY, , ,	Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address 4203 BRADLEY LANE			08 31 2017												
City CHEVY CHASE	State MD	Zip Code 20815-5234	Transaction ID : PR2405428847039 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C		384.60												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affairs	Memo Item												
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$192.30 Bi-Weekly)														
Full Name of Individual (Last, First, Middle SAELENS, KAREN ANN, , ,	Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address 105 N FLORENCE AVE			08 / 0 0 / Y Y Y Y 08 31 2017												
City LITCHFIELD PARK	State AZ	Zip Code 85340-4424	Transaction ID : PR2408544847039												
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 ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)												
Full Name of Individual (Last, First, Middle C. WEE, KATHLYN G, , ,	Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address 2225 46TH ST NW			08 / D D / Y Y Y Y 08 31 2017												
City WASHINGTON	State DC	Zip Code 20007-1032	Transaction ID : PR2408545047039 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) State SIs OptumI	Memo Item												
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)												
SUBTOTAL of Receipts This Page (optional)			809.20												
TOTAL This Period (last page this line numb	er only)														

Use separate schedule(s)

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PAGE 50 OF

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11	EMIZED RECEIPTS for each category of the Detailed Summary Page		for each category of the Detailed Summary Page		< 11a		11b	11c	12	<u> </u>					
	y information copied from such Reports and S for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full)	name and a	duress of any political committee	10 50			outions	Irom suci	n commu	lee.					
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Init CORZINE, JEFFREY SEAN, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 9350 TRACEYTON DRIVE			08 31 2017 Transaction ID : PR2437119747039											
	City DUBLIN	State OH	Zip Code 43017-9689	_				PR2437 Receipt th							
	FEC ID number of contributing federal political committee.			<u> </u>				40	.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		M	emo	tem								
	Receipt For: Primary General Other (specify) ▼		P/R Ded	ucti	on (\$20	.00 Bi-We	eekly)								
в.	Full Name of Individual (Last, First, Middle Init FUENTEVILLA, ANA T, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 4815 N CAMINO ESCUELA	Ctoto	Zin Code		08	/	D 10 31) / Y	2017	Y					
	City TUCSON	State AZ	Zip Code 85718-5913					PR2437							
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 471.42 Memo Item P/R Deduction (\$235.71 Bi-Weekly)											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2878.52												
с.	Full Name of Individual (Last, First, Middle Init HAGAN, WILLIAM A, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 6536 E GREYTHORN DRIVE				08 N		31		2017						
	City SCOTTSDALE	State AZ	Zip Code 85266-6761	_				PR2437 Receipt th							
	FEC ID number of contributing federal political committee.	С			Ľ.		y .	. ,	76	.92					
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	ited HealthCare Services Inc Bus Segment Cl				emo	o Item								
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82]	P/R Ded	lucti	on (\$38	.46 Bi-W	eekly)						
⊢	UBTOTAL of Receipts This Page (optional)		r	• -			9	y	588.	34					

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

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PAGE 51 OF

	EIVIZED RECEIPTS for each category of the Detailed Summary Page				X 11a 11b 11c						12									
				Johanieu Juliniary Faye		-	3		14	_	1:			16						
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements mane and a	ay n addre	ot be sold or used by any pe ess of any political committee	erson to so	for olic	the it cor	purp ntrib	oose utio	e of ns f	solic rom	iting such	cor CO	ntribu mmit	tions tee.					
\backslash	NAME OF COMMITTEE (In Full)																			
$\Big\rangle$	UnitedHealth Group Incorporated	PAC (Uni	tedHealth Group PA	(C)															
۹.	Full Name of Individual (Last, First, Middle Initia JOHNSON-MILLS, RITA FAYE, , ,	al) or Full C	Drgai	nization Name	Date of Receipt															
	Mailing Address 235 GOVERNORS WAY				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															
	City	State		Zip Code		Т	rans	acti	on	ID :	PR2	4371	201	4703	9					
	BRENTWOOD	TN		37027-8931	_	Am	nount	of	Ead	h R	eceip	ot thi	is P	eriod						
	FEC ID number of contributing federal political committee.			424.74																
	Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc Hlth Plan CEO							Memo Item												
	Receipt For:	Angregate	Yea	r-to-Date ▼																
	Primary General Other (specify) ▼	F	P/R	Ded	uctio	on (\$212	2.37	Bi-W	eek	ly)									
в.	Full Name of Individual (Last, First, Middle Initia WEISS, JACK S, , ,	al) or Full C	Drgai	nization Name		Da	ite of	Re	ceip	ot										
	Mailing Address 6245 NORTH 75 STREET	08 / D D / Y Y Y Y 08 31 2017																		
	City	State		Zip Code		Т	rans	acti	on	ın٠	PR24	4371	205	4703	9					
	SCOTTSDALE	AZ		85250-4621					-			-		eriod	-					
	FEC ID number of contributing federal political committee.	С		Ē			,			,	_	50.	00							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Sha	Memo Item																	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 425.00	P/R Deduction (\$25.00 Bi-Weekly)															
	Full Name of Individual (Last, First, Middle Initia BALTHAZOR, PAUL JOSEPH, , ,	al) or Full C	Drgai	nization Name		Da	ite of	Re	ceip	ot										
	Mailing Address 9013 FARNSWORTH AVENUE	NORTH				M	08	/	D	31	/	Y)17 [°]	Y					
	City	State		Zip Code		Т	rans	acti	ion	ID :	PR2	4371	207	74703	9					
	BROOKLYN PARK	MN		55443-1754	_	Am	nount	of	Ead	h R	leceip	ot thi	s P	eriod						
	FEC ID number of contributing federal political committee.	С				Ē			9			9		384.	60					
	Name of Employer (for Individual)	Occ	upat	ion (for Individual)		Г	Me	emo	lte	m										
	United HealthCare Services Inc		•	ment COO																
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 3269.10	F	P/R	Ded	uctio	on (\$192	2.30	Bi-W	'eek	ly)						
	JBTOTAL of Receipts This Page (optional)				 			-	, ,	-		5	-	859.	34					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 52 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 15											
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. PRESTON, ROBERT S, , ,	Initial) or Full C	Prganization Name	Date of Receipt											
Mailing Address 6594 HARBOR BEACH NE	E		08 / D D / Y Y Y Y Y 2017											
City PRIOR LAKE	State MN	Zip Code 55372-8201	Transaction ID : PR2437121447039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		47.60											
Name of Employer (for Individual) Optum360 Services Inc	Memo Item													
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$23.80 Bi-Weekly)													
Full Name of Individual (Last, First, Middle B. NESS, LAURA L, , ,	Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 10550 PINNACLE WAY			08 / D D / Y Y Y Y Y 08 31 2017											
City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121547039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		457.60											
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 ▼ 2940.60	P/R Deduction (\$228.80 Bi-Weekly)											
Full Name of Individual (Last, First, Middle COSGRIFF, JOHN W, , ,	Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 1837 SUMMIT LANE			08 / D D / Y Y Y Y Y 08 31 2017											
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137	Transaction ID : PR2437121647039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		384.60											
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	ted HealthCare Services Inc VP Strategy													
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			889.80											
TOTAL This Period (last page this line numb	er only)													

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FOR LINE NUMBER:

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PAGE 53 OF

	D RECEIPTS	or each category of the Detailed Summary Page	×	11a	a] 11 14	- F		11c 15	12 16	17					
or for comm	ation copied from such Reports and Sta nercial purposes, other than using the n	tements ma ame and a	ay n addre	ot be sold or used by any pe ess of any political committee	erson f to sol	or th	ne p con	purp ntrib	pos	se of	so fron	liciting	contribu	tions			
	of COMMITTEE (In Full) dHealth Group Incorporated	I PAC (l	Uni	itedHealth Group PA	C)												
	ne of Individual (Last, First, Middle Initia $\dot{Y}, PETER\;W,,,$	l) or Full O	Orgar	nization Name	[Date	of	Re	ecei	ipt							
	Address 3115 WEST 47 STREET				08 / 0 / Y Y Y Y Y 08 31 2017 Transaction ID : PR2437127547039												
		State MN		Zip Code		-			-			-		-			
	number of contributing			55410-1857	_ /	Amo	unt	of	Ea	ich R	lece	eipt thi	s Perioc	_			
	political committee.	С				Ļ			7			- JF-	384	60			
	Employer (for Individual)		•	ion (for Individual)	1		Me	emo) Ite	em							
	ealthCare Services Inc			rp Controller	_												
	For: mary General her (specify) ▼	Aggregate	Yea	rr-to-Date ▼ 3269.10	P/	/R D	edu	uctio	on	(\$192	2.30	0 Bi-W	eekly)				
	ne of Individual (Last, First, Middle Initia RT, ROBIN E, , ,	l) or Full O	Orgar	nization Name		Date	of	Re	ecei	ipt							
	Address 3643 JENIFER STREET NW					M 0		/	Γ	D D 31		/ Y	y y 2017	Y			
City WASHIN	IGTON	State DC		Zip Code 20015-1751									2804703 s Perioc	-			
	number of contributing political committee.						-		ļ	-y	384	60					
	f Employer (for Individual) ealthCare Services Inc		•	tion (for Individual) ernal Affs			Me	emo) Ite	em							
	For: mary General her (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 3269.10	P/	′R D	edu	uctic	on	(\$192	2.30	0 Bi-We	eekly)				
	ne of Individual (Last, First, Middle Initia MAN, STEPHEN M, , ,	l) or Full O	Orgar	nization Name		Date	of	Re	ecei	ipt							
	Address 5300 SHERRILL AVENUE					^м о		/	[D D D 31		/ Y	2017	Y			
City	CHASE	State MD		Zip Code 20815-3720	\vdash	-			-				657470	-			
			_	20010-3720	-	۹mo	unt	of	Ea	ich R	lece	eipt thi	s Perioc				
	number of contributing political committee.	С	-					_	<u>y</u>			y	384	60			
United H	^E Employer (for Individual) lealthCare Services Inc		•	ion (for Individual) vt Affs			Me	emo	o It	em							
	For: mary General her (specify)	Aggregate	Yea	r-to-Date ▼ 3269.10	P	/R D)edu	uctio	on	(\$19	2.3	0 Bi-W	eekly)				
SUBTOTA	L of Receipts This Page (optional)			••••••					,		Ì	9	1153.	80			
TOTAL Th	is Period (last page this line number or	ıly)		····· •					-			-q.					

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PAGE 54 OF

LIVITZED RECEIPTS for each category Detailed Summar		for each category of the	X 11a 11b 11c 12											
		Detailed Summary Page												
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	ay not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full)														
angle UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middl LANGER, DONALD S, , ,	e Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 5110 OAK RAMBLING D	RIVE		08 / D D / Y Y Y Y 08 31 2017											
City	State	Zip Code	Transaction ID : PR2445015447039											
КАТҮ	ТХ	77494-1971	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		230.48											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item											
Receipt For:		Year-to-Date ▼	-											
Primary General	Ayyreyale		P/R Deduction (\$115.24 Bi-Weekly)											
Other (specify)		1482.88												
Full Name of Individual (Last, First, Middl 3. LIND, NANCY A, , ,	e Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 2703 NORTHVIEW LANE	E		08 31 2017											
City	State	Zip Code	Transaction ID : PR2445016247039											
CEDAR FALLS	IA	50613-1655	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		28.00 Memo Item											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middl ADLINGTON SHKABERIN, A		rganization Name	Date of Receipt											
Mailing Address 4329 EWING AVE S			08 31 2017											
City	State	Zip Code	Transaction ID : PR2445016447039											
MINNEAPOLIS	MN	55410-1342	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		412.08											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item											
United HealthCare Services Inc		Human Capital	-											
Receipt For:		Year-to-Date ▼	-											
Primary General Other (specify)		3145.58	P/R Deduction (\$206.04 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num	, 		670.56											

FOR LINE NUMBER:

PAGE 55 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											
			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. SIEGEL, DAVID B, , ,	e Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 264 LAKEWOOD DRIVE			08 / D D / Y Y Y Y 2017											
City BLOOMFIELD HILLS	State MI	Zip Code 48304-3531	Transaction ID : PR2445017147039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		28.08											
Name of Employer (for Individual) United HealthCare Services Inc	United HealthCare Services Inc Med Dir													
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$14.04 Bi-Weekly)													
Full Name of Individual (Last, First, Middle B. KRAJNOVICH, DANIEL, , ,	e Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 9958 BUTTONDOWN LAI	08 31 2017													
City ZIONSVILLE	State IN	Zip Code 46077-8135	Transaction ID : PR2460167347039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		40.00											
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 ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. RENFRO, LARRY C, , ,	e Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 5 DOVE LANE	1 -		08 / D D / Y Y Y Y 2017											
City ANDOVER	State MA	Zip Code 01810-2845	Transaction ID : PR2460168147039 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) E CHAIRMAN & CEO Optum	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)		452.68											
TOTAL This Period (last page this line num	ber only)													

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

FOR LINE NUMBER:

(check only one)

PAGE 56 OF

		Detailed Summary Page		×	-		11b		11c		12	<u> </u>										
Any infor	mation copied from such Reports and Sta	atements m	l ay not be sold or used by any p	erson f	13 for the	pur	14 pose	of s	15 soliciting		16 ntribut	1 ions										
	mmercial purposes, other than using the																					
	OF COMMITTEE (In Full)																					
∕ Unit	edHealth Group Incorporate	d PAC (UnitedHealth Group PA	AC)																		
	ame of Individual (Last, First, Middle Initia BUCH, DAVID B, , ,	al) or Full C	Drganization Name		Date of	Re	eceipt															
	g Address 2220 CEDAR LAKE PKWY				м м 08	/	D	D 31	/ Y) 17	Y										
City		State	Zip Code		Trans	act	ion IE) : F	PR24601	1682	247039	9										
MINN	EAPOLIS	55416-3644	Amount of Each Receipt this Period																			
	D number of contributing I political committee.	192.30																				
	of Employer (for Individual) nternational Services Inc									Memo Item												
Receip	ot For:	Aggregate	e Year-to-Date ▼																			
	Primary General			P/	/R Ded	ucti	on (\$9	96.1	5 Bi-We	ekly	/)											
	Other (specify) ▼	L	1634.55																			
Full Na	ame of Individual (Last, First, Middle Initia XLER, ERIC J, , ,	al) or Full C	Drganization Name		Date of	Re	eceint															
	g Address 7220 WILLOW OAK DR				M M			D	/ Y	Y	Ý	Y										
					08	ľ		31		20												
City		Zip Code		Trans	acti	ion ID) : P	R24637	7231	47039)											
WEST	F BLOOMFIELD	MI	48324-3081	/	Amount	of	Each	ı Re	eceipt th	is P	eriod											
	D number of contributing I political committee.	С			480.80																	
	of Employer (for Individual) HealthCare Services Inc		cupation (for Individual) s Segment Gen Counsel																			
Receip	pt For:	Aggregate	e Year-to-Date ▼																			
	Primary General Other (specify) v		, 2836.40	P/	P/R Deduction (\$240.40 Bi-Weekly)																	
	ame of Individual (Last, First, Middle Initia LKOWSKI, KAREN LAUREAN		Drganization Name		Date of	Re	eceipt															
Mailing	g Address 6359 COUNTRY ROAD				08	/		31	/ Y)17 [°]	Y										
City		State	Zip Code		Trans	act	ion II) : F	PR24637	7234	44703	9										
	N PRAIRIE	MN	55346-1342	/	Amount	of	Each	ı Re	eceipt th	is P	eriod											
	D number of contributing I political committee.	С					9		,	_	28.0)8										
Name	of Employer (for Individual)	Occ	cupation (for Individual)		M	emo	o Item	n														
	n Services, Inc	Mgr	ng Cnslt HHS																			
	pt For:	Aggregate	e Year-to-Date ▼																			
	Primary General Other (specify)		238.68] P	/R Ded	ucti	on (\$	14.0)4 Bi-W€	ekly	y)											
SUBTO	TAL of Receipts This Page (optional)			•			9		9	-	701.1	8										
TOTAL	This Period (last page this line number o	nly)					-	_	-	_		_										

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 57 OF

		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17												
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions e to solicit contributions from such committee.												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)												
Full Name of Individual (Last, First, Midd GILL, PETER M, , ,	le Initial) or Full C	rganization Name	Date of Receipt												
Mailing Address 8673 SHERWOOD BLU	1		08 31 2017												
City EDEN PRAIRIE	State MN	Zip Code 55347-3433	Transaction ID : PR2463724647039												
		55547-5455	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) Corp Dev	Memo Item												
Receipt For:		Year-to-Date ▼	_												
Primary General Other (specify) ▼		4999.90	P/R Deduction (\$0.00 Bi-Weekly)												
Full Name of Individual (Last, First, Midd B. SCHICK, SUE, , ,	le Initial) or Full C	rganization Name	Date of Receipt												
Mailing Address 1220 DENBIGH LANE			08 31 2017												
City WAYNE	State PA	Zip Code 19087-4644	Transaction ID : PR2480620547039 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		384.60												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Growth Off	Memo Item												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)												
Full Name of Individual (Last, First, Midd C. ABBOTT, CHRISTOPHER MA		rganization Name	Date of Receipt												
Mailing Address 12700 MUNDOMAR DR			08 31 2017												
City	State TX	Zip Code	Transaction ID : PR2484541547039												
AUSTIN		78739-1542	Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C		81.00												
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 ▼ 635.50	P/R Deduction (\$40.50 Bi-Weekly)												
SUBTOTAL of Receipts This Page (optiona	al)		465.60												
TOTAL This Period (last page this line num	nber only)	······													

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 58 OF

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 BURNS, MATTHEW A, , ,	Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 2724 BISON DRIVE			08 / D D / Y Y Y Y 08 31 2017											
City	Zip Code	Transaction ID : PR2484541747039												
EDMOND	ОК	73034-3475	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	250.00													
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item													
Receipt For:	Aggregate	Year-to-Date V												
Other (specify) ▼	P/R Deduction (\$125.00 Bi-Weekly)													
Full Name of Individual (Last, First, Middle B. PHILLIPS, MARK A, , ,	Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 1760 LUCY RIDGE CT	08 / D D / Y Y Y Y Y 2017													
City	Zip Code	Transaction ID : PR2484542647039												
CHANHASSEN	MN	55317-7661	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		384.60											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P SIs	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2692.20	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. MANDERFELD, THOMAS B, ,		organization Name	Date of Receipt											
Mailing Address 3760 WEST CALHOUN P	ARKWAY		08 31 2017											
City	State	Zip Code	Transaction ID : PR2486697947039											
MINNEAPOLIS	MN	55410-1118	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		80.00											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item											
United HealthCare Services Inc		Capital Mkt Comm												
Receipt For:	Aggregate	Year-to-Date V												
Other (specify)		680.00	P/R Deduction (\$40.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			714.60											
TOTAL This Period (last page this line numb	per only)													

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

FOR LINE NUMBER:

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PAGE 59 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a 13] 11k	-	11c 15	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose	e of s	oliciting	contribu	tions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initial) MCMAHON, DIRK C, , ,	or Full O	rgar	nization Name		Date of	Re	eceip	ot							
	Mailing Address 60 WILDHURST ROAD															
	City EXCELSIOR	State MN		Zip Code 55331-8461	Transaction ID : PR2491457047039											
		55551-6401	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.		384.60													
	Name of Employer (for Individual) Optum Services, Inc	ion (for Individual) Pres & COO		Me	emo	b Ite	em									
	Receipt For: A	ggregate	Yea	ır-to-Date ▼	_											
	Primary General Other (specify) ▼	P/	'R Ded	uctic	on (\$192.	30 Bi-W	/eekly)								
в.	Full Name of Individual (Last, First, Middle Initial) NATHAN, DONALD H, , ,	or Full O	rgar	nization Name		Date of	Re	eceip	ot							
	Mailing Address 275 GREENWICH STREET #30		м м 08	1	D	31	/ Y	y y 2017	Y							
	City	Zip Code	Transaction ID : PR2491457347039													
	NEW YORK	NY		10007-2150	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.		384.60													
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) nief Comm Off	Memo Item											
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial) SULLIVAN, KATHRYN M, , ,	or Full O	rgar	nization Name		Date of	Re	eceip	ot							
	Mailing Address 530 N LAKE SHORE DR # 2309					м м 08	1	D	31	/ Y	y y 2017	Y				
	5	State		Zip Code		Trans	acti	ion	ID : P	R2491	45754703	9				
	CHICAGO	IL		60611-7435	A	mount	of	Ead	ch Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С						9		y	485.	52				
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)		M	emo	o Ite	em							
	United HealthCare Services Inc	CEC	D E&	I Regions												
		ggregate	Yea	r-to-Date ▼												
	Other (specify)		-	2815.08	P/	/R Ded	uctio	on (\$242.	76 Bi-V	/eekly)					
s	UBTOTAL of Receipts This Page (optional)			•••••	[7		y	1254.	72				
т	OTAL This Period (last page this line number only	′)						-		-						

Use separate schedule(s)

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PAGE 60 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 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 SMITH, KARA V, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 610 CRESTWOOD DRIVE	I		M m / 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											
City ALEXANDRIA	State VA	Zip Code 22302-2533	Transaction ID : PR2540175347039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		384.60											
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item													
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$192.30 Bi-Weekly)													
Full Name of Individual (Last, First, Middle B. PURDY, PATRICIA A, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 7417 LYNNHURST STRE	1		08 / D D / Y Y Y Y 08 31 2017											
City CHEVY CHASE	State MD	Zip Code 20815-3101	Transaction ID : PR2541300647039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		384.60											
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle TIERNEY, JOELLE M, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 5710 TAYCHOPERA RD			08 / D D / Y Y Y Y 2017											
City MADISON	State WI	Zip Code 53705-1020	Transaction ID : PR2541300747039 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		219.78											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item											
Receipt For: Primary General Other (specify)	Primary General General													
SUBTOTAL of Receipts This Page (optional))		988.98											
TOTAL This Period (last page this line numb	per only)													

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FOR LINE NUMBER:

PAGE 61 OF

171	EMIZED RECEIPTS		Use separate schedule(s)	(che	ck only	/ or	ne)	L					
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		2	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the		oose of	soliciting	g cont	ributi	ons		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial VERSAGGI, JOHN, , ,	l) or Full Or	rganization Name		Date of Receipt								
	Mailing Address 800 ALBANY AVENUE			11	08 31 / Y Y Y Y 2017								
	City ALEXANDRIA	State VA	Zip Code 22302-3501	Transaction ID : PR2541300847039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С						-		192.3	2		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1634.72	P/	R Ded	uctio	on (\$96.	16 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initial HOSTETLER, BRENDAN, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 2309 W WINNEMAC AVE												
	City CHICAGO	State IL	Zip Code 60625-1817		Transaction ID : PR254254194703 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		126.92									
	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 ▼ 928.82	P/R Deduction (\$63.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial RAMSAY, RICHARD E, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 543 E LURAY AVE	1			м м 08	1	D D D 31	/ Y	201		Y		
	City ALEXANDRIA	State VA	Zip Code 22301-1605	A				PR2542					
	FEC ID number of contributing federal political committee.	С			_		y :			100.0	0		
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) Regl Affs		Me	emc	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 850.00	P/R Deduction (\$50.00 Bi-Weekly					eekly)				
s	UBTOTAL of Receipts This Page (optional)			[,		4	119.24	4		
т	OTAL This Period (last page this line number on	ly)	••••••	[-			

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PAGE 62 OF

171			Use separate schedule(s)	(ch	neck only	/ or	ne)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b 14	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the						oose of						
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia SPENCER, IPYANA, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 4226 40TH STREET NORTH				08 31 2017								
	City ARLINGTON	State VA		Transaction ID : PR2542542347039 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) /Iktg Bus Dev		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00] '	P/R Deduction (\$30.00 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initiation YAU, ANNE, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 9905 WOODLAND DRIVE	905 WOODLAND DRIVE State Zip Code								Y			
	City SILVER SPRING	State	Zip Code 20902-4047				-	PR25435 eceipt th		-			
	FEC ID number of contributing federal political committee.	С				U			124.				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 939.54]	P/R Deduction (\$62.27 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initia DAVENPORT, ALLISON MCCON		rganization Name		Date of	Re	ceipt						
	Mailing Address 141 PELHAM ROAD				08	/	D D 31	/ Y	y y 2017	Y			
	City PHILADELPHIA	State PA	Zip Code 19119-2661					PR25523 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		333.	32			
	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 (\$166.66 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•			, .		517.	86			
т	OTAL This Period (last page this line number o	nly)		- •									

FOR LINE NUMBER:

PAGE 63 OF

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									
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	-											
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middl AALTER, JEFFREY D, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3 WOODLAND ROAD			08 31 Y Y Y Y Y 08 31 2017									
City PORT JEFFERSON	State NY	Zip Code 11777-1053	Transaction ID : PR2552960247039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middl B. BROOKS, KEVIN, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
	City											
City PLYMOUTH	State MN	Zip Code 55447-1705	Transaction ID : PR2552961047039									
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) Mktg	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middl C. BRUNELL, MARK A, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 20 VERMILION CLIFFS			08 31 2017									
City ALISO VIEJO	State CA	Zip Code 92656-8096	Transaction ID : PR2552961247039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R URS SAE	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	l)		440.60									
TOTAL This Period (last page this line num	ber only)											

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FOR LINE NUMBER:

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PAGE 64 OF

ITEMIZED RECEIPTS				or each category of the Detailed Summary Page		_	11a 13] 11 14	-		11c 15	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the nar					fo	r the		pos	se of		liciting	contrib	utions			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	Jni	tedHealth Group PA	C)												
Α.	Full Name of Individual (Last, First, Middle Initial) BRYANT, JEREMY VAUGHN, , ,	or Full Or	rgar	nization Name		Da	ate of	Re	ecei	ipt							
	Mailing Address 4534 MYSTIQUE WAY					08 / 31 / 2017 Transaction ID : PR2552961347039											
	City ROSWELL	State GA		Zip Code 30075-2087	-				-								
		C	Amount of Each Receipt this Period														
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt NA Accts		Memo Item											
	Receipt For: A Primary General Other (specify) ▼ I	ggregate `	Yea	r-to-Date ▼ 595.00		P/F	R Ded	uctio	on	(\$35.	.00	Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initial) EHLMAN, MICHAEL A, , ,	nization Name		Da	ate of	Re	ecei	ipt									
	Mailing Address 10051 VALLEY RIDGE COURT			08 / D D / Y Y Y Y 2017													
	City LAS VEGAS	StateZip CodeNV89148-7602							-				622470 s Perio				
	FEC ID number of contributing federal political committee.	C						28.00									
	Name of Employer (for Individual) Health Plan of Nevada	Occu Dir A		Memo Item													
	Receipt For: A Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 238.00							P/R Deduction (\$14.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rgar	nization Name		Da	ate of	Re	ecei	ipt							
	Mailing Address 8508 TRELADY CT					[08	/	E	31)	/ Y	y y 2017	Y			
	City PLANO	State TX		Zip Code 75024-6827	-				-				623470				
		C					nount	. 01	Ea		ec	, eipt thi	s Perio 78	a 3.00			
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) HIth Plan CEO							o Ite	em							
	Receipt For: A Primary General Other (specify)	ggregate `	Yea	r-to-Date ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)												
s	UBTOTAL of Receipts This Page (optional)			•••••					,			9	176	6.00			
т	OTAL This Period (last page this line number only)		•••••	-				7		Ť	-7-					

FOR LINE NUMBER:

PAGE 65 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b		12						
Any information copied from such Reports a or for commercial purposes, other than usir												
	ig the hame and a			Intribution								
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Mide HANNAN, CLAIRE L, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 25932 PORTAFINO DR	IVE		08 31 Y Y Y Y Y									
City MISSION VIEJO	State CA	Zip Code 92691-5716		Transaction ID : PR2552962747039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		78.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		lemo Ite	m							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 663.00	P/R Dec	duction (S	\$39.00 Bi-W	eekly)						
Full Name of Individual (Last, First, Mido B. JAMES, GREGORY J, , ,	lle Initial) or Full O	rganization Name	Date c	f Receip	t							
Mailing Address 2323 KINGS POINT DR			M N 08	/ D	31 / Y	2017	Y					
City LARGO	State FL	Zip Code 33774-1009			D : PR2552)					
		33774-1009	Amour	it of Eac	h Receipt th	his Period						
FEC ID number of contributing federal political committee.	C			133								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 1ed Dir		lemo Itei	m							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 399.96	P/R Deduction (\$66.66 Bi-Weekly)									
Full Name of Individual (Last, First, Mido C. KIDAMBI, NARASIMHAN, , ,	lle Initial) or Full O	rganization Name	Date c	f Receip	t							
Mailing Address 18477 85TH AVE N			08	/ D	31 / Y	2017	Y					
City MAPLE GROVE	State MN	Zip Code 55311-1663			ID : PR2552 h Receipt th		9					
FEC ID number of contributing federal political committee.	C			. ,	, , , , , , , , , , , , , , , , , , ,	40.0	00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) : Dir Bus Anlys		lemo Ite	m							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)					251.3	32					
TOTAL This Period (last page this line nur	,			,								

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FOR LINE NUMBER:

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PAGE 66 OF

TEMIZED 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 to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	-												
Full Name of Individual (Last, First, M A. LOVELADY, JOHN H, , ,	liddle Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 6268 ORCHARD PA	RК		08 / D D / Y Y Y Y 2017										
City FRISCO	State TX	Zip Code	Transaction ID : PR2552964247039										
		75034-5126	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼	—										
Other (specify) ▼		3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, M B. MACLEOD, JULIE K, , ,	liddle Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 15314 JEFFERS PAS	SS NW		M M / 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	State	Zip Code	Transaction ID : PR2552964447039										
PRIOR LAKE	MN	55372-3614	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		28.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nan Capital Partner Mgr	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name of Individual (Last, First, M C. MARTO, MICHELLE, , ,	liddle Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 149 WILLIAMSBURG	COURT		08 31 Y Y Y Y Y 08 31 2017										
City	State	Zip Code	Transaction ID : PR2552964747039										
ALBANY	NY	12203-5502	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		28.00										
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 ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (opt	ional)	•	440.60										
TOTAL This Period (last page this line	number only)	•••••											

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PAGE 67 OF

ı ب	EMIZED RECEIPTS		Use separate schedule(s)	(cł	neck only	у ог	ne)								
11	EIVILLED REVEIFIS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	<i>,</i>					
	y information copied from such Reports and S for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full)			5 10 3					1 Commu						
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Ini MATTSON, CARL A, , ,	tial) or Full O	organization Name		Date of Receipt										
	Mailing Address 539 ROUTE 9P				M M / 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 SARATOGA SPRINGS	State NY	Zip Code 12866-7279		Transaction ID : PR2552964847039 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			169.66										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt		M	emo	tem Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.49	P/R Deduction (\$84.83 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Ini MORRIS, MICHAEL D, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt								
	Mailing Address 2624 N HARTLAND COURT				M M 08	/	31	/ Y	2017	Y					
	City	State	Zip Code						6504703	9					
	CHICAGO	IL	60614-4955		Amount	t of	Each R	leceipt th	is Period						
	FEC ID number of contributing federal political committee.	s a la l							30.	76					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt		M	emo	o Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 261.46]	P/R Deduction (\$15.38 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Ini PAULUS, LESLIE K, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt								
	Mailing Address 305 E TUCKEY LN				M M 08	/	31) / Y	2017	Y					
	City PHOENIX	State AZ	Zip Code 85012-1048						96524703 is Period	9					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	. ,	28.0	00					
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	upation (for Individual) I Dir		М	emo	o Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	1	P/R Ded	lucti	on (\$14	.00 Bi-W€	eekly)						
s	UBTOTAL of Receipts This Page (optional)			•			,	· ·	228.4	12					
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PAGE 68 OF

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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (I	United	dHealth G	roup PA	C)													
Α.	Full Name of Individual (Last, First, Middle Initial) of PEKA, GARY W, ,	or Full C	Organizat	tion Name		[Date	e of	Re	cei	ipt								
	Mailing Address 8350 CRABAPPLE COURT	State	Zin	Code			C)8	/	L	31			2017					
	5	MN	· · ·	5386-8200		Transaction ID : PR2552965347039 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	C																	
	Name of Employer (for Individual) Optum Services, Inc		upation Six Sigm	(for Individual) na)	Memo Item													
	Receipt For: Ag Primary General Other (specify) ▼	igregate	P/R Deduction (\$14.00 Bi-Weekly)																
B.	Full Name of Individual (Last, First, Middle Initial) of POTTER JR, DONALD W, , ,	tion Name		1	Date	e of	Re	cei	ipt										
	Mailing Address 116 FULLER LANE							™ 08	/	Ľ	31	1	Y	y y 2017	Y				
	,	StateZip CodeIL60093-4213												6 54470 s Perio					
	FEC ID number of contributing federal political committee.	C								,			-	28	3.00				
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) NA VP Clnt Relationship							Memo Item										
	Receipt For: Ag Primary General Other (specify) ▼	Aggregate Year-to-Date ▼							P/R Deduction (\$14.00 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) of SAMSEL, KRISTINE G, , ,	or Full C	Organizat	tion Name		1	Date	e of	Re	cei	ipt								
	Mailing Address 91 WAVERLY RD						(08 [™]	1	L	31		L	2017	_				
	5	State CT	· · ·	Code 6484-5835										657470 s Perio					
	FEC ID number of contributing federal political committee.							Junt	U	La		ece	ipt trik		3.00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation Gen Mgr	(for Individual) mt)			Me	emo	o Ite	em								
	Receipt For: Ag Primary General Other (specify)	Aggregate Year-to-Date ▼ 238.00								P/R Deduction (\$14.00 Bi-Weekly)									
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PAGE 69 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 12 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th												
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	4C)									
Full Name of Individual (Last, First, Middle Ir A. STREIT, BARRY R, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 5421 KELLOGG AVENUE			08 31 2017									
City EDINA	State MN	Zip Code 55424-1604	Transaction ID : PR2552966747039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of SIs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 980.73	P/R Deduction (\$57.69 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. TINKER, ANN R, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 530 HUNTER FLAT STREE	Γ		08 / 31 / 2017									
City LAS VEGAS	State NV	Zip Code 89138-1110	Transaction ID : PR2552966847039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir c. WACKER, AARON C, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 4704 CAVAN ROAD			08 / D D / Y Y Y Y 08 31 2017									
City MOUND	State MN	Zip Code 55364-1877	Transaction ID : PR2552967047039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Apps Dev	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			171.38									
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SCHEDULE A (FEC Form 3X) _ _ _ .

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PAGE 70 OF

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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												
<u>.</u>	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia NAASZ, SCOTT A, , ,	al) or Full O	Organization Name	Date of Receipt									
	Mailing Address 3311 WILDS RIDGE NW			08 / D D / Y Y Y Y 08 31 2017									
	City PRIOR LAKE	State MN	Zip Code 55372-4540	Transaction ID : PR2553474747039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		88.58									
	Name of Employer (for Individual) United HealthCare Services Inc		eupation (for Individual) Cust Svs	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 601.48	P/R Deduction (\$44.29 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia PROSKAUER, DANIEL C, , ,	Organization Name	Date of Receipt										
	Mailing Address 240 DERBY STREET			08 / D D / Y Y Y Y 2017									
	City NEWTON	State MA	Zip Code 02465-1006	Transaction ID : PR2553475047039									
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
	Name of Employer (for Individual) Optum Services, Inc	Occi VP	cupation (for Individual) IT	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.60	P/R Deduction (\$23.80 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia RAYBURN, MONICA L, , ,	al) or Full O	Organization Name	Date of Receipt									
	Mailing Address 5127 JACKSON PONDS CT			08 / D D / Y Y Y Y 2017									
	City SUGAR LAND	State TX	Zip Code 77479-4656	Transaction ID : PR2553475147039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		78.00									
	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 ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			214.18									
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PAGE 71 OF

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 ar or for commercial purposes, other than using	nd Statements ma	ay not be sold or used by any pendotress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	NC)										
Full Name of Individual (Last, First, Middle THOMAS, RICHARD D, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5121 DUPONT AVENUE	SOUTH		M M / 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 Y										
City MINNEAPOLIS	State MN	Zip Code 55419-1151	Transaction ID : PR2553475447039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1649.00	P/R Deduction (\$97.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle 3. VOJTA, DENEEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5201 KELLOGG AVENUE	08 / D D / Y Y Y Y Y 2017												
City EDINA	State MN	Zip Code 55424-1304	Transaction ID : PR2553475547039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	ů l												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Initiv Clin Aff	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. ZERAFA, DANIEL J, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 61234 ADMIRAL DRIVE			08 / D D / Y Y Y Y 08 31 2017										
City WASHINGTON TOWNSHIP	State MI	Zip Code 48094-1242	Transaction ID : PR2553475747039										
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 I	upation (for Individual) T	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)										
Optum Services, Inc Receipt For: Primary General	VP I Aggregate	T Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly) 606.60										

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FOR LINE NUMBER:

PAGE 72 OF

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		2 6	17				
	y information copied from such Reports and S for commercial purposes, other than using the				for the		bose of	soliciting	g cont	ributio	ons				
\vdash	NAME OF COMMITTEE (In Full)			5 10 30				3001 3001		mile	<u>.</u>				
	UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Init ECKERT, CHRISTINE A, , ,	tial) or Full C	organization Name		Date of Receipt										
	Mailing Address 33 BRIGHTVIEW DRIVE				08 31 / Y Y Y Y 2017										
	City WEST HARTFORD	State CT	Zip Code 06117-2002					PR2553							
	FEC ID number of contributing federal political committee.	С			15.38										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Architecture CnsIt		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.73	P	/R Ded	uctio	on (\$7.6	9 Bi-Wee	ekly)						
в.	Full Name of Individual (Last, First, Middle Init FLAGSTAD, KARSTEN S, , ,	tial) or Full C	organization Name		Date of	Re	ceipt								
	Mailing Address 1002 141ST LANE NE		M M 08	/	D D D 31	/ Y	y 201								
	City	State	Zip Code				-	PR25540							
	HAM LAKE	MN	55304-6770	Amount of Each Receipt this Pe						riod					
	FEC ID number of contributing federal political committee.	С			<u> </u>				3	384.60)				
	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 ▼ 3269.10	P/	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Ini MOORE, THOMAS W, , ,	tial) or Full C	organization Name		Date of	Re	ceipt								
	Mailing Address 10733 TAVISTOCK DRIVE				м м 08	/	31		201	7					
	City TAMPA	State FL	Zip Code 33626-1718					PR2554							
	FEC ID number of contributing federal political committee.	С				_	,	. ,		28.00)				
	Name of Employer (for Individual) Optum Services, Inc	Occ Sls I		Memo Item											
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00] P	P/R Ded	uctio	on (\$14.	.00 Bi-W	eekly)						
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PAGE 73 OF

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or	for commercial purposes, other than using the na												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Unit	tedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) REIDY, GREGORY D, , ,	or Full O	Drgan	ization Name	C	ate of	Re	cei	pt				
	Mailing Address 4836 W SUNSET BLVD					м м 08	1		31]	/ Y	ү ү 2017	Y
	City TAMPA	State FL		Zip Code 33629-6448	Δ							1334703 s Period	9
	FEC ID number of contributing federal political committee.	С				inount		1			, pt thi	94. ⁻	94
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) n CEO		Me	emo) Ite	əm				
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 572.70	P/	R Dedu	uctic	on ((\$47.4	47	Bi-We	ekly)	
B.	Full Name of Individual (Last, First, Middle Initial) ALEXANDER, JOY L, , ,	or Full O	Drgan	ization Name		ate of	Re	cei	pt				
	Mailing Address 5116 NORTH TIOGA WAY					™ 08	1		31]	/ Y	2017	Y
	City LAS VEGAS	State NV		Zip Code 89149-5830				-				6414703 s Period	9
	FEC ID number of contributing federal political committee.	С			ļ			7			-7-	28.	00
	Name of Employer (for Individual) Health Plan of Nevada		cupati Mktg	on (for Individual)		Me	emo) Ite	əm				
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 238.00	P/I	R Dedu	uctic	on ((\$14.0	00 I	Bi-Wee	ekly)	
	Full Name of Individual (Last, First, Middle Initial) BENNETT, JIM L, , ,	or Full O	Drgan	ization Name		ate of	Re	cei	pt				
	Mailing Address 3724 PINE TIP ROAD					м м 08	1	L	31	J.	/ Y	2017	
	City TALLAHASSEE	State FL		Zip Code 32312-1016	A							6424703 s Period	9
	FEC ID number of contributing federal political committee.	С						y			9	28.	00
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Gen Counsel		Me	emo) Ite	em				
	Receipt For: A Primary General Other (specify)	Aggregate	Year	-to-Date ▼ 238.00	P/	R Dedi	uctio	on ((\$14.0	00	Bi-We	ekly)	
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FOR LINE NUMBER:

PAGE 74 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 t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	ted PAC (I	InitedHealth Group P	
			A0)
Full Name of Individual (Last, First, Middle I A. CLUTE, DANIEL J, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 7756 N 85TH STREET			08 31 2017
City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064447039
			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
United HealthCare Services Inc	Med	d Dir	
Receipt For:	Aggregate	Year-to-Date V	
Primary General		050.00	P/R Deduction (\$38.46 Bi-Weekly)
Other (specify) v		653.82	
Full Name of Individual (Last, First, Middle I B. GAZELEY, PAULA A, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 36 MAYFAIR ROAD			08 31 2017
City	State	Zip Code	Transaction ID : PR2560064847039
WYNANTSKILL	NY	12198-8018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		238.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle I C. GIANCURSIO, DONALD J, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 72 MIDNIGHT RIDGE DR			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
City	State	Zip Code	Transaction ID : PR2560064947039
LAS VEGAS	NV	89135-1680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Plan CEO	Memo Item
Receipt For:		Year-to-Date ▼	—
Primary General	Aggregate		P/R Deduction (\$192.30 Bi-Weekly)
Other (specify)		3269.10	
SUBTOTAL of Receipts This Page (optional)			489.52
TOTAL This Period (last page this line number	er only)		

FOR LINE NUMBER:

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PAGE 75 OF

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 JONES, JERI L, , ,	tial) or Full C	Organization Name	Date of Receipt
Mailing Address 2932 E MADISON VISTAS D	२		08 / D / Y Y Y Y 2017
City PHOENIX	State AZ	Zip Code	Transaction ID : PR2560065147039
		85016-4981	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Other (specify)		1249.95	P/R Deduction (\$96.15 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ini B. KUNEMUND, GREGG J, , ,	tial) or Full C	Organization Name	Date of Receipt
Mailing Address 9040 RIVERBEND MANOR			08 31 2017
City ALPHARETTA	State GA	Zip Code 30022-1813	Transaction ID : PR2560065347039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		206.04
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 ▼ 1572.79	P/R Deduction (\$103.02 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ini C. LIPPMAN, SHELDON, , ,	tial) or Full C	Organization Name	Date of Receipt
Mailing Address 55 CLIFFIELD ROAD			08 / D D / Y Y Y Y 08 31 2017
City BEDFORD	State NY	Zip Code 10506-1210	Transaction ID : PR2560065447039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		194.00
Name of Employer (for Individual) United HealthCare Services Inc	Occ Med	upation (for Individual) I Dir	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1649.00	P/R Deduction (\$97.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			592.34
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 76 OF

	EMIZED RECEIPTS		Detailed Summary Page	×	11a		1	1b		11c	1	12	
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	y information copied from such Reports and Stat for commercial purposes, other than using the na												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial LUCHT, JEFFREY D, , ,) or Full O	rganization Name		Date c	of Re	ece	eipt					
	Mailing Address 33 FOUR SEASONS DRIVE				M N 08	/		31	D	/ Y	y 201	Y 17	Y
	City	State	Zip Code		Tran	sact	tio	n ID :	PR	25600	6564	7039)
	ALTON	NH	03809-4872	_	Amour	nt of	Ea	ach F	Rece	eipt thi	s Pe	riod	
	FEC ID number of contributing federal political committee.	С					,			-	1	194.0	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Act Underwriting		N	lemo	o li	tem					
	Receipt For:		Year-to-Date ▼										
	Primary General Other (specify) ▼		1649.00	F	P/R Deo	ducti	ion	ı (\$97.	.00	Bi-We	ekly)		
B.	Full Name of Individual (Last, First, Middle Initial MARONEY, KEVIN MICHAEL, , ,) or Full O	rganization Name		Date c	of Re	ece	eipt					
	Mailing Address 5052 NORMAN DRIVE				M N 08	/		31		/ Y	y 201	ү 7	Y
	City	State	Zip Code							25600			
	MINNETONKA	MN	55345-4636	_	Amour	nt of	Ea	ach F	Rece	eipt thi	s Pe	riod	
	FEC ID number of contributing federal political committee.	С					,			-9		28.0	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel		N	lemo	o li	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P	/R Dec	ductio	ion	(\$14.	.00	Bi-Wee	əkly)		
с.	Full Name of Individual (Last, First, Middle Initial MELNYK, DONALD G, , ,) or Full O	rganization Name		Date c	of Re	ece	eipt					
	Mailing Address 141 MONROE STREET				^M 08	1		31		/ Y	ү 201	7 7	Y
	City	State NJ	Zip Code							25600)
	GARFIELD		07026-1825		Amour	nt of	Ea	ach F	Rece	eipt thi	s Pe	riod	
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PAGE 77 OF

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NAME OF COMMITTE	E (In Full) roup Incorporate	d PAC (l	JnitedHealtl	h Group PA	C)							
Full Name of Individua MILICH, DAVID, , ,	I (Last, First, Middle Initi	ial) or Full O	rganization Name	9		Date of	Re	ceipt				
Mailing Address 2702	BIRCHMERE COURT					м м 08	/	D 3	D 1	/ Y	ү ү 2017	Y
City		State TX	Zip Code	0						R25600		
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Mailing Address 22191	WESTCLIFF					м м 08	1	D 3	D 81	/ Y	2017	Y
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PAGE 78 OF

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<u> </u>	VAME OF COMMITTEE (In Full)		luure		10 3				UIII SUCI	Commi	liee.
	UnitedHealth Group Incorporated	PAC (L	Jni	tedHealth Group PA	C)						
	Full Name of Individual (Last, First, Middle Initial VAIL, DENISE, , ,) or Full Oi	rgan	ization Name		Date of	Re	ceipt			
-	Mailing Address 35 CLEVELAND AVENUE					M M 08	/	D D D 31	/ Y	ү ү 2017	Ŷ
	City SAYVILLE	State NY		Zip Code 11782-1322						06684703 nis Perioc	
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	Full Name of Individual (Last, First, Middle Initial DICKMAN, KRISTA J, , ,) or Full Oi	rgan	ization Name		Date of	Re	ceipt			
	Mailing Address 2533 ONYX DRIVE	1 -				м м 08	/	D D D 31	/ Y	2017	Y
	City SHAKOPEE	State MN		Zip Code 55379-2770				-		39814703 nis Perioc	
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l	Mailing Address 23426 VILLENA					08	/	D D D 31	/ Y	2017 [°]	Y
-	City MISSION VIEJO	State CA		Zip Code 92692-1861				-		3985470	
	FEC ID number of contributing rederal political committee.	С				<u>[</u> .		y 1	. y	28	.00
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir A	•	on (for Individual) vs		Me	emo	Item			
l	Receipt For: Primary General Other (specify)	Aggregate	Yea	-to-Date ▼ 238.00		P/R Ded	uctio	on (\$14.)	00 Bi-We	eekly)	
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PAGE 79 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using			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 (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle NOEL, TIMOTHY J, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4316 FREMONT AVENUE	SOUTH		08 / D D / Y Y Y Y 08 31 2017
City MINNEAPOLIS	State MN	Zip Code 55409-1721	Transaction ID : PR2560398847039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle WULF, ROBERT W, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 622 N 11TH ST			08 / D D / Y Y Y Y Y 2017
City WAUSAU	State WI	Zip Code 54403-5004	Transaction ID : PR2560398947039
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. CRONIN, JAMES, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 241 WALLACE RD		1	08 / D D / Y Y Y Y Y 2017
City BEDFORD	State NH	Zip Code 03110-5144	Transaction ID : PR2560821147039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		486.42
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 ▼ 2811.03	P/R Deduction (\$243.21 Bi-Weekly)
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PAGE 80 OF

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<u>.</u>	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P/	AC)					
Α.	Full Name of Individual (Last, First, Middle Initia O'BRIEN, PATRICK J, , ,	al) or Full Or	rganization Name	Da	te of	Receipt			
	Mailing Address 33 BARRINGTON DRIVE			N	08	/ D 3	D / Y	ү ү 2017	Ý
	City BEDFORD	State NH	Zip Code 03110-5601				PR2560 Receipt the		
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	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (ipation (for Individual) Ops		Mer	mo Item	I		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R	Dedu	ction (\$1	14.00 Bi-W	ekly)	
B.	Full Name of Individual (Last, First, Middle Initia PERO, MARIE A, , ,	al) or Full Or	rganization Name	Da	te of	Receipt			
	Mailing Address 516 APPLE LANE			IV	08	/ D	D / Y	2017	Y
	City HARLEYSVILLE	State PA	Zip Code 19438-2549				: PR2560		
	FEC ID number of contributing federal political committee.	С			iouni		Receipt th		3.00
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	upation (for Individual) Prod		Mer	mo Item	I		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R	Deduo	ction (\$1	4.00 Bi-We	ekly)	
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full Or	rganization Name	Da	te of	Receipt			
	Mailing Address 464 EAST NORTH AVE	State	Zin Onde		08 ^M		31	2017	_
	City GRANTSBURG	WI	Zip Code 54840-7423				D: PR2561 Receipt th		
	FEC ID number of contributing federal political committee.	С				7	, incorport in		3.00
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir T	ipation (for Individual) ax		Me	mo Item	1		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 663.00	P/R	Dedu	ction (\$3	39.00 Bi-W	eekly)	
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PAGE 81 OF

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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 I CAVANAUGH, LARRY W, , ,	nitial) or Full C	rganization Name	Date o	of Rec	eipt			
Mailing Address 520 NE 20TH ST # 1010			08	/	D D D 31	/ Y	2017	Y
City WILTON MANORS	State FL	Zip Code 33305-2162					1104703 s Period)
FEC ID number of contributing federal political committee.	С						78.0	00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ben Govt Dntl Sls Mgr		1emo	Item			
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Full Name of Individual (Last, First, Middle I BARTON, JACQULYN M, , ,	nitial) or Full C	rganization Name	Date c	of Rec	eipt			
Mailing Address 1587 112 TH COURT WEST			08	/	D D D 31	/ Y	2017	Y
	State MN	Zip Code 55077-5412					11247039)
INVER GROVE HEIGHTS		00//-0412	Amour	ιτ of E	acn Re	ceipt thi	s Period	_
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner		1emo	Item			
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Other (specify) ▼		1700.00	P/R Dec	ductior	n (\$100.	00 Bi-W	eekly)	
Full Name of Individual (Last, First, Middle I MACKENZIE, ANDREW C, , ,	nitial) or Full C	rganization Name	Date c	of Rec	eipt			
Mailing Address 1912 IRVING AVE S	01-1-	7. 0.4	08		31		ү ү 2017	
City MINNEAPOLIS	State MN	Zip Code 55403-2823			-		9714703 s Period	9
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO		lemo	ltem			
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PAGE 82 OF

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$\overline{)}$	NAME OF COMMITTEE (In Full)				<u> </u>								
$\Big/$	UnitedHealth Group Incorporated				(C)								
Α.	Full Name of Individual (Last, First, Middle Initial) SWANSON, STEPHEN E, , ,	or Full C)rgar	nization Name		Date of	Re	cei	ipt	-	-	-	_
	Mailing Address 3001 HUNTINGTON COURT		_			м м 08	/	Γ	D D 31]	/ Y	y y 2017	Y
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	Full Name of Individual (Last, First, Middle Initial) DAMATO, ELLEN L, , ,	or Full C)rgar	nization Name		Date of	Ree	cei	ipt				
	Mailing Address 1300 DALHART DRIVE					м м 08	/	Γ	31]	/	2017	Y
	City	State		Zip Code				-				02247039)
	ALLEN	TX		75013-5339	A	\mount	of	Ea	tch R€	€C€	eipt this	s Period	
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		Aggregate	Yea	r-to-Date ▼									
	Primary General Other (specify) ▼		,	238.00	P/	R Dedu	uctio	on ((\$14.(00	Bi-Wee	ekly)	
	Full Name of Individual (Last, First, Middle Initial) WILLSON, JOSH A, , ,	or Full O)rgar	nization Name	+)oto - (P -		int				
C.	Mailing Address 201 ADAMS CT					Date of	пе /		ipt D D D 31	1	/ Y	2017	Y
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	COLLEYVILLE	ТΧ		76034-6811	A	\mount	of	Ea	ch Re	эсе	eipt this	s Period	
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PAGE 83 OF

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<u> </u>	NAME OF COMMITTEE (In Full)		uure	ss of any pointer committee	10 501	ICIL COI	un	ull			SUCI	commit	сс .
\rangle	UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial CARLSON, CHRISTOPHER CHARLES, ,)rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 10618 WEST RIVER ROAD					м м 08	/		D D 31	1	Y	ү ү 2017	Y
	City	State		Zip Code		Trans	acti	ion	ID : F	PR2	25648	0264703	9
	BROOKLYN PARK	MN		55443-1233	A	mount	of	Ea	ich Re	ece	ipt thi	s Period	
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B.	Full Name of Individual (Last, First, Middle Initial HANSEN, PAUL DANIEL, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 18430 62ND PLACE NORTH					м м 08	1	Ľ	D D D	1	Y	y y 2017	Y
	City	State		Zip Code		Trans	acti	on	ID : F	PR2	25648	0274703	9
	MAPLE GROVE	MN		55311-4585	A	mount	of	Ea	ich Re	ece	ipt thi	s Period	
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1649.00	P/	R Dedu	uctic	on ((\$97.0	00 E	Bi-Wee	ekly)	
C.	Full Name of Individual (Last, First, Middle Initial GOODWIN, MARYELLEN, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 1678 BRIDGEWATER DRIVE	1				м м 08	1	Ľ	D D D 31	/	Y	ү ү 2017	Y
	City	State		Zip Code		Trans	acti	ion	n ID : F	PR	25648	0294703	9
	LAKE MARY	FL		32746-4103	A	mount	of	Ea	ich Re	ece	ipt thi	s Period	
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PAGE 84 OF

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or	for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)								
۹.	Full Name of Individual (Last, First, Middle Initi KENNY, KATHERINE L, , ,	al) or Full C	rganization Name		Date of	Re	eceip	t				
	Mailing Address 22408 FITZGERALD DRIVE				м м 08	1		^р 31	/ Y		17	Y
	City LAYTONSVILLE	State MD	Zip Code 20882-2301		Trans: Amount		-		R2564)
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	Mailing Address 718 HICKORY HILL RD				м м 08	/	D	а 31	/ Y	201	17 17	Y
	City FRANKLIN LAKES	State NJ	Zip Code 07417-1707		Transa Amount				R25648 ceipt th)
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	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO		Me	emo) Iter	n				
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С.	Full Name of Individual (Last, First, Middle Initi MOQUIST, DARREN C, , ,	al) or Full C	rganization Name		Date of	Re	eceip	t				
	Mailing Address 5004 ARDEN AVE				08 ^M	/	D	31 D	/ Y	20 ⁻	17 [°]	Y
	City EDINA	State MN	Zip Code 55424-1314		Trans Amount				R2564)
	FEC ID number of contributing federal political committee.	С					y				430.4	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO		Me	emc) Itei	m				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3063.20]	/R Ded	ucti	on (\$	\$215.	20 Bi-V	Veekl	ly)	
s	JBTOTAL of Receipts This Page (optional)			•			y				772.1	4

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 85 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 17 erson for the purpose of soliciting contributions a to solicit contributions								
NAME OF COMMITTEE (In Full)	y the name and a	udiess of any political committe	e to solicit contributions from such committee.								
UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle BELLMAN, MARK, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BELLMAN, MARK, , ,										
Mailing Address 5601 VAN WINKLE LN			M = M / D = D / Y = Y = Y Y 08 31 2017								
City AUSTIN	State TX	Zip Code 78739-1694	Transaction ID : PR2564803547039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. WRIGHT, LISA R, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6 VOLERRAN PATH LAN	IE		08 / D D / Y Y Y Y 2017								
City MISSOURI CITY	State TX	Zip Code 77459-1167	Transaction ID : PR2564803747039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		238.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle O'HARE, TAMMY A, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2420 SAINT GEORGE W	/AY State	Zip Code	08 31 2017								
BROOKEVILLE	MD	20833-3265	Transaction ID : PR2564803947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		78.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		134.00								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) -

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 86 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a 11b 11c 12							
			13 14 15 16 17 berson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	<u> </u>									
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Midd A. BERNS, DEBRA J, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3209 GALLERIA UNIT 1705			08 31 2017							
City	State	Zip Code	Transaction ID : PR2564804047039							
EDINA	MN	55435-2556	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) of CompInc/Ethics Off	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General	1.53 3		P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify) v		3269.10								
Full Name of Individual (Last, First, Midd B. WICKS, TIMOTHY A, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2600 WEST LAFAYETTE PO BOX 454	E ROAD		08 31 2017							
City	State	Zip Code	Transaction ID : PR2565448647039							
EXCELSIOR	MN	55331-9417	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group CFO	P/R Deduction (\$38.46 Bi-Weekly)							
Receipt For:		Year-to-Date ▼								
Primary General	1.53. 53									
Other (specify) v		, 653.82								
Full Name of Individual (Last, First, Midd C. CRAIG, DONNA M, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 10761 INDEPENDENCE	WAY		08 31 2017							
City	State	Zip Code	Transaction ID : PR2565448847039							
CARMEL	IN	46032-9333	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Dir (Gen Mgmt								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		238.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	al)		489.52							
TOTAL This Period (last page this line nur	nber only)									

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

FOR LINE NUMBER:

PAGE 87 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and 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 (l	JnitedHealth Group P/	4C)							
Full Name of Individual (Last, First, Middle In A. KUNST, THOMAS C, , ,	itial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4872 103RD STREET			08 31 2017							
City	State	Zip Code	Transaction ID : PR2566302147039							
PLEASANT PRAIRIE	WI	53158-6516	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) C SIs RVP KA	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	-							
Primary General		238.68	P/R Deduction (\$14.04 Bi-Weekly)							
Other (specify)		230.00	1							
Full Name of Individual (Last, First, Middle In B. MANSUKHANI, NEIL A, , ,	itial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4215 LAUREL RIDGE CIRCL	E		08 31 2017							
City	State	Zip Code	Transaction ID : PR2567129447039							
WESTON	FL	33331-4012	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PEO SIs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		238.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In C. ARNONE, WENDY D, , ,	itial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5243 E DESERT PARK LAN	E		08 31 2017							
City	State	Zip Code	Transaction ID : PR2568900547039							
PARADISE VALLEY	AZ	85253-3015	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For:		n CEO	_							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			440.68							
TOTAL This Period (last page this line number	only)	······								

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FOR LINE NUMBER:

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PAGE 88 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and State for commercial purposes, other than using the na				for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Grou	p PAC)										
Α.	Full Name of Individual (Last, First, Middle Initial) PARRILLO, CHRISTOPHER A, , ,	or Full O	rganization Name		Date of Receipt									
	Mailing Address 9501 WEXCROFT DRIVE				08 31 2017									
	City	State TN	Zip Code		Transaction ID : PR2571778247039									
	BRENTWOOD		37027-3824		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			76.92									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Memo Item									
	Dessint Fari		Year-to-Date V											
	Primary General Other (specify) ▼	-yyi eyale	653.8	2	P/R Deduction (\$38.46 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) MOYER, BRUCE E, , ,	or Full O	rganization Name		Date of Receipt									
	Mailing Address 4242 BROADWAY STREET #802				08 31 2017									
	City	State	Zip Code		Transaction ID : PR2571778347039									
	SAN ANTONIO	ТХ	78209-6463		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			78.00 Memo Item									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt											
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 663.0		P/R Deduction (\$39.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) HINTON, DUSTIN, , ,	or Full O	rganization Name		Date of Receipt									
	Mailing Address W132N6475 MARACH RD				M M / D D / Y Y Y Y 08 31 2017									
	City	State	Zip Code		Transaction ID : PR2571978747039									
	MENOMONEE FALLS	WI	53051-6085		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			593.32									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		P/R Deduction (\$296.66 Bi-Weekly)									
	Receipt For:	Aggregate	Year-to-Date ▼ 2329.9											
s	UBTOTAL of Receipts This Page (optional)			····· ►	748.24									
Т	OTAL This Period (last page this line number only	y)		····· >	<u> </u>									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 89 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	ŀ	_	11b	11c	12	<u> </u>		
Any information copied from such Reports and or for commercial purposes, other than using t			erson for		ourp						
NAME OF COMMITTEE (In Full)							0001				
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)				_				
Full Name of Individual (Last, First, Middle ROBINSON, MARCUS A, , ,	Initial) or Full C	rganization Name	Da	ite of	Rec	ceipt					
Mailing Address 590 SPENDER TRACE				08	/	D D D 31	/ Y	ү ү 2017	Y		
City DUNWOODY	State GA	Zip Code 30350-5018						58894703 is Period	9		
FEC ID number of contributing federal political committee.	С			_		y		28.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs		Me	mo	Item					
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 238.00	P/R	Dedu	ictio	ın (\$14.	00 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle B. JACQUET, SHAUN R, , ,	Initial) or Full C	rganization Name	Da	ite of	Rec	ceipt					
Mailing Address 4332 FOREST RIDGE DRIV			08 / D D / Y Y Y Y 2017								
City SUAMICO	State WI	Zip Code 54313-8557	Transaction ID : PR2572589347039								
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) Dir Gen Mgmt				Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R	Dedu	ctio	n (\$14.0	00 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle C. SMITH, THOMAS E, , ,	Initial) or Full C	rganization Name	Da	ite of	Rec	ceipt					
Mailing Address 1502 EAST AVENUE NOR				08 [™]	/	D D D 31	JЦ	2017			
City ONALASKA	State WI	Zip Code 54650-7003				-		5 8954703 is Period	9		
FEC ID number of contributing federal political committee.	С			_		y	y	28.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	ltem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).						,	,	84.0	00		
TOTAL This Period (last page this line number	er only)										

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

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PAGE 90 OF

	EWIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12							
۸	u information conied from such Denote and Ot	atomonto	by not be cold or used by arm	13 14 15 16 17							
or	for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initi CARLSON, KEVIN JAMES, , ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 4511 BROWNDALE AVENUE			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							
	City	State MN	Zip Code	Transaction ID : PR2572590047039							
		1011 1	55424-1142	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		192.30							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		1634.55	P/R Deduction (\$96.15 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initi WACKER, CHARLES, , ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 2747 WEST VIEW DRIVE			M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M M							
	City NEW PRAGUE	State MN	Zip Code 56071-8989								
	FEC ID number of contributing federal political committee.	С		28.00							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Solution Sales Executive	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initi BECK, JOANNE M, , ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 3200 N LAKE SHORE DR UNIT 2306			08 / D D / Y Y Y Y 2017							
	City CHICAGO	State IL	Zip Code	Transaction ID : PR2572590347039							
			60657-3929	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.08							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)							
S	UBTOTAL of Receipts This Page (optional)		b	248.38							
т	OTAL This Period (last page this line number of	only)	······								

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 91 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a □ 11b □ 11c □ 12								
Any information copied from such Reports and Sta or for commercial purposes, other than using the r											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated											
Full Name of Individual (Last, First, Middle Initia A. OBRIEN, CHRISTINE, , ,	al) or Full C	rganization Name	Date of Receipt								
Mailing Address 764 TOPAZ STREET			08 / D D / Y Y Y Y 2017								
	State	Zip Code	Transaction ID : PR2572590647039								
NEW ORLEANS	LA	70124-3624	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
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) ▼		238.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initia B. HARGIS, JAMES R, , ,	al) or Full C	rganization Name	Date of Receipt								
Mailing Address 1820 ROSEDALE											
City EDMOND	State OK	Zip Code 73013-6638	Transaction ID : PR2572590747039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) · Pharm Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initia C. MILLER, KIMBERLEY S, , ,	al) or Full C	rganization Name	Date of Receipt								
Mailing Address 16 CELONOVA PLACE			08 / D D / Y Y Y Y 2017								
	State CA	Zip Code 92610-1942	Transaction ID : PR2572591247039								
FOOTHILL RANCH	CA	92610-1942	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			86.00								
TOTAL This Period (last page this line number or											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 92 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 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 A. WIFFLER, THOMAS P, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1421 SOMERFIELD DR	IVE		08 31 Y Y Y Y Y 2017							
City BOLINGBROOK	State IL	Zip Code 60490-3207	Transaction ID : PR2572992747039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D Spclty Ben Visn	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mido B. GOETZ, MERRITT D, David, ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 901 CLEARVIEW DR			08 / D D / Y Y Y Y 2017							
City NASHVILLE	State TN	Zip Code 37205-1915	Transaction ID : PR2573477347039 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		upation (for Individual) CInt Svc Acct Mgt	Memo Item							
Receipt For:	Aggregate	Year-to-Date V	7							
Other (specify) ▼		2750.00	P/R Deduction (\$250.00 Bi-Weekly)							
Full Name of Individual (Last, First, Midc C. QUINN, PATRICK G, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 15972 WETHERBURN	1		08 / D D / Y Y Y Y Y 08 31 2017							
City CHESTERFIELD	State MO	Zip Code 63017-7341	Transaction ID : PR2573518747039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		48.64							
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 ▼ 281.14	P/R Deduction (\$24.32 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		933.24							
TOTAL This Period (last page this line nu	mber only)	······								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 93 OF

		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 GROZDANICH, PATTI E, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 12540 ROBINSON ST APT 6201			08 / D D / Y Y Y Y 2017								
City OVERLAND PARK	State KS	Zip Code 66213-1418	Transaction ID : PR2573518847039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. BENSON, MICHAEL L, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2206 EAGLE VALLEY LN			08 / D D / Y Y Y Y Y 08 31 2017								
City WAUSAU	State WI	Zip Code 54403-8154	Transaction ID : PR2573518947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		35.70								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir SIs Ops	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		214.20	P/R Deduction (\$17.85 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. SHAW, AMY LYNN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 11844 DUNHILL ROAD			08 / D D / Y Y Y Y Y 2017								
City EDEN PRAIRIE	State MN	Zip Code 55344-3238	Transaction ID : PR2574971347039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) troller Mkt Grp	P/R Deduction (\$14.04 Bi-Weekly)								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68									
SUBTOTAL of Receipts This Page (optional).			91.86								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 94 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 usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (Ur	nitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Mide BUCCHIANERI, STEVEN, , ,	dle Initial) or Full Org	anization Name	Date of Receipt								
Mailing Address 118 GOVERNORS		1	08 / D D / Y Y Y Y 2017								
City	State MA	Zip Code	Transaction ID : PR2574977147039								
MEDFORD	IVIA	02155-3018	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		38.46								
Name of Employer (for Individual) United HealthCare Services Inc		ation (for Individual) d Clin Ops	Memo Item								
Receipt For:	Aggregate Ye	ar-to-Date ▼									
Other (specify) ▼		326.91	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Mide B. RICHARD, DARYL P, , ,	dle Initial) or Full Org	anization Name	Date of Receipt								
Mailing Address 24 WEST RIDGE DRIVE	1		08 31 2017								
City	State	Zip Code	Transaction ID : PR2574979047039								
WEST HARTFORD	СТ	06117-2065	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		91.56 Memo Item								
Name of Employer (for Individual) United HealthCare Services Inc	Occup VP Co	ation (for Individual) omm									
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 587.82	P/R Deduction (\$45.78 Bi-Weekly)								
Full Name of Individual (Last, First, Mide C. HARE, LESLIE C, , ,	dle Initial) or Full Org	anization Name	Date of Receipt								
Mailing Address 9029 SHEEP RANCH C	Т		08 / D D / Y Y Y Y 08 31 2017								
City	State	Zip Code	Transaction ID : PR2574979447039								
LAS VEGAS	NV	89143-5432	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) Health Plan of Nevada	Occup Dir Cln	ation (for Individual) ns	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		158.02								
TOTAL This Period (last page this line nu	mber only)	••••••									

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PAGE 95 OF

111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12								
	y information copied from such Reports and Stater for commercial purposes, other than using the nar											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F											
A.	Full Name of Individual (Last, First, Middle Initial) IERVOLINO, TINA M, , ,	or Full Or	rganization Name	Date of Receipt								
	Mailing Address 38 DARTMOOR ROAD			08 31 2017								
		State NJ	Zip Code	Transaction ID : PR2574984447039								
	EAST HANOVER	INJ	07936-3912	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		28.08								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Dir Clin Med Mgmt	Memo Item								
	Receipt For: Ad		Year-to-Date ▼									
	Primary General Other (specify) ▼		238.68	P/R Deduction (\$14.04 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial) SIMPSON, TRENT L, , ,	or Full Or	rganization Name	Date of Receipt								
	Mailing Address 3111 NORCREST AVE N	08 / D D / Y Y Y Y 08 31 2017										
		State	Zip Code	Transaction ID : PR2574985047039								
	STILLWATER	MN	55082-1779	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		Memo Item								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt									
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	Date of Receipt								
	Mailing Address 2799 WEST BARDONNER ROAD)		08 31 2017								
	5	State	Zip Code	Transaction ID : PR2574986247039								
	GIBSONIA	PA	15044-8462	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	0		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Clin Ops	Memo Item								
	Receipt For: Age Primary General Other (specify)	ggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)								
S	UBTOTAL of Receipts This Page (optional)			489.60								
т	OTAL This Period (last page this line number only))										

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

FOR LINE NUMBER:

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PAGE 96 OF

	EMIZED RECEIPTS			Detailed Summary Page	×			111	b 🗌	11c	12					
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	y information copied from such Reports and State for commercial purposes, other than using the na															
$\overline{\ }$	NAME OF COMMITTEE (In Full)															
$\Big\rangle$	UnitedHealth Group Incorporated	.C)														
Α.	Full Name of Individual (Last, First, Middle Initial BURNETT, JAMIE, , ,) or Full O	Organ	nization Name	[Date of	Re	eceip	pt							
	Mailing Address 4625 EWING AVENUE SOUTH					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										
		State MN		Zip Code												
	MINNEAPOLIS			55410-1745	_ /	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			78.00											
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I		ion (for Individual)		Me	emo) Ite	em							
	Receipt For:	Aggregate	Yea	r-to-Date ▼												
	Primary General Other (specify) ▼		-	663.00	P/	/R Dedu	uctio	on (\$39.0	0 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Initial LANG JACOBSEN, HEATHER A, , ,) or Full O	Organ	nization Name		Date of	Re	eceip	pt							
	Mailing Address 11382 MOUNT CURVE RD					08 31 2017										
	City	State		Zip Code	_	Transaction ID : PR2574991447039										
	EDEN PRAIRIE	MN		55347-2918	/	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				Memo Item										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Gen Counsel Mgr												
		Aggregate	Yea	r-to-Date ▼												
Primary General Other (specify) ▼				, 653.82	P/	P/R Deduction (\$38.46 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial, ALLAZETTA, DAVID W, , ,) or Full O	Organ	nization Name	Date of Receipt											
	Mailing Address 339 DARTMOUTH HILLS STRE	ET				M M 08	/	D	31	/ Y	ү ү 2017	Y				
	City	State NV		Zip Code							9954470					
	LAS VEGAS			89138-1544		Amount	of	Ead	ch Re	eceipt th	nis Perioo	1				
	FEC ID number of contributing federal political committee.	С						y			192	.30				
	Name of Employer (for Individual)	Occi	upati	ion (for Individual)		Me	emo	b Ite	em							
	United HealthCare Services Inc	Hlth	Plar	n CEO												
	Receipt For:	Aggregate	Yea	r-to-Date ▼				/	(* 00.4	C D' W	1 - 1 - 1					
	Other (specify)		7	1634.55	P/R Deduction (\$96.15 Bi-Weekly)						еекіу)					
s	UBTOTAL of Receipts This Page (optional)			•				,			347	.22				
Т	OTAL This Period (last page this line number onl	ly)						,								

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PAGE 97 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
	EWIZED RECEIPIS		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								
	NAME OF COMMITTEE (In Full)		,,,						
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)					
A.	Full Name of Individual (Last, First, Middle Initia WILLIAMS, JOSEPH RANDY, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 3221 FORSYTH DRIVE			08 / D D / Y Y Y Y 08 31 2017					
	City GREENSBORO	State NC	Zip Code 27407-7221	Transaction ID : PR2575008847039 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		362.64					
	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 ▼ 2368.14	P/R Deduction (\$181.32 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia KEMMER, HEIDI S, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 2211 WEST ROCKROSE PLAC	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							
	City CHANDLER	State AZ	Zip Code 85248-4208	Transaction ID : PR2575021347039 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		28.28					
	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 ▼ 240.38	P/R Deduction (\$14.14 Bi-Weekly)					
С.	Full Name of Individual (Last, First, Middle Initia FRIDELL, CATHERINE MARIE, , ,		rganization Name	Date of Receipt					
	Mailing Address 11 E STONEWALL DRIVE			08 / 0 D D / Y Y Y Y Y 2017					
	City MIDDLETOWN	State DE	Zip Code 19709-3810	Transaction ID : PR2575027547039 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		83.32					
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (upation (for Individual) Clms	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 624.90	P/R Deduction (\$41.66 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			474.24					
т	OTAL This Period (last page this line number o	nly)	· · · · · · · · · · · · · · · · · · ·						

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FOR LINE NUMBER:

PAGE 98 OF

		Use separate schedule(s)	(check only one)					
ILEIVIIZED KEGEIPIS		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)		across of any pointed committee						
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle DUNCAN, MICHELE M, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 3038 FAIRWAY CIRCLE			08 / D D / Y Y Y Y Y 2017					
City CHASKA	State MN	Zip Code 55318-3408	Transaction ID : PR2575029647039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. VAN HOLMES, LORI A, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 4117 BRYANT AVENUE S			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					
City MINNEAPOLIS	State MN	Zip Code 55409-1423	Transaction ID : PR2575030947039					
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) Human Capital Dev	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1649.00	P/R Deduction (\$97.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. O'BRIEN, JENNIFER M, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 395 WOODLAWN AVE			08 / D D / Y Y Y Y 2017					
City SAINT PAUL	State MN	Zip Code 55105-1339	Transaction ID : PR2575034547039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)		963.20					
TOTAL This Period (last page this line num	per only)							

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FOR LINE NUMBER:

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PAGE 99 OF

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 th			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	UnitedHealth Group PA	NC)			
Full Name of Individual (Last, First, Middle Ir MADDOX, JEFFREY L, , ,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 5610 PURDUE AVE			08 / D D / Y Y Y Y 2017			
City	State	Zip Code	Transaction ID : PR2575039547039			
DALLAS	ТХ	75209-4431	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.00			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item			
Receipt For:	Aggregate	Year-to-Date V				
Primary General Other (specify) ▼		238.00	P/R Deduction (\$14.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle Ir B. ALLENBURG, THOMAS J, , ,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 6224 LOCH MOOR DR	Address 6224 LOCH MOOR DR					
City EDINA	State MN	Zip Code 55439-1618	Transaction ID : PR2575039847039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		111.10			
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 ▼ 499.95	P/R Deduction (\$55.55 Bi-Weekly)			
Full Name of Individual (Last, First, Middle Ir C. DONNAY, JULENE D, , ,	hitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 17763 OAKLAND DRIVE NE	1		08 31 2017			
City	State	Zip Code	Transaction ID : PR2575046247039			
HAM LAKE	MN	55304-4527	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.08			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sourcing Prcrmt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)	<u> </u>		167.18			
TOTAL This Period (last page this line number						

SCHEDULE A (FEC Form 3X) - DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 100 OF

		Use separate schedule(s)	(ch	(check only one)						
11			for each category of the Detailed Summary Page	3	K 11a		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 (L	InitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia HEATH, SEAN W, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt			
	Mailing Address 1292 CASTLE CT				м м 08	/	D 1) / Y	ү ү 2017	Y
	City GOLDEN VALLEY	State MN	Zip Code 55427-4453					PR25750 Receipt th		
	FEC ID number of contributing federal political committee.	С							28	.08
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Compli		Me	emc	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	F	P/R Dedu	uctio	on (\$14.	.04 Bi-We	eekly)	
B.	Full Name of Individual (Last, First, Middle Initia LINDSAY, VIVIAN M, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt			
	Mailing Address 14930 SW 39 ST				08	/	31) / Y	y y 2017	Ý
	City DAVIE	State FL	Zip Code 33331-2767					PR25750		
	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) POps		Me	emc	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1634.55	F	P/R Dedu	uctio	on (\$96.	15 Bi-We	eekly)	
C.	Full Name of Individual (Last, First, Middle Initia CLACKO, MARY ANN GAVINSKI,	l) or Full Or	ganization Name		Date of	Re	eceipt			
	Mailing Address 6358 COTEAU TRAIL	1			08	1	31) / Y	2017 [°]	Y
	City EDEN PRAIRIE	State MN	Zip Code 55344-5205					PR2575		
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	, j	76	.92
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Compli				emo	tem Item			
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 653.82		P/R Ded	ucti	on (\$38	.46 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•				, .	. ,	297	.30
т	OTAL This Period (last page this line number on	ly)	••••••	-			-			

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FOR LINE NUMBER:

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PAGE 101 OF

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			Detailed Summary Faye	13 14 15 16 17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.					
\backslash	NAME OF COMMITTEE (In Full)								
	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)					
Α.	Full Name of Individual (Last, First, Middle Initia MCCARTY, CARY J, , ,	ll) or Full O	rganization Name	Date of Receipt					
	Mailing Address 8800 RUMFIELD RD	1-		08 / D D / Y Y Y Y 2017					
		State TX	Zip Code	Transaction ID : PR2575059447039					
	NORTH RICHLAND HILLS		76182-6131	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		78.00					
	Name of Employer (for Individual)		upation (for Individual)	Memo Item					
	United HealthCare Services Inc Receipt For:		Gen Mgmt	_					
	Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)					
	Other (specify)		663.00	T / Deduction (\$59.00 Driveekiy)					
в.	Full Name of Individual (Last, First, Middle Initia	ll) or Full O	rganization Name	Date of Receipt					
	Mailing Address 11359 ENTREVAUX DRIVE	08 31 2017							
	City	State	Zip Code	Transaction ID : PR2575060247039					
	EDEN PRAIRIE	MN	55347-2862	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		76.92					
	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 ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)					
<u> </u>	Full Name of Individual (Last, First, Middle Initia MCEVOY, AMY J, , ,	l) or Full O	rganization Name	Date of Receipt					
	Mailing Address 10551 GREENBRIER RD APT	132		08 31 2017					
	City	State	Zip Code	Transaction ID : PR2575062247039					
	MINNETONKA	MN	55305-3460	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		40.00					
	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 ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)					
⊢	UBTOTAL of Receipts This Page (optional)		r	194.92					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 102 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			person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
> UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)					
Full Name of Individual (Last, First, Middle SWAN, RICK L, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 2554 CHRISTIAN PKWAY			08 31 2017					
City CHASKA	State MN	Zip Code 55318-1986	Transaction ID : PR2575062647039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. CURRIE, ULYSSES MICHAEL, ,		organization Name	Date of Receipt					
Mailing Address 3111 STILES WAY	,		08 31 2017					
City WEST FRIENDSHIP	State MD	Zip Code 21794-9218	Transaction ID : PR2575064147039 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 ▼ 350.00	P/R Deduction (\$50.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. ZAETTA, CHRISTOPHER ROB		organization Name	Date of Receipt					
Mailing Address 5840 RIDGE ROAD			08 31 2017					
City EXCELSIOR	State MN	Zip Code 55331-8153	Transaction ID : PR2575068347039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		454.54					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2954.51	P/R Deduction (\$227.27 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			582.62					
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 103 OF

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Any information copied from such Reports and or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)		adress of any pointed contribute	5 10 5010		UID		Such		
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. ENLOW, MARGARET, , ,	Initial) or Full C	organization Name	D	ate of	Re	ceipt			
Mailing Address 103 LOCUST GROVE LAN	1E			^M 08	/	31) / Y	2017	Y
City VERSAILLES	State KY	Zip Code 40383-8807						07104703 iis Period	9
FEC ID number of contributing federal political committee.	С					,		28.	08
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 ▼ 238.68	P/F	R Dedu	uctio	on (\$14.	.04 Bi-We	eekly)	
Full Name of Individual (Last, First, Middle NICHOLS, SANDRA B, , ,	Initial) or Full C	organization Name	D	ate of	Re	ceipt			
Mailing Address 12706 YOUNG LANE				м м 08	/	D D D D 31) / Y	2017	Y
City NORTH POTOMAC	State MD	Zip Code 20878-6112				-		07454703	9
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc	Occ		Me	emo	Item				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1634.55	P/F	R Dedu	uctic	on (\$96.	15 Bi-We	eekly)	
Full Name of Individual (Last, First, Middle C. BECK, RALPH B, , ,	Initial) or Full C	organization Name	D	ate of	Re	ceipt			
Mailing Address W155 N5314 SHARPTAIL				08 ^M	/	31) / Y	ү ү 2017	Y
City MENOMONEE FALLS	State WI	Zip Code 53051-6771						07494703 iis Period	9
FEC ID number of contributing federal political committee.	С		ļ			y .	. ,	28.	08
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/f	R Dedi	uctio	on (\$14	.04 Bi-We	eekly)	
SUBTOTAL of Receipts This Page (optional)						,	. ,	248.4	46
TOTAL This Period (last page this line numb	er only)						-		

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 104 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 to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle A. SHELLEY, MATTHEW M, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 13197 NW HELEN LANE			08 / D D / Y Y Y Y 2017
City PORTLAND	State OR	Zip Code 97229-7045	Transaction ID : PR2575075247039
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 Natl Clin Cvrge Review	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 326.91	P/R Deduction (\$19.23 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. BURNAM, DEBRA K, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 377 CALABRIA BEACH ST	08 31 2017		
City HENDERSON	State NV	Zip Code 89015-2430	Transaction ID : PR2575076247039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) Clin Ops	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. CALAMIA, EDITH A, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 22 ROYAL OAK DRIVE			08 / D D / Y Y Y Y 2017
City FAR HILLS	State NJ	Zip Code 07931-2569	Transaction ID : PR2575076647039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			94.62
TOTAL This Period (last page this line numb			

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 105 OF

	3	for each category of the Detailed Summary Page		11a		11b	11c	12	<u> </u>
		A not be sold or used by any pead any pead by any pead by any pead by any political committee	erson for						
NAME OF COMMITTEE (In UnitedHealth Grou		UnitedHealth Group PA	AC)						
Full Name of Individual (La. A. UPCHURCH, KAREN A	st, First, Middle Initial) or Full C A_i , ,	Organization Name	Da	te of	Red	ceipt			
Mailing Address 5023 OAK	Iailing Address 5023 OAKMONT PLACE							y y 2017	Y
City	State	Zip Code	Т	ransa	cti	on ID : P	R25750	08444703	9
WESTERVILLE	OH	43082-8781	Am	nount	of I	Each Re	ceipt th	is Period	
FEC ID number of contribut federal political committee.	ting					y		76.	92
Name of Employer (for Indi United HealthCare Services	,	upation (for Individual) Comm		Mer	mo	Item			
Receipt For:	Aggregate								
Primary Ger Other (specify) ▼	heral	653.82	P/R	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Las B. O'NEILL, AUDREY L	st, First, Middle Initial) or Full C	Organization Name	Da	Date of Receipt					
Mailing Address 71 CHEST	Mailing Address 71 CHESTNUT RIDGE RD						/ Y	y y 2017	Y
City	State	Zip Code	Т	ransa	ctio	on ID : P	R25750	08944703	9
QUEENSBURY	NY	12804-7317	Am	Amount of Each Receipt this Period					
FEC ID number of contribut federal political committee.	ting						-	41.	66
Name of Employer (for Indi Optum Services, Inc	,	upation (for Individual) Bus Process		Mer	mo	Item			
Receipt For: Primary Gen Other (specify) ▼	Aggregate	Year-to-Date ▼ 312:45	P/R	Deduo	ctio	n (\$20.8	3 Bi-We	ekly)	
Full Name of Individual (Lat C. HEROLD, STACI L,	st, First, Middle Initial) or Full C	Organization Name	Da	te of	Red	ceipt			
Mailing Address 15008 GR	EEN OAKS TR SE		M	08 ^M	1	D D D 31	/ Y	y y 2017	Y
City	State	Zip Code	Т	ransa	cti	on ID : P	R2575	09304703	39
PRIOR LAKE	MN	55372-2159	Arr	nount	of I	Each Re	ceipt th	is Period	
FEC ID number of contribution federal political committee.	ting			_		,	y	95.	22
Name of Employer (for Indi Optum Services, Inc	vidual) Occ VP	upation (for Individual) T		Me	mo	Item			
Receipt For: Primary Ger Other (specify)	Aggregate	Year-to-Date ▼ 571.32	P/R	Dedu	ctic	on (\$47.6	1 Bi-We	ekly)	
SUBTOTAL of Receipts This	Page (optional)					, , ,	9	213.	80
TOTAL This Period (last page	e this line number only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 106 OF

	Use separate schedule(s)						
I LIVILLED REVEILIS		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)							
VinitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Middle I PERRY, BEVERLY-JANE, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 24 LORUSSO DRIVE			08 31 / Y Y Y Y Y				
City ATTLEBORO	State MA	Zip Code 02703-5212	Transaction ID : PR2575096047039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		28.08				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I JACOBY, CHARLES, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 3315 IRVING AVE			08 / D D / Y Y Y Y Y 2017				
City MINNEAPOLIS	State MN	Zip Code 55408-3321	Transaction ID : PR2575099247039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		32.00				
Name of Employer (for Individual) Optum Services, Inc	Occ	upation (for Individual) IT	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 272.00	P/R Deduction (\$16.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I C. CHAMPION, PHEBE M, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 34 REYBURN DRIVE			08 / D D / Y Y Y Y 08 31 2017				
City HENDERSON	State NV	Zip Code 89074-2760	Transaction ID : PR2575108347039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
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 ▼ 425.00	P/R Deduction (\$25.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			110.08				
TOTAL This Period (last page this line numbe	er only)						

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 107 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)
A.	Full Name of Individual (Last, First, Middle Initial) MORSCH, MARK, , ,	or Full C	Organization Name	Date of Receipt
	Mailing Address 6344 GOLDEN LILY WAY	1		08 / D D / Y Y Y Y 2017
	City SAN DIEGO	State CA	Zip Code 92130-6836	Transaction ID : PR2575115147039 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.76
	Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 261.46	P/R Deduction (\$15.38 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initial) LYDON, SCOTT THOMAS, , ,	or Full C	Organization Name	Date of Receipt
	Mailing Address 2 PLOWBOY PATH	08 31 2017		
	City COMMACK	State NY	Zip Code 11725-1410	Transaction ID : PR2575122247039 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) VP Acct Mgmt	Memo Item
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initial) HUNT, ZOE C, , ,	or Full C	Organization Name	Date of Receipt
	Mailing Address 4030 SERANGO COURT	1		08 / D D / Y Y Y Y 2017
	City WEST LINN	State OR	Zip Code 97068-2840	Transaction ID : PR2575136247039 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			86.76
Т	OTAL This Period (last page this line number only	y)	••••••	

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 108 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12			
An	y information copied from such Reports and Staten	nente mo	y not be sold or used by any pa	13 14 15 16 17			
	for commercial purposes, other than using the nam						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (L	InitedHealth Group PA	C)			
A.	Full Name of Individual (Last, First, Middle Initial) of MCDONNEL, LISA M, , ,	or Full Or	ganization Name	Date of Receipt			
	Mailing Address 9664 LAFORET DRIVE			08 31 / Y Y Y Y 08 2017			
		State	Zip Code	Transaction ID : PR2575136347039			
	EDEN PRAIRIE	MN	55347-3538	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			30.40			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Ntwk	Memo Item			
	Pagaint For:	areaate `	Year-to-Date 🔻	-			
	Primary General Other (specify) ▼		228.00	P/R Deduction (\$15.20 Bi-Weekly)			
	Full Name of Individual (Last, First, Middle Initial) o WHEELER, TISA, , ,	or Full Or	ganization Name	Date of Receipt			
	Mailing Address 6085 WATER ST APT 2453			08 31 2017			
			Zip Code	Transaction ID : PR2575138547039			
		ТХ	75024-0084	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			95.70			
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) ⁄Ied Clin Ops	Memo Item			
	Receipt For: Ag Primary General Other (specify) ▼	gregate `	Year-to-Date ▼ 769.45	P/R Deduction (\$47.85 Bi-Weekly)			
с.	Full Name of Individual (Last, First, Middle Initial) of CARTER, JOCELYN CHISHOLM, , ,	or Full Or	rganization Name	Date of Receipt			
	Mailing Address 601 SILVERSTONE DRIVE			08 31 2017			
	5	State	Zip Code	Transaction ID : PR2575141947039			
		MS	39110-7581	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			250.00			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO	Memo Item			
	Receipt For: Ag Primary General Other (specify)	gregate `	Year-to-Date ▼ 1500.00	P/R Deduction (\$125.00 Bi-Weekly)			
s	UBTOTAL of Receipts This Page (optional)			376.10			
	OTAL This Period (last page this line number only)		r				

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 109 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (UnitedHealth Group PA	NC)					
Α.	Full Name of Individual (Last, First, Middle Initia DEWALL, PATRICK J, , ,	ll) or Full C	Organization Name	Date of Receipt					
	Mailing Address 7662 RIDGEVIEW WAY			08 / D D / Y Y Y Y 2017					
	City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575145347039					
			55517-4507	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		192.30					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Optum Services, Inc	Dep	outy Gen Counsel Mgr						
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼		1634.55	P/R Deduction (\$96.15 Bi-Weekly)					
В.	Full Name of Individual (Last, First, Middle Initia MCGANN, JEAN, , ,	ll) or Full C	Organization Name	Date of Receipt					
	Mailing Address 4 VILLAGE ROAD			08 31 2017					
	City	State	Zip Code	Transaction ID : PR2575146947039					
	FLORHAM PARK	NJ	07932-2415	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		28.08					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA Dir Acct Mgmt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initia BEECHER, KELLY L, , ,	l) or Full C	Organization Name	Date of Receipt					
	Mailing Address 7640 CURIOSITY AVE			08 / D D / Y Y Y Y 08 31 2017					
	City	State	Zip Code	Transaction ID : PR2575161147039					
	LAS VEGAS	NV	89131-4792	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		28.08					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	United HealthCare Services Inc		Acctng						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			248.46					
Т	OTAL This Period (last page this line number or	וy)	·····						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 110 OF

			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 Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions							
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group PA	.C)							
Α.	Full Name of Individual (Last, First, Middle Initial JONES, RON, , ,) or Full C	rganization Name	Date of Receipt							
	Mailing Address 10066 ESCAMBIA BAY CT			08 / D D / Y Y Y Y 2017							
	City NAPLES	State FL	Zip Code 34120-4621	Transaction ID : PR2575163547039							
		1.2	34120-4021	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		250.00							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		2125.00	P/R Deduction (\$125.00 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial HAMANN, CHAD A, , ,	Date of Receipt									
	Mailing Address 7638 RIDGEVIEW WAY			08 31 2017							
	City	State	Zip Code	Transaction ID : PR2575170147039							
	CHANHASSEN	MN	55317-4507	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		457.86							
	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 ▼ 2939.46	P/R Deduction (\$228.93 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial COSTIN, ROBERT C, , ,) or Full C	rganization Name	Date of Receipt							
	Mailing Address 580 MEADOW SWEET CIRCLE			08 31 2017							
	City	State	Zip Code	Transaction ID : PR2575180747039							
	OSPREY	FL	34229-8976	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		38.46							
	Name of Employer (for Individual)		upation (for Individual)	Memo Item							
	United HealthCare Services Inc Receipt For:		Sr Sls Exe	_							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 326.91	P/R Deduction (\$19.23 Bi-Weekly)							
S	JBTOTAL of Receipts This Page (optional)		, ,	746.32							
т	OTAL This Period (last page this line number on	ly)	••••••								

Use separate schedule(s)

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PAGE 111 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	४ 11a ☐ 11b ☐ 11c ☐ 12							
Any information conied from such Ponette a	and Statements m		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	.C)							
Full Name of Individual (Last, First, Midd WIELAND, MICHAEL W, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 6741 EAST SHADOW L	AKE DRIVE		08 31 2017							
	State	Zip Code	Transaction ID : PR2575181647039							
	MN	55014-1348	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.08							
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) IT	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		238.68	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. MCGUIRE, THOMAS J, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 41 CUMBERLAND ROA	D		Model Model <td< td=""></td<>							
City WEST HARTFORD	State CT	Zip Code 06119-1121								
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	I	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. MELLO, STEPHANIE A, , ,	lle Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 65 CLARK LANE			08 / D D / Y Y Y Y 08 31 2017							
City	State	Zip Code	Transaction ID : PR2575191347039							
SWANSEA	MA	02777-4550	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	al)		440.76							
TOTAL This Period (last page this line nur	,	· ·								

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 112 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a □ 11b □ 11c □ 12						
Any information copied from such Reports and St or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate									
Full Name of Individual (Last, First, Middle Initi A. DEMARIS, PETER JOHN, , ,	ial) or Full C	organization Name	Date of Receipt						
Mailing Address 2301 OLIVER AVE S			08 / D D / Y Y Y Y 2017						
City	State	Zip Code	Transaction ID : PR2575191847039						
MINNEAPOLIS	MN	55405-2448	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg eComm	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		653.82	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initi B. MOORE, KRISTIN, , ,	ial) or Full C	organization Name	Date of Receipt						
Mailing Address 3021 ROSEDALE AVENUE	08 31 2017								
City	State	Zip Code	Transaction ID : PR2575194447039						
DALLAS	TX	75205-1451	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initi C. GRANBERG, MITCHELL W, , ,	ial) or Full C	organization Name	Date of Receipt						
Mailing Address 6721 GALWAY DRIVE			08 / D D / Y Y Y Y 08 31 2017						
City	State	Zip Code	Transaction ID : PR2575196147039						
EDINA	MN	55439-1313	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			297.22						
TOTAL This Period (last page this line number of		F							

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 113 OF

15 16 17							
soliciting contributions from such committee.							
2017							
PR2575203347039							
Receipt this Period							
457.86							
228.93 Bi-Weekly)							
Date of Receipt							
08 31 2017							
PR2575212547039							
Amount of Each Receipt this Period							
142.84							
42 Bi-Weekly)							
Date of Receipt							
2017							
PR2575213047039							
Receipt this Period							
28.08							
.04 Bi-Weekly)							
1							

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 114 OF

		Detailed Summary Page	×	11a		11b		11c	12			
Any information conied from a	ich Reports and Statements n			13 or the		14	of c	15 Oliciting	16	17 tions		
		nay not be sold or used by any p address of any political committee										
NAME OF COMMITTEE (In	Full)											
/		(UnitedHealth Group PA	AC)									
Full Name of Individual (Las MARTIN, PETER J, , ,	st, First, Middle Initial) or Full	Organization Name	С	Date of	Re	eceipt						
Mailing Address 7091 HIGF	IOVER DRIVE			08 31 2017								
City	State	Zip Code		Trans	acti	ion IE) : P	R25752	21364703	9		
CHANHASSEN	MN	55317-7572	A	mount	of	Each	Re	ceipt th	is Period			
FEC ID number of contribut federal political committee.	ting					-		-	30.			
Name of Employer (for Indi Optum Services, Inc		cupation (for Individual) 9 Gen Mgmt		Me	emo	b Item	ו					
Receipt For:	Aggregate	e Year-to-Date ▼										
Primary Gen Other (specify) ▼		255.00	P/	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Las MEYERHOFER , JEF	st, First, Middle Initial) or Full FREY P, , ,	Organization Name		Date of	Re	eceipt						
Mailing Address 11842 DRI				08 31 2017								
City	State	Zip Code		Transaction ID : PR2575214647039								
EDEN PRAIRIE	MN	55344-3262	A	Amount of Each Receipt this Period								
FEC ID number of contribut federal political committee.	ting			95.22 Memo Item								
Name of Employer (for Indi United HealthCare Services	la a	cupation (for Individual) P Ntwk Contrctng										
Receipt For: Primary Gen Other (specify) ▼		e Year-to-Date ▼ 571.32	P/	P/R Deduction (\$47.61 Bi-Weekly)								
Full Name of Individual (La: C. SHORS, MATTHEV	st, First, Middle Initial) or Full	Organization Name		Date of	Re	eceipt						
Mailing Address 4649 EWIN	1			м м 08	/		31 D	/ Y	2017 [°]	Y		
City	State MN	Zip Code							22234703	9		
MINNEAPOLIS		55410-1745	A	mount	of	Each	Re	ceipt th	is Period			
FEC ID number of contribut federal political committee.	ting					y		ÿ	384.	60		
Name of Employer (for India United HealthCare Services		cupation (for Individual) Deputy Gen Counsel		Me	emo	o Item	า					
Receipt For:	I	e Year-to-Date ▼										
Primary Gen Other (specify)		3269.10	P/	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This	Page (optional)					y		9	509.8	32		
TOTAL This Period (last page	e this line number only)	•••••	. [- j -		-				

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PAGE 115 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			erson for the purpose of soliciting contributions								
or for commercial purposes, other than using			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, Middl A. KRUTA, DARLENE DAWN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9243 GREEN BRIAR RD			08 / D D / Y Y Y Y 2017								
City BLOOMINGTON	State MN	Zip Code 55437-1939	Transaction ID : PR2575232547039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		95.22								
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 ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. KIRKPATRICK, SUSAN A, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 417 STERLING STREET			08 31 2017								
City LANCASTER	State MA	Zip Code 01523-1847	Transaction ID : PR2575233647039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		91.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 587.80	P/R Deduction (\$45.80 Bi-Weekly)								
Full Name of Individual (Last, First, Middl RUSSELL, THOMAS G, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 10205 GROOMSBRIDGE			08 / D D / Y Y Y Y Y 2017								
City JOHNS CREEK	State GA	Zip Code 30022-5645	Transaction ID : PR2575238647039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Empl Rel	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		214.82								
TOTAL This Period (last page this line num	iber only)										

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PAGE 116 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page									
Any information copied from such Reports and Sta or for commercial purposes, other than using the r											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	JnitedHealth Group PA	.C)								
Full Name of Individual (Last, First, Middle Initia A. CHOATE, THOMAS C, , ,	al) or Full C	rganization Name	Date of Receipt								
Mailing Address 8222 STONE MASON CT			08 / D D / Y Y Y Y 2017								
City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247847039								
		34780-3024	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item								
Receipt For:		Year-to-Date ▼	_								
Primary General Other (specify) ▼		653.82	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initia B. DIMARTINO, TIMOTHY H, , ,	al) or Full C	rganization Name	Date of Receipt								
Mailing Address 49605 KEYCOVE ST			08 31 2017								
City	State MI	Zip Code	Transaction ID : PR2575248147039								
CHESTERFIELD		48047-2361	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		54.66								
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 ▼ 273.98	P/R Deduction (\$27.33 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initia C. DARRAH, JACQUELINE M, , ,	al) or Full C	rganization Name	Date of Receipt								
Mailing Address 16942 HUBBARD TRAIL			08 31 2017								
City LAKEVILLE	State MN	Zip Code 55044-5846	Transaction ID : PR2575248547039								
		33044-3640	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		95.22								
Name of Employer (for Individual)		upation (for Individual) ssc Gen Counsel	Memo Item								
Optum Services, Inc Receipt For:		Year-to-Date V	-								
Primary General Other (specify)	Aggregate	571.32	P/R Deduction (\$47.61 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			226.80								
TOTAL This Period (last page this line number or		F									

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FOR LINE NUMBER:

PAGE 117 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			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. BRANT, PAUL T, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 17 ROCKY BROOK ROAI)		08 31 2017							
City WILTON	State CT	Zip Code 06897-1919	Transaction ID : PR2575250247039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	P/R Deduction (\$50.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. SHETTY, PRASANNA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 41 HOYA ST			08 / D D / Y Y Y Y Y 2017							
City RANCHO MISSION VIEJO	State CA	Zip Code 92694-1283	Transaction ID : PR2575252047039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) r IT Sys Anlys	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. KORF, GRETCHEN R, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2120 WESTON LANE N	01-1-	7.0.4	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							
City PLYMOUTH	State MN	Zip Code 55447-2372	Transaction ID : PR2575252247039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.62							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2576.95	P/R Deduction (\$192.31 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional			561.54							
TOTAL This Period (last page this line numl	per only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 118 OF

			Detailed Summary Page	×	11a]11b		11c	12			
					13		14		15	16	17		
or	y information copied from such Reports and State for commercial purposes, other than using the na												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group P	PAC)									
Α.	Full Name of Individual (Last, First, Middle Initial) BROOMFIELD, ROBERT A, , ,	or Full O	organization Name		Date of	Re	eceip	ot					
	Mailing Address 12501 WEST 156TH STREET				08 31 2017								
	City OVERLAND PARK	State KS	Zip Code 66221-2662	A						26044703 nis Period	9		
	FEC ID number of contributing federal political committee.	С					-			38.	46		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO		Me	emo	b Iter	m					
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 326.91	P /	R Dedi	uctio	on (\$	\$19.2	3 Bi-We	eekly)			
B.	Full Name of Individual (Last, First, Middle Initial) ZARN, MARY H, , ,	or Full O	organization Name		Date of Receipt								
	Mailing Address 11192 BLUESTEM LANE						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						
	City EDEN PRAIRIE	State MN	Zip Code 55347-4731		Transaction ID : PR2575269147039 Amount of Each Receipt this Period 125.00 Memo Item								
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff										
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 437.50	P/	P/R Deduction (\$62.50 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initial) ZAFFIRIS, NICHOLAS J, , ,	or Full O	organization Name	C	Date of	Re	eceip	ot					
	Mailing Address 1581 ISLAND WAY	Oteta	Zin Onde		08	/		31	/ Y	2017			
	City WESTON	State FL	Zip Code 33326-3623	Δ						27064703 nis Period	9		
	FEC ID number of contributing federal political committee.	С								28.	08		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Memo Item								
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68) P/	P/R Deduction (\$14.04 Bi-Weekly)								
S	UBTOTAL of Receipts This Page (optional)			•			,		,	191.	54		
т	OTAL This Period (last page this line number only	y)		•			,		-				

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PAGE 119 OF

ITEMIZED RECEIPTS		or each category of the	४ 11a ☐ 11b ☐ 11c ☐ 12							
		etailed Summary Page								
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 (Unit	tedHealth Group PA	\C)							
Full Name of Individual (Last, First, Middle A. JONES, TERRY R, , ,	Initial) or Full Organ	ization Name	Date of Receipt							
Mailing Address 11856 NW 12TH MANOR			08 / D D / Y Y Y Y 08 31 2017							
City		Zip Code	Transaction ID : PR2575279247039							
CORAL SPRINGS	FL	33071-5035	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		on (for Individual) .cct Mgmt	Memo Item							
Receipt For:	Aggregate Year	-								
Primary General Other (specify) ▼		238.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. KRASKA, LISA MARIE, , ,	Initial) or Full Organ	ization Name	Date of Receipt							
Mailing Address 14183 SHADY BEACH TR	AIL NE		08 31 2017							
City	State	Zip Code	Transaction ID : PR2575283047039							
PRIOR LAKE	MN	55372-1345	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.76							
Name of Employer (for Individual) United HealthCare Services Inc	Occupati Dir Recr	ion (for Individual) ruit Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate Year	r-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. ESSLINGER, JOHN J, , ,	Initial) or Full Organ	ization Name	Date of Receipt							
Mailing Address 4944 W 151ST TERRACE			08 / D D / Y Y Y Y 08 31 2017							
City LEAWOOD	State KS	Zip Code 66224-9744	Transaction ID : PR2575288947039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc	Occupati Med Dir	on (for Individual)	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate Year	r-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			90.84							

SCHEDULE A (FEC Form 3X) -

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FOR LINE NUMBER:

PAGE 120 OF

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	1 7			
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia HAMBLIN, JILLIAN, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
Mailing Address 3103 BEACON GROVE ST					08 31 2017								
	City SPRING	State TX	Zip Code 77389-4348						2 9034703 is Period	9			
	FEC ID number of contributing federal political committee.	С					7		95.	22			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Gen Mgmt		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia BEAUREGARD, THOMAS RAYMON		ganization Name		Date of	Re	ceipt						
	Mailing Address 555 MILTON ROAD				08 / D D / Y Y Y Y 08 2017								
	City GOSHEN	State CT	Zip Code 06756-1613		Transaction ID : PR2575295147039 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Innovation		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia HEWITT, SCOTT A, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 1443 RAYMOND AVE				08	/	D D D 31		2017				
	City SAINT PAUL	State MN	Zip Code 55108-1430						29674703 is Period	9			
	FEC ID number of contributing federal political committee.	С					y		28.	08			
United HealthCare Services Inc VP			pation (for Individual) Itwk Prgms		Memo Item								
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 238.68	F	P/R Dedu	uctio	on (\$14.	04 Bi-We	ekly)					
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PAGE 121 OF

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			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora			
Full Name of Individual (Last, First, Middle A. MONAGHAN, JOHN, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 1432 E AMBERWOOD DRI	VE		08 / D D / Y Y Y Y 2017
City	State	Zip Code	Transaction ID : PR2575296847039
PHOENIX	AZ	85048-4056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item
Receipt For:		Year-to-Date ▼	-
Primary General Other (specify) ▼		238.68	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. CORN, BARBARA, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 12931 SUNSET BLUFF CT			08 31 2017
City	State	Zip Code	Transaction ID : PR2575297347039
SAINT LOUIS	MO	63127-1303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
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 ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MCELRATH-JONES, MARY R,		organization Name	Date of Receipt
Mailing Address 100 AMHERST DRIVE			08 / D / Y Y Y Y 2017
City	State	Zip Code	Transaction ID : PR2575302147039
NEW ROCHELLE	NY	10804-1800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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PAGE 122 OF

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	y information copied from such Reports and Staten for commercial purposes, other than using the nam						or the		po	se of		liciting	con	tributi	ons
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Un	itedHealth Group F	PAC)										
A.	Full Name of Individual (Last, First, Middle Initial) of HUGHES, ROBERT CHARLES, , ,	or Full O	Orga	nization Name		D	ate of	Re	ece	eipt					
	Mailing Address 68 OCEAN DRIVE	24-4-		Zin Oode		J.	08	1	l	31		/ Y	20		
	5	State NH		Zip Code 03874-4712	-							R25753 eipt thi)
	FEC ID number of contributing federal political committee.						mount	. 01	1		iec		IS FE	28.0	8
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) tg Bus Dev		[Me	emo	o It	tem					
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 238.68		P/f	R Ded	uctio	on	(\$14	.04	Bi-We	ekly))	
в.	Full Name of Individual (Last, First, Middle Initial) c CUEVAS, BRANDON E, , ,	or Full O	Drga	nization Name		D	ate of	Re	ece	eipt					
	Mailing Address 8 CLOISTER COURT			1		I	^M M 08	1	l	D 31)	/ Y	201	ү 17	Y
	5	State CA		Zip Code 92694-1556								25753 eipt th			
	FEC ID number of contributing federal political committee.					ļ			-			-7		384.6	0
	Name of Employer (for Individual) United HealthCare Services Inc		cupa gn C	tion (for Individual) EO		ŀ	Me	emo	o It	tem					
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 3269.10		P/F	R Dedu	uctic	on	(\$192	2.3	0 Bi-W	eekly	y)	
с.	Full Name of Individual (Last, First, Middle Initial) c KRINN, DOUGLAS L, , ,	or Full O	Drga	nization Name		D	ate of	Re	ece	eipt					
	Mailing Address 3008 CYPRESS CIRCLE NORTH					L	08		l	31			201	1. Alt 1.	
	5	State MN		Zip Code 55340-8809	-				-			R25753)
	FEC ID number of contributing federal political committee.						mount	. 01	J			eipt thi	IS FE	95.2	2
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP N	•	tion (for Individual)			Me	emo	o It	tem					
	Receipt For: Ag Primary General Other (specify)	gregate	Yea	ar-to-Date ▼ 571.32		P/I	R Ded	uctio	on	(\$47	.61	Bi-We	ekly))	
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PAGE 123 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b		11c	12	17
Any information copied from such Reports and or for commercial purposes, other than using the				or the		pose		oliciting	contribu	tions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group PA	C)							
Full Name of Individual (Last, First, Middle I HUNT, BRADLEY W, , ,	nitial) or Full C	organization Name	D	ate of	Re	eceipt				
Mailing Address 6636 W SHORE DR				м м 08	/		D 31	/ Y	2017	Y
City EDINA	State MN	Zip Code 55435-1529							31044703	9
FEC ID number of contributing	C	55455-1529	_ A	mount	of	Each	n Red	ceipt th	is Period 192.	30
federal political committee.		upation (for Individual)	- 1	Me	emo) Iten			4	
United HealthCare Services Inc		Segment CMO	1.1							
Receipt For:		Year-to-Date ▼	\neg							
Primary General Other (specify) ▼	Aggregate	1634.55	P/F	R Dedu	uctio	on (\$	96.15	5 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle I B. GRIMM, JAN T, , ,	nitial) or Full C	Organization Name	D	ate of	Re	eceipt				
Mailing Address 3608 WEST 85TH STREET				м м 08	/		D 31	/ Y	ү 2017	Y
City	State	Zip Code		Transa	acti	ion II) : Pl	R25753	1484703	9
LEAWOOD	KS	66206-1353	A	mount	of	Each	Rec	ceipt th	is Period	
FEC ID number of contributing federal political committee.	С			_		- J -		-	28.	08
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) t SIs SVP OptumI		Me	emo	lten	ı			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/F	R Dedu	uctic	on (\$ [.]	14.04	1 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle I C. DRAWZ, MATTHEW JOHN, , ,	nitial) or Full C	Organization Name	D	ate of	Re	eceipt				
Mailing Address 4848 SPARROW ROAD				08 ^M	/		31	/ Y	2017 [°]	Y
City	State	Zip Code		Trans	acti	ion II	D : P	R25753	31594703	9
MINNETONKA	MN	55345-3219	A	mount	of	Each	Rec	ceipt th	is Period	
FEC ID number of contributing federal political committee.	С					y		y	28.	08
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus DvIp	1	Me	emo	o Iten	n			
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SUBTOTAL of Receipts This Page (optional)			ſ						248.	46
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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PAGE 124 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 GOLDBERG, JEFFREY A, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 3410 BRADLEY LANE	State	Zip Code	08 / D D / Y Y Y Y 2017
CHEVY CHASE	MD	20815-3262	Transaction ID : PR2575326947039 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) Business Development Exe	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle VAN HAM, COLLEEN HASTING		rganization Name	Date of Receipt
Mailing Address 727 N EVERGREEN AVE			08 / D D / Y Y Y Y Y 2017
City ARLINGTON HEIGHTS	State IL	Zip Code 60004-5566	Transaction ID : PR2575341947039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. SIMONE, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 12 SCALIA COURT			08 / D D / Y Y Y Y Y 2017
City HAMILTON	State NJ	Zip Code 08690-1363	Transaction ID : PR2575346747039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional))		490.68
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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PAGE 125 OF

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111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	
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$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia IMDIEKE, PATRICK R, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 15900 WHITE PINE DRIVE				м м 08	/	D D D 31	/ Y	y y 2017	Y
	City WAYZATA	State MN	Zip Code 55391-2125						34794703 is Period	9
	FEC ID number of contributing federal political committee.	С							28.	08
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Dir Fin		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	'	P/R Dedu	uctio	on (\$14.	04 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initia TELESKY, MICHAEL J, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 2602 PENNINGTON PLACE				08	/	D D D 31	/ Y	2017	Y
	City VALPARAISO	State IN	Zip Code 46383-9163						5094703	9
	FEC ID number of contributing federal political committee.	С				UI			is Period 78.0	00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 663.00]	P/R Dedu	uctic	on (\$39.)	00 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initia PHILLIPS, CHRISTINE A, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 63 HERITAGE TRAIL				м м 08	/	D D D 31	/ Y	2017 [°]	Y
	City SUFFIELD	State CT	Zip Code 06078-2376						35404703 is Period	9
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		31.	72
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) legI Affs		Me	emo	tem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 222.04]	P/R Ded	uctio	on (\$15.	86 Bi-We	eekly)	
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PAGE 126 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle BROWN, SALLY A, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 192 HOMEWOOD DRIVE			08 / D D / Y Y Y Y 08 31 2017
City CLINTON	State NY	Zip Code 13323-1512	Transaction ID : PR2575363647039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Service Acct Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle ADAM, MATTHEW L, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 15607 SUMMIT DRIVE			08 / D D / Y Y Y Y Y 2017
City EDEN PRAIRIE	State MN	Zip Code 55347-2328	Transaction ID : PR2575364047039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. CIAVARELLA, TRACY W, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 20 LORRAINE DRIVE			08 / D D / Y Y Y Y 08 31 2017
City BEACON FALLS	State CT	Zip Code 06403-1256	Transaction ID : PR2575377947039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
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PAGE 127 OF

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	y information copied from such Reports and Stater for commercial purposes, other than using the nar					or the		rpo	se o				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (L	Jnit	edHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial) DOLL, KATHLEEN A, , ,	or Full Or	rgan	ization Name		Date o	of Re	ece	eipt				
	Mailing Address 3184 MULLIGAN LANE					[™] 08	/		D 31		/ Y	2017	Ŷ
	5	State MN		Zip Code 55318-3226								8514703	9
		C				Amour	nt of	Ea	ach I	≺eo	ceipt th	is Period 118.	66
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) Svc Acct Mgt		N	/lemo	o It	tem				
	Receipt For: Age Primary General Other (specify) ▼	ggregate `	Year	-to-Date ▼ 465.98	P	/R De	ducti	ion	(\$59).33	3 Bi-We	ekly)	
	Full Name of Individual (Last, First, Middle Initial) WINKLER, YASMINE, , ,	or Full Or	rgan	ization Name		Date o	of Re	ece	eipt				
	Mailing Address 1429 WEST WIGWAM TRAIL					M 08	/		D 31		/ Y	y y 2017	Y
	City MOUNT PROSPECT	State IL		Zip Code 60056-2940								9094703 is Period	9
	FEC ID number of contributing federal political committee.	C				_		,			-y	76.	92
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Reg		on (for Individual) EO		Ν	/lemo	o It	tem				
	Receipt For: Age Primary General Other (specify) ▼	ggregate `	Year	-to-Date ▼ 653.82	P/	'R Deo	ducti	on	(\$38	3.46	8 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial) CROWE, ANGELA T, , ,	or Full Or	rgan	ization Name		Date o	of Re	ece	eipt				
	Mailing Address 174 CHRISTOPHER ST					[™] 08	/		D 31		/ Y	2017 [°]	Y
	City MONTCLAIR	State NJ		Zip Code 07042-4206								89174703	
	FEC ID number of contribution	C				Amour	nt of	Ea	ach I	Rec	ceipt th	is Period 28.	
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Prgms		N	/lemo	o li	tem				
	Receipt For: At Primary General Other (specify)	ggregate `	Year	-to-Date ▼ 238.68	P	/R De	ducti	ion	ı (\$14	¥.04	4 Bi-We	ekly)	
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PAGE 128 OF

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			for each category of the Detailed Summary Page	×	-		11b	11c	12	
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		I PAC (L	JnitedHealth Group PA	AC)						
-		l) or Full O	rganization Name		Date of	Re	ceipt			
N	Aailing Address 215 GASPAR BEND					/		/ Y		Y
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F	Primary General	Aggregate		I F	P/R Dedu	uctic	on (\$14.)	00 Bi-We	ekly)	
		l) or Full O	rganization Name		Date of	Re	ceipt			
N	Aailing Address 6520 JAYCOX ROAD	- 1				/		/ Y		Y
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_	JALENA	OH	43021-9530	_	Amount	of	Each R	eceipt th	is Period	
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C	Dptum Services, Inc				Me	emo	Item			
F	Primary General	Aggregate	1634.55] •	P/R Dedu	uctio	on (\$96.	15 Bi-We	ekly)	
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PAGE 129 OF

		Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			person for the purpose of soliciting contributions
		adress of any political continute	
	ZED RECEIPTS for each category of the Detailed Summary Page it is it		
Full Name of Individual (Last, First, Middle KING, STEVEN F, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 33 PINEBROOK ROAD			
City NASHUA			
FEC ID number of contributing federal political committee.	С		88.56
Name of Employer (for Individual) United HealthCare Services Inc		· · · · · ·	Memo Item
	Aggregate		P/R Deduction (\$44.28 Bi-Weekly)
Full Name of Individual (Last, First, Middle GOTHARD, CAROL, , ,	Initial) or Full C	organization Name	Date of Receipt
City NORTHVILLE			
FEC ID number of contributing federal political committee.	C		90.90
Name of Employer (for Individual) United HealthCare Services Inc		,	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
		545.40	P/R Deduction (\$45.45 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MCGAVICK, KEVIN M, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 705 NOTTINGHAM COUR			08 31 2017
City CRANBERRY TOWNSHIP			
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		1 ()	Memo Item
	Aggregate	653.82	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			256.38
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PAGE 130 OF

Defaulted Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purposes, other than using the name and address of any policial committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) NUME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Date of Receipt Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	TEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
Any information copied from such Reports and Statements may not be sold or used by any person for the puppose of soliciting contributions from such committee to solicit contributions from solicit control solicit co			Detailed Summary Page	
UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. OHARA, KARIN R., Mailing Address 1431 HENRY COURT City CHANHASSEN FEC ID number of contributing federal political committee. Name of Employer (for Individual) UnitedHealthCare Services Inc Primary General Other (specify) ▼ FUI Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CASTILLO, EFREM, ., Mailing Address 307 JOLIET AVE City State City City City State City State City City State City Name of Employer (for Individual) United HealthCare Services Inc Bus Seg Chief Med Off	or for commercial purposes, other than using			erson for the purpose of soliciting contributions
A. OHARA, KARIN R, , , Date of Receipt Mailing Address 1431 HENRY COURT State Zip Code CHANHASSEN MN 55317-2200 FEC ID number of contributing federal political committee. C 76.92 Name of Employer (for Individual) Occupation (for Individual) P/R Deduction (\$38.46 Bi-Weekly) Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$38.46 Bi-Weekly) B. CASTILLO, EFREM, , , Mailing Address 307 JOLIET AVE Date of Receipt for City SSIN ANTONIO Tx Zip Code FEC ID number of contributing federal political committee. C 08 Name of Employer (for Individual) OLLE AVE 08 31 2017 City SSIN ANTONIO Tx Zip Code Transaction ID : PR2575441347033 Amount of Each Receipt For 08 31 2017 Receipt For: Other (specity) ▼ General Occupation (for Individual) Date of Receipt Mailing Address 2775 COUNTRYSIDE DRIVE WEST 78209-5243 Transaction ID : PR25754434247033 Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Memo Item P/R Deduction (\$192.30 Bi-Weekly) P/R Deduction (\$192.30 Bi-Weekly) P/R Deducti		ated PAC (I	JnitedHealth Group PA	NC)
City State Zip Code CHANHASSEN MN 55317-2200 FEC ID number of contributing C Transaction ID : PR2575428747039 Amount of Each Receipt this Period ////////////////////////////////////		Initial) or Full C	organization Name	Date of Receipt
OHANHASSEN MN 55317-2200 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer (for individual) Occupation (for individual) Memo Item United HealthCare Services Inc VP Acctng Memo Item Primary General 653.82 P/R Deduction (\$38.46 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt City State Zip Code SAN ANTONIO TX 78209-5243 FEC ID number of contributing federal political committee. C Outnet of Each Receipt Initial) or Full Organization Name Date of Receipt Initial PR255441347039. Aggregate Year-to-Date ▼	Mailing Address 1431 HENRY COURT			
Amound for any production of the services in c C Amound for any production (for individual) Name of Employer (for individual) Occupation (for individual) Memo Item Mare of Employer (for individual) VP Accting Memo Item Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$38.46 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt B. CASTILLO, EFREM, . , Mailing Address 307 JOLIET AVE Date of Receipt City State Zip Code Transaction ID : PR2575441347039. SAN ANTONIO TX 78209-5243 Amount of Each Receipt this Period PEC ID number of contributing federal political committee. Occupation (for Individual) Memo Item Name of Employer (for Individual) Occupation (for Individual) Memo Item United HealthCare Services Inc Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name P/R Deduction (\$192.30 Bi-Weekly) C MuRLEY, MARY J, . , Mailing Address 2775 COUNTRYSIDE DRIVE WEST Date of Receipt City State Zip Code 31 2017 City <t< td=""><td>,</td><td></td><td></td><td></td></t<>	,			
rederal political committee. V Aggregate Year-to-Date ▼ Name of Employer (for individual) VP Acctng Memo Item Primary General Aggregate Year-to-Date ▼ P/R Deduction (\$38.46 Bi-Weekly) B. CASTILLO, EFREM, , , Mailing Address 307 JOLIET AVE Date of Receipt City State Zip Code SAN ANTONIO TX 78209-5243 FEC ID number of contributing federal political committee. Occupation (for Individual) Memo Item Name of Employer (for Individual) Occupation (for Individual) Memo Item Initial Address 2775 COUNTRYSIDE DRIVE WEST Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) FEC ID number of contributing federal political committee. C 3269.10 P/R Deduction (\$192.30 Bi-Weekly) Receipt For: Primary General Occupation Name Date of Receipt City State Zip Code 31 2017 Transaction ID : PR2575443647039 Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) City State Zip Code 31 2017 Transaction ID : PR2575443647039 Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi			33317-2200	Amount of Each Receipt this Period
United HealthCare Services Inc VP Acotng Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 653.82 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt B. CASTILLO, EFREM, , , Mailing Address 307 JOLIET AVE 08 / 31 / 2017 City State Zip Code SAN ANTONIO TX 78209-5243 FEC ID number of contributing federal political committee. Occupation (for Individual) Memo Item Name of Employer (for Individual) Occupation (for Individual) Memo Item Primary General Occupation Name P/R Deduction (\$192.30 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name P/R Deduction (\$192.30 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address 2775 COUNTRYSIDE DRIVE WEST 08 / 31 / 2017 City State Zip Code Name of Employer (for Individual) C Malting Address 27755 GRONO MN 55356-9675 FEC ID number of contributing federal polititcal committee. Occupation (for Indivi	8	С		76.92
Primary General Other (specify) ▼ 653.82 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt B. CASTILLO, EFREM, , , Mailing Address 307 JOLIET AVE Date of Receipt City State Zip Code Transaction ID : PR2575441347039. SAN ANTONIO TX 78209-5243 Transaction ID : PR2575441347039. FEC ID number of contributing federal political committee. C Memo Item Name of Employer (for Individual) United HealthCare Services Inc Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Mailing Address 2775 COUNTRYSIDE DRIVE WEST City State Zip Code Date of Receipt Mailing Address 2775 COUNTRYSIDE DRIVE WEST City State Zip Code Memo Item ORONO MN 55356-9675 Amount of Each Receipt this Period Memo Item Mame of Employer (for Individual) Occupation (for Individual) Occupation (for Individual) Occupation (for Individual) Memo Item Mailing Address 2r7r5 COUNTRYSIDE DRIVE WEST Onor Mem			1 ()	Memo Item
Primary General General General P/R Deduction (\$38.46 Bi-Weekly) P/R Deduction (\$38.46 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt B. CASTILLO, EFREM, , , Mailing Address 307 JOLIET AVE Date of Receipt City State Zip Code Transaction ID : PR2575441347039. SAN ANTONIO Tx 78209-5243 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C General Occupation (for Individual) United HealthCare Services Inc Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) P/R Deduction (\$192.30 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Other (specify) ▼ Date of Receipt C. MURLEY, MARY J, , , Mailing Address 2775 COUNTRYSIDE DRIVE WEST Date of Receipt City State Zip Code Mailing Address 27755443647039 ORNO MN 55356-9675 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Memo Item Name of Employer (for Individual) Occupation (for Individual) Occupation (for Individual) <td>Receipt For:</td> <td>Aggregate</td> <td>Year-to-Date ▼</td> <td>—</td>	Receipt For:	Aggregate	Year-to-Date ▼	—
B. CASTILLO, EFREM, , , Date of Receipt Mailing Address 307 JOLIET AVE 08 2017 City State Zip Code Transaction ID : PR2575441347039. SAN ANTONIO TX 78209-5243 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Mame of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc Dus Seg Chief Med Off Memo Item Primary General Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) C MURLEY, MARY J, , , Mailing Address 2775 COUNTRYSIDE DRIVE WEST Date of Receipt City State Zip Code 31 2017 Mailing Address 2775 COUNTRYSIDE DRIVE WEST 08 31 2017 City State Zip Code 31 2017 ORONO MN 55356-9675 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 0.00 0.00 Name of Employer (for Individual) Occupation (for Individual) 0.00 0.00 VP Chief Actuary VP Chief Actuary Memo Item <td></td> <td></td> <td></td> <td>P/R Deduction (\$38.46 Bi-Weekly)</td>				P/R Deduction (\$38.46 Bi-Weekly)
City State Zip Code Transaction ID : PR2575441347039. SAN ANTONIO TX 78209-5243 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 384.60 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Seg Chief Med Off Memo Item Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) City Other (specify) ▼ Date of Receipt for: Mailing Address 2775 COUNTRYSIDE DRIVE WEST City State Zip Code City State Zip Code Transaction ID : PR2575443647039 Amount of Each Receipt this Period Memo Item P/R Deduction (\$192.30 Bi-Weekly) City State Zip Code Memo Item ORONO MN 55356-9675 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Memo Item Name of Employer (for Individual) Occupation (for Individual) Occupation (for Individual) United HealthCare Services Inc Occupation (for Individual) Memo Item		Initial) or Full C	Organization Name	Date of Receipt
SAN ANTONIO TX 78209-5243 Initial control of a control of	Mailing Address 307 JOLIET AVE			
federal political committee. 384.60 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Seg Chief Med Off Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt C. MURLEY, MARY J, , , Mailing Address 2775 COUNTRYSIDE DRIVE WEST Date of Receipt City State Zip Code ORONO MN 55356-9675 FEC ID number of contributing federal political committee. Occupation (for Individual) Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc Occupation (for Individual)	, ,			
United HealthCare Services Inc Bus Seg Chief Med Off Bus Seg Chief Med Off Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MURLEY, MARY J, , Mailing Address 2775 COUNTRYSIDE DRIVE WEST City State ORONO MN FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Chief Actuary Memo Item	5	C		384.60
Primary General Other (specify) ▼ 3269.10 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address 2775 COUNTRYSIDE DRIVE WEST City State Zip Code ORONO MN 55356-9675 FEC ID number of contributing federal political committee. Occupation (for Individual) Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc Occupation (for Individual)			· · · · · · ·	Memo Item
C. MURLEY, MARY J, , , Date of Receipt Mailing Address 2775 COUNTRYSIDE DRIVE WEST Date of Receipt City State Zip Code ORONO MN 55356-9675 FEC ID number of contributing federal political committee. C 0.00 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Chief Actuary Memo Item	Primary General	Aggregate		P/R Deduction (\$192.30 Bi-Weekly)
Mailing Address 2775 COUNTRYSIDE DRIVE WEST City State Zip Code ORONO MN 55356-9675 FEC ID number of contributing federal political committee. C 0.00 Name of Employer (for Individual) Occupation (for Individual) 0 United HealthCare Services Inc Occupation (for Individual) WP Chief Actuary		Initial) or Full C	organization Name	Date of Receipt
ORONO MN 55356-9675 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 Occupation (for Individual) VP Chief Actuary Memo Item		VE WEST		
FEC ID number of contributing federal political committee. C Another of Each Receipt this Period Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Chief Actuary Memo Item	-			Transaction ID : PR2575443647039
federal political committee. 0.000 Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc VP Chief Actuary	ORONO	MN	55356-9675	Amount of Each Receipt this Period
United HealthCare Services Inc VP Chief Actuary	5	С		0.00
			1 ()	Memo Item
Hecceipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 4999.90		Aggregate		P/R Deduction (\$0.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)				461.52

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 131 OF

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 Incorpo	rated PAC (JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middl A. AXBERG, PAMELA JEAN STEGOR		organization Name	Date of Receipt
Mailing Address 1427 BROOKSHIRE CO	URT		08 / D D / Y Y Y Y Y 08 31 2017
City NEW BRIGHTON	State MN	Zip Code 55112-6390	Transaction ID : PR2575443847039
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 ▼ 1829.71	P/R Deduction (\$3.85 Bi-Weekly)
Full Name of Individual (Last, First, Midd B. SPILKER, TIMOTHY M, , ,	le Initial) or Full C	organization Name	Date of Receipt
Mailing Address 32 FITCH LANE			M M / D D / Y Y Y Y 08 31 2017
City NEW CANAAN	State CT	Zip Code 06840-5051	Transaction ID : PR2575446347039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middl . HAUTMAN, MILLA, , ,	le Initial) or Full C	organization Name	Date of Receipt
Mailing Address 410 SYCAMORE CIRCL	1		08 / D D / Y Y Y Y 2017
City PLYMOUTH	State MN	Zip Code 55441-5667	Transaction ID : PR2575447147039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		455.46
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Tech Off	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2950.35	P/R Deduction (\$227.73 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	al)		847.76
TOTAL This Period (last page this line nun	nber only)	·····	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 132 OF

				Detailed Summary Page	×	11a	\square	11		_	11c	12	
An	y information copied from such Reports and Stat	ements ma	I ay n	ot be sold or used by any pe	erson fo	13 or the j	purr	14 pos			15 iciting	16 contribut	17 ions
	for commercial purposes, other than using the na												
\backslash	NAME OF COMMITTEE (In Full)	D A C ''											
$\Big/$	UnitedHealth Group Incorporated	•		•	(C)								
Α.	Full Name of Individual (Last, First, Middle Initial BOOKER, ROBERT E, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 16632 HANSON BLVD NW					M M	1	_	D D	1	Y	2017	Y
	City	State		Zip Code	44	08 Trans			31 • • • •	.	25754	2017 4724703	
	ANDOVER	MN		55304-2089	A							s Period	2
	FEC ID number of contributing federal political committee.	С				_		-			-y	473.	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		Me	emo) Ite	em				
	Dessint For:			r-to-Date ▼									
	Primary General Other (specify) ▼		1	2869.08	P/	R Dedu	uctio	on ((\$236	.75	i Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initial FLOCCO, LOUIS, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 2100 E KATELLA AVENUE UNIT 419					м м 08	/		31	/	Y	y y 2017	Y
	City	State		Zip Code		Transa	acti	on	ID : F	PR2	257544	4864703)
	ANAHEIM	CA		92806-6070	A	mount	of	Ea	ch Re	ece	ipt this	s Period	
	FEC ID number of contributing federal political committee.	С				_		,			-y	28.0	00
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) erwriting		Me	emo) Ite	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 238.00	P/	R Dedu	uctio	on ((\$14.0)0 E	Bi-Wee	ekly)	
c.	Full Name of Individual (Last, First, Middle Initial GEHLBACH, THOMAS E, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 5380 YELLOWSTONE TRAIL					M M 08	/		31	/	Y	y y 2017	Y
	City	State		Zip Code		Trans	acti	ion	ID : F	PR	25754	4884703	9
	MINNETRISTA	MN	_	55331-9163	A	mount	of	Ea	ch Re	ece	ipt this	s Period	
	FEC ID number of contributing federal political committee.	С						y			,	86.0)8
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) derwriting		Me	emo	o Ite	em				
	Poppint For:	I			-								
	Primary General	Ayyreyate	rea	r-to-Date ▼	P/	R Ded	uctio	on	(\$43.0)4 I	Bi-We	ekly)	
	Other (specify)		-	612.63								.,	
s	UBTOTAL of Receipts This Page (optional)							,			,	587.5	58
Т	OTAL This Period (last page this line number on	ly)		•••••	Ī			- -			- J -		

SCHEDULE A (FEC Form 3X) DEAEIDTA

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PAGE 133 OF

171			Use separate schedule(s)		(check only one)					
11	EMIZED RECEIPTS		for each category c Detailed Summary		¥ 11a 13		11b	11c	12	17
	y information copied from such Reports and Stat for commercial purposes, other than using the n				son for the		ose of s	oliciting	contribut	ions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Gr	oup PAC	C)					
A.	Full Name of Individual (Last, First, Middle Initial RUNICE, PAUL T, , ,) or Full Or	rganization Name		Date o	of Re	ceipt			
	Mailing Address 4622 BRUCE AVENUE				M N 08	/	D D D 31	/ Y	2017	Ŷ
	City EDINA	State MN	Zip Code 55424-1123						15154703 9 is Period)
	FEC ID number of contributing federal political committee.						7	-yr-	30.7	6
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury			/lemo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 261.46				ductic	on (\$15.3	8 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initial MCGLINCH, THOMAS S, , ,) or Full Or	rganization Name		Date o	of Re	ceipt			
	Mailing Address 910 MIDWEST TRAIL NORTH				08	/	31	/ Y	2017	Ŷ
	City LAKE ELMO	State MN	Zip Code 55042-9658		Transaction ID : PR257545164703 Amount of Each Receipt this Period)	
	FEC ID number of contributing federal political committee.						7		95.2	2
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury			/lemo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 571.32				ductio	on (\$47.6	1 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial MURPHY, ERIC D, , ,) or Full Or	rganization Name		Date o	of Re	ceipt			
	Mailing Address 5201 BLAKE ROAD	1			M N 08	/	D D D 31	/ Y	2017 ^Y	Y
	City EDINA	State MN	Zip Code 55436-1127						45374703 is Period	9
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Bus Segment CEO Aggregate Year-to-Date 3269.10					y .		384.6	60
	Name of Employer (for Individual) Optum Services, Inc					/lemo	Item			
	Receipt For: Primary General Other (specify)				P/R De	ductio	on (\$192.	.30 Bi-W	/eekly)	
s	UBTOTAL of Receipts This Page (optional)			····· ►			,	,	510.5	8
т	OTAL This Period (last page this line number on	ly)		····· ►			7	-		

FOR LINE NUMBER:

PAGE 134 OF

		Use separate schedule(s)	(check only one)			
IIEWIIZED KEGEIP13		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 PEGG JR, JACK D, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 4917 KAMA LANE NE			M M / D D / Y Y Y Y 08 31 2017			
City ALBERTVILLE	State MN	Zip Code 55301-3536	Transaction ID : PR2575456047039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		28.08			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Underwriting	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. SMITH, DAYNITA MARIE, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 4828 ISLAND VIEW DR			08 31 2017			
City MOUND	State MN	Zip Code 55364-9391	Transaction ID : PR2575460647039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.08			
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. SADUSKE, NANETTE M, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 4276 NICOLET DRIVE			08 / D D / Y Y Y Y 08 31 2017			
City GREEN BAY	State WI	Zip Code 54311-9798	Transaction ID : PR2575470247039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		86.94			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 565.11	P/R Deduction (\$43.47 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional).			143.10			
TOTAL This Period (last page this line number	er only)					

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FOR LINE NUMBER:

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PAGE 135 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)
Α.	Full Name of Individual (Last, First, Middle Initial) BARTHEL, THOMAS C, , ,	or Full O	rganization Name	Date of Receipt
	Mailing Address 9713 HEMLOCK LANE NORTH			08 / D D / Y Y Y Y Y 2017
	City MAPLE GROVE	State MN	Zip Code 55369-3665	Transaction ID : PR2575484347039
	FEC ID number of contributing	С		Amount of Each Receipt this Period
	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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initial) MACLAUCHLAN, DANIEL P, , ,	or Full O	rganization Name	Date of Receipt
	Mailing Address 780 CENTRAL AVENUE			08 31 Y Y Y Y Y 2017
	City GLENSIDE	State PA	Zip Code 19038-1701	Transaction ID : PR2575492747039 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.08
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initial) STARMANN, LYNN A, , ,	or Full O	rganization Name	Date of Receipt
	Mailing Address 11701 WEMBLEY RD			M = M / D = D / Y = Y = Y Y 08 31 2017
	City LOS ALAMITOS	State CA	Zip Code 90720-4235	Transaction ID : PR2575494547039 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		95.22
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	151.38
Т	OTAL This Period (last page this line number only	y)	••••••	

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

FOR LINE NUMBER:

PAGE 136 OF

		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 (JnitedHealth Group P/	AC)			
Full Name of Individual (Last, First, Middle A. RAMIREZ, MICHELE, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 37 CALAIS ROAD			08 31 Y Y Y Y Y			
City RANDOLPH	State NJ	Zip Code 07869-3531	Transaction ID : PR2575502447039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.00			
Name of Employer (for Individual) United HealthCare Services Inc	Occ Hur	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. SUNDAL, DEBORAH A, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 5109 WEST 66TH ST			08 / D D / Y Y Y Y Y 2017			
City EDINA	State MN	Zip Code 55439-1429	Transaction ID : PR2575502947039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.00			
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle WEBSTER, AMBER JIA, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 2115 VALLEY ROAD	Mailing Address 2115 VALLEY ROAD					
City COSTA MESA	State CA	Zip Code 92627-3976	Transaction ID : PR2575504847039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.08			
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional).			84.08			
TOTAL This Period (last page this line number	er only)					

FOR LINE NUMBER:

PAGE 137 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 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 JONES, RICHARD L, , ,	Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 8586 W CARBON CT			08 31 2017		
City BOISE	State ID	Zip Code 83709-5195	Transaction ID : PR2575509647039 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		28.08		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg SIs Dir	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)		
Full Name of Individual (Last, First, Middle B. HOWELL, NICHOLAS F, , ,	Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 300 ORANGE GROVE AV	ENUE		08 / D D / Y Y Y Y 2017		
City	State CA	Zip Code	Transaction ID : PR2575510047039		
SOUTH PASADENA	CA	91030-1616	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		415.86		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Optuml Cnslt	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3128.41	P/R Deduction (\$207.93 Bi-Weekly)		
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name			
C. JOSEPH, MOLLY E, , , Mailing Address 9209 GRAND SUMMIT BL	VD		Date of Receipt		
City DRIPPING SPRINGS	State TX	Zip Code 78620-2882	Transaction ID : PR2575521747039 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		384.00		
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 ▼ 3264.00	P/R Deduction (\$192.00 Bi-Weekly)		
SUBTOTAL of Receipts This Page (optional)			827.94		
TOTAL This Period (last page this line numb	er only)				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 138 OF

		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	d Statements mathematic and a	I ay not be sold or used by any p uddress of any political committe	erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group P	AC)			
Full Name of Individual (Last, First, Middle A. HEBERT, PAUL B, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 13 GOVERNORS ROW			M M / 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 WEST HARTFORD	State CT	Zip Code 06117-1931	Transaction ID : PR2575522347039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.			250.00			
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2125.00	P/R Deduction (\$125.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. DI RE, BERNADETTE, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 1 NORFOLK LANE			08 / D D / Y Y Y Y Y 2017			
City HOLLISTON	State MA	Zip Code 01746-2362	Transaction ID : PR2575522547039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		76.92			
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 ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)			
Full Name of Individual (Last, First, Middle KAPLAN, ERIC J , , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 193 PARTRIDGE LANDING	Mailing Address 193 PARTRIDGE LANDING City State Zip Code					
GLASTONBURY	CT	06033-2849	Transaction ID : PR2575524047039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.00			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Sls SVP OptumI	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional).			354.92			
TOTAL This Period (last page this line number	er only)					

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FOR LINE NUMBER:

PAGE 139 OF

		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 (I	JnitedHealth Group PA	AC)			
Full Name of Individual (Last, First, Middle I A. CROCKETT, DOUGLAS F, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 5938 DEER HOLLOW COU			08 / D D / Y Y Y Y Y 2017			
City PITTSBORO	State IN	Zip Code 46167-9583	Transaction ID : PR2575526047039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		142.84			
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 ▼ 857.04	P/R Deduction (\$71.42 Bi-Weekly)			
Full Name of Individual (Last, First, Middle I COHEN, SANFORD P, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 28 CRESCENT LANE			08 / D D / Y Y Y Y 2017			
City LEVITTOWN	State NY	Zip Code 11756-2506	Transaction ID : PR2575526147039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	number of contributing					
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Bus Seg Chief Med Off		Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼	_			
Other (specify) ▼		418.48	P/R Deduction (\$50.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle I GREENBERG, JASON E, , ,		rganization Name	Date of Receipt			
Mailing Address 630 STILSON CANYON RC	AD	Zip Code	08 31 2017			
City CHICO	CA	95928-9179	Transaction ID : PR2575526747039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		192.30			
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 ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			435.14			
TOTAL This Period (last page this line numbe	r only)					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 140 OF

		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 berson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group P	4C)		
Full Name of Individual (Last, First, Middle A. JETER, WILLIAM GARRISON, , ,	Initial) or Full C	Organization Name	Date of Receipt		
Mailing Address 21 PLAINFIELD STREET UNIT 3			08 / D D / Y Y Y Y 2017		
City JAMAICA PLAIN	State MA	Zip Code 02130-3632	Transaction ID : PR2575528147039 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		28.00		
Name of Employer (for Individual) Optum Services, Inc	Optum Services, Inc VP IT				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)		
Full Name of Individual (Last, First, Middle B. HUNTER, ROBERT ALDEN, , ,	Initial) or Full C	Organization Name	Date of Receipt		
Mailing Address 9236 PRESTON PLACE			08 / D / Y Y Y Y 2017		
City EDEN PRAIRIE	State MN	Zip Code 55347-3396	Transaction ID : PR2575528347039 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С				
Name of Employer (for Individual) United HealthCare Services Inc		supation (for Individual) M A	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)		
Full Name of Individual (Last, First, Middle C. HOLOVNIA, KRISTEN NOEL A			Date of Receipt		
Mailing Address 4610 LAKEVIEW DRIVE	. ,		08 / ¹ 2017		
City EDINA	State MN	Zip Code 55424-1518	Transaction ID : PR2575533047039 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		192.30		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)		
SUBTOTAL of Receipts This Page (optional).			248.38		
TOTAL This Period (last page this line numb	er only)				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 141 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)			
II EIVIIZED KEGEIPIS		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) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)			
Full Name of Individual (Last, First, Middle A. HILL, JANE B, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 34301 299TH PLACE			M M / D D / Y Y Y Y Y 08 31 2017			
City AITKIN	State MN	Zip Code 56431-5914	Transaction ID : PR2575533147039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		76.92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. BAHL, ALISA LAMNIN, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 41 BIRCHWOOD DRIVE			08 / D D / Y Y Y Y 2017			
City GREENWICH	State CT	Zip Code 06831-3311	Transaction ID : PR2575534447039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		43.48			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Sales	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 304.36	P/R Deduction (\$21.74 Bi-Weekly)			
Full Name of Individual (Last, First, Middle HAMLIN, THOMAS A, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 2800 NEWMAN						
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536247039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		76.92			
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Sr B	upation (for Individual) ehvrl Med Dir	Memo Item			
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			197.32			
TOTAL This Period (last page this line numb	per only)					

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 142 OF

			Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a 11b 11c 12	7		
Any	/ information copied from such Reports and	Statements ma	y not be sold or used by any political committee	13 14 15 16 berson for the purpose of soliciting contributions e to solicit contributions from such committee. 10	17 s		
	NAME OF COMMITTEE (In Full)		duress of any political committee				
	UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)			
A.	Full Name of Individual (Last, First, Middle Ir SULLIVAN, EILEEN A, , ,		rganization Name	Date of Receipt			
	Mailing Address 671 PLANTATION KEY CIR	1		08 / D D / Y Y Y Y 2017			
	City OCOEE	State FL	Zip Code 34761-4665	Transaction ID : PR2575537247039 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		28.08			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ssc Gen Counsel	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
B.	Full Name of Individual (Last, First, Middle Ir LUQUE, JOY L, , ,	hitial) or Full O	rganization Name	Date of Receipt			
	Mailing Address 18507 KELLY CAVE TRAIL			08 / D D / Y Y Y Y 2017			
	City DALLAS	State TX	Zip Code 75252-2688	Transaction ID : PR2575539247039			
-	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 31.20			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item			
Ì	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.60	P/R Deduction (\$15.60 Bi-Weekly)			
	Full Name of Individual (Last, First, Middle Ir WENTZIEN, MICHAEL BARON,		rganization Name	Date of Receipt			
	Mailing Address 6350 SUMMIT CIRCLE	08 / D D / Y Y Y Y 08 31 2017					
	City CHANHASSEN	State MN	Zip Code 55317-9138	Transaction ID : PR2575540847039 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		28.08			
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Optuml Cnslt	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
		1					

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 143 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than u			erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)	porated PAC (I	JnitedHealth Group PA	AC)		
Full Name of Individual (Last, First, M STEINBRECHER, HOLLY, , ,	iddle Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 3631 CHESAPEAKE	State	Zip Code	08 31 2017		
FRISCO	TX	75034-0807	Transaction ID : PR2575544547039 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		192.30		
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 ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)		
Full Name of Individual (Last, First, M B. BALCK, AMY LYNN, , ,	iddle Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address N3681 VINE RD			08 / D D / Y Y Y Y 08 31 2017		
City FREEDOM	State WI	Zip Code 54913-6928	Transaction ID : PR2575548447039 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		28.00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)		
Full Name of Individual (Last, First, M C. DAIKEN, LAURIE A, , ,	iddle Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 5002 ONEIDA ST			08 / D D / Y Y Y Y Y 08 31 2017		
City DULUTH	State MN	Zip Code 55804-1642	Transaction ID : PR2575549647039 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) Bus Anlys	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 285.60	P/R Deduction (\$23.80 Bi-Weekly)		
SUBTOTAL of Receipts This Page (opti	onal)		267.90		
TOTAL This Period (last page this line	number only)	•			

FOR LINE NUMBER:

PAGE 144 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			
			person 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 MORGAN, MARY E, , ,	e Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 1504 TIROL DRIVE			08 31 2017			
City INCLINE VILLAGE	State NV	Zip Code 89451-7911	Transaction ID : PR2575550847039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.08			
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. MOCK, CURTIS A, , ,	e Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 23 KELTON STREET						
City REHOBOTH	State MA	Zip Code 02769-2530	Transaction ID : PR2575579247039			
		02769-2530	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	192.30				
Name of Employer (for Individual) Optum Services, Inc						
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼		1634.55	P/R Deduction (\$96.15 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. WINSOR, ELIZABETH C, , ,	e Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 57 WILDERS PASS						
City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582847039 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)) NA Acct	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)		604.98			
TOTAL This Period (last page this line num	ber only)					

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 145 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12								
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated											
Α.	Full Name of Individual (Last, First, Middle Initial) EULL, MARY ANN, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 11204 BEDFORDSHIRE AVE			08 / D D / Y Y Y Y 2017								
	City POTOMAC	State MD	Zip Code	Transaction ID : PR2575583747039								
			20854-2003	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		34.76								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir	Memo Item								
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		208.56	P/R Deduction (\$17.38 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial) HARRIS, EUGENE M, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 2832 HARBORSIDE WAY			08 31 2017								
	City	State	Zip Code	Transaction ID : PR2575585447039								
	SOUTHPORT	NC	28461-8373	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92 Memo Item								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Brkr SIs									
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name	Date of Receipt								
	Mailing Address 2069 CIRCLE DRIVE			08 31 2017								
	City	State	Zip Code	Transaction ID : PR2575585947039								
	KRONENWETTER	WI	54455-9062	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		28.08								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			139.76								
Т	OTAL This Period (last page this line number only	y)	····· •	· · · · · · · · · · · · · · · · · · ·								

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 146 OF

	-13			ategory of the ummary Page		' 11a		11b	11c	12					
						13		14	15	16	17				
Any information copied fro or for commercial purpose	s, other than using the n														
		//													
/ UnitedHealth Gr	oup Incorporated	I PAC (L	InitedHea	alth Group PA	AC)										
Full Name of Individual	(Last, First, Middle Initia A, , ,	l) or Full Or	ganization Na	ame		Date of Receipt									
Mailing Address 45 DE	_PHI ROAD														
City		State CT	Zip Code			Trans	acti	on ID :	PR2575	59364703	39				
STAFFORD SPRINGS			06076-3	3405		Amount	t of	Each Re	eceipt th	nis Perioc					
FEC ID number of cont federal political committ		С								28	.00				
Name of Employer (for United HealthCare Servi	,	Occu Dir P	pation (for Ind	dividual)		Me	emo	Item							
Receipt For:			Year-to-Date	V	_										
Primary	General	. iggi ogulo			I F	P/R Ded	uctic	on (\$14.0	00 Bi-We	eekly)					
Other (specify)			y- 1 - 4	238.00						,					
Full Name of Individual 3. MILLER, MICHAE	(Last, First, Middle Initia L R, , ,	l) or Full Or	ganization Na	ame		Date of	Re	ceipt							
Mailing Address 213 M				08 31 2017											
City		State	Zip Code			Trans	acti	on ID : I	PR2575	59564703	9				
GRAFTON		MA	01519-1	328		Amount	tof	Each Re	eceipt th	nis Period	1				
FEC ID number of cont federal political committ	•	C					83.32								
Name of Employer (for Optum Services, Inc	Individual)	Occu VP E		Memo Item											
Receipt For:		Aggregate Year-to-Date ▼					-								
Other (specify) ▼	General	624,90					P/R Deduction (\$41.66 Bi-Weekly)								
Full Name of Individual		Initial) or Full Organization Name					Re	ceipt							
Mailing Address 524 FC	ORT WILLIAMS PKWY					м м 08	/	D D 31	/ Y	2017	Ŷ				
City		State	Zip Code			Trans	acti	ion ID :	PR2575	5961470	39				
ALEXANDRIA		VA	22304-1	849		Amount	t of	Each Re	eceipt th	nis Perioc	l				
FEC ID number of cont federal political committ	0	С						,	,	714	.28				
Name of Employer (for	Individual)	Осси	pation (for Ind	dividual)		Me	emo	Item							
Optum Services, Inc	,		Dir Optuml C	,											
Receipt For:		Aggregate Y	Year-to-Date												
Other (specify)	General	Aggregate Year-to-Date ▼ 1785.70					uctio	on (\$357	′.14 Bi-V	Veekly)					
SUBTOTAL of Receipts	his Page (optional)			•••••	<u> </u>			,	9	825	60				
TOTAL This Period (last	page this line number on	ıly)		••••••	•			-			_				

SCHEDULE A (FEC Form 3X) _ _____

FOR LINE NUMBER:

PAGE 147 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									
			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 IVERSON, LISA M, , ,	e Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 13341 CARRACH AVENU	JE		08 / D D / Y Y Y Y Y 08 31 2017									
City ROSEMOUNT	State MN	Zip Code 55068-4774	Transaction ID : PR2575603247039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Bus	upation (for Individual) Segment CFO	Memo Item									
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. MCNUTT, DIANE L, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 11524 ZION ROAD			08 / D D / Y Y Y Y 2017									
City BLOOMINGTON	State MN	Zip Code 55437-3636	Transaction ID : PR2575604547039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. COSTA, JOEL, , ,	e Initial) or Full C	Prganization Name	Date of Receipt									
Mailing Address 775 WESTCHESTER AV	1	1	08 / D D / Y Y Y Y 2017									
City SHAKOPEE	State MN	Zip Code 55379-4557	Transaction ID : PR2575605847039 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	Occ VP I	upation (for Individual) Fin	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1961.46	P/R Deduction (\$115.38 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)		999.96									
TOTAL This Period (last page this line num	ber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 148 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 Incorpo	prated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Mide A. KING, SARAH D, , ,	dle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 116 CUTLER ROAD			08 31 2017										
City GREENWICH	State CT	Zip Code 06831-2511	Transaction ID : PR2575612847039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		400.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3200.00	P/R Deduction (\$200.00 Bi-Weekly)										
Full Name of Individual (Last, First, Mide B. STOCKHOWE, MARK W, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 2108 MANOR DRIVE			Mom / D D / Y Y Y Y 08 31 2017 2017										
City BURNSVILLE	State MN	Zip Code 55337-2036	Transaction ID : PR2575619947039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		95.22										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Adv/Tech Cnslt Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)										
Full Name of Individual (Last, First, Mide C. KELLEY, SUSAN M, , ,	dle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 2279 STEARNLEE AVE			08 / D D / Y Y Y Y 2017										
City LONG BEACH	State CA	Zip Code 90815-1934	Transaction ID : PR2575623047039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		34.76										
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 ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	al)		529.98										
TOTAL This Period (last page this line nu	mber only)												

FOR LINE NUMBER:

PAGE 149 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	4C)								
Full Name of Individual (Last, First, Middl A. THOMPSON, BRIAN R, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 17829 63RD AVE N			08 31 2017								
City MAPLE GROVE	State MN	Zip Code 55311-4650	Transaction ID : PR2575634647039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		521.36								
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 ▼ 2653.80	P/R Deduction (\$260.68 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. WILSON JR, STEPHEN L, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2420 DURHAM MANOR			08 / D D / Y Y Y Y 2017								
City FRANKLIN	State TN	Zip Code 37064-5266	Transaction ID : PR2575636147039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		153.84								
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 ▼ 307.68	P/R Deduction (\$76.92 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. CLARK, TERRENCE M, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8 COOPER AVENUE			08 / D D / Y Y Y Y 2017								
City EDINA	State MN	Zip Code 55436-1315	Transaction ID : PR2575636947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		1059.80								
TOTAL This Period (last page this line num	ber only)										

FOR LINE NUMBER:

PAGE 150 OF

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II EIVIIZED RECEIFIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using 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 CABANILLAS, MARIA A, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 2105 SHERIDAN			08 31 Y Y Y Y 08 31 2017								
City HOUSTON	State TX	Zip Code 77030-2107	Transaction ID : PR2575637347039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. COLLINS, NEIL P, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 8465 MISSION HILLS LANE			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								
City CHANHASSEN	State MN	Zip Code 55317-7712	Transaction ID : PR2575637647039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C. DAVIS, BENTON V, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 9825 NORTH 53RD PLACE		Zin Oode	08 / D D / Y Y Y Y 31 2017								
City PARADISE VALLEY	State AZ	Zip Code 85253-1634	Transaction ID : PR2575639247039 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) GM Clin Comnty Ntwk	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3076.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			440.68								
TOTAL This Period (last page this line numbe	er only)										

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FOR LINE NUMBER:

PAGE 151 OF

171		Use separate schedule(s)			(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the n													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initial NICOLL, DEREK, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 155 MEADOWVIEW LANE				08 31 Y Y Y Y Y 08 31 2017									
	City MEDINA	State MN	Zip Code 55340-4510						54864703 is Period	9				
	FEC ID number of contributing federal political committee.	С							28.	08				
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP N	pation (for Individual) Iktg		Me	emc	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 238.68		P/R Dedu	uctio	on (\$14.	04 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initial HERMAN, CRAIG S, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 9609 WYOMING CIRCLE				M M 08	/	D D D 31	/ Y	2017	Y				
	City BLOOMINGTON	State MN	Zip Code 55438-1628				-		5024703 is Period	9				
	FEC ID number of contributing federal political committee.	С							384.	60				
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Gen Mgmt				Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia VAN ERT, MARK, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 221 OAKWOOD RD				08	1	31		2017					
	City HOPKINS	State MN	Zip Code 55343-8532						5054703 is Period	9				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	,	28.	08				
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) en Mgmt		Me	emo	ltem							
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PAGE 152 OF

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	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	contribu	tions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	NC)										
A.	Full Name of Individual (Last, First, Middle Initia HAYHURST, JENNY A, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 23A MOUNT HYGEIA ROAD			08 31 2017										
	City FOSTER	State RI	Zip Code 02825-1434						5 5184703 is Period	9				
	FEC ID number of contributing federal political committee.	С			<u> </u>				28.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Ntwk Prgms		Me	emc	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00		P/R Ded	ucti	on (\$14.	.00 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initia MCFANN, ELENA J, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 18925 24TH AVENUE NORTH				08	/	31		y y 2017	Y				
	City PLYMOUTH	State MN	Zip Code 55447-2072				-		5474703 is Period	9				
	FEC ID number of contributing federal political committee.	С				U			384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Regn CEO				Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initia KANE, HEATHER MAUREEN, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 3621 N LAKEWOOD AVENUE UNIT 3S	Otata	7		08	1	31		ү 2017					
	City CHICAGO	State IL	Zip Code 60613-4842						65744703 is Period	9				
	FEC ID number of contributing federal political committee.	С					y :	, ,	47.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Gen Mgmt		Me	emo	ttem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 285.60		P/R Ded	ucti	on (\$23.	.80 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)		•				, .	. ,	460.	20				
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PAGE 153 OF

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12						
	y information copied from such Reports and Sta for commercial purposes, other than using the n														
$\overline{)}$	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)											
A.	Full Name of Individual (Last, First, Middle Initia PIZZANO, KATHRYN L, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt								
	Mailing Address 21 STEBBINS FARM ROAD				08 / D D / Y Y Y Y Y 08 31 2017										
	City PAWLING	State NY	Zip Code 12564-3109					PR25756 leceipt th		9					
	FEC ID number of contributing federal political committee.	С					т. т.		28.	08					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Gen Mgmt		Me	emc	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 238.68		P/R Ded	ucti	on (\$14	.04 Bi-We	eekly)						
в.	Full Name of Individual (Last, First, Middle Initia HUXLEY, JEFFREY L, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt								
	Mailing Address 2465 EDGERTON ST	State	Zip Code		M M 08	1	31		2017						
	LITTLE CANADA	MN	55117-1674					PR25756 leceipt th		9					
	FEC ID number of contributing federal political committee.	С							28.	08					
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Bus Process				Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)											
С.	Full Name of Individual (Last, First, Middle Initia ZIGLER, JANICE C, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt								
	Mailing Address 21 TREVINO CIRCLE				08	1	31		2017						
	City ANGEL FIRE	State NM	Zip Code 87710					PR25756		9					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y		384.	60					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Pres Ntwk Mgmt		M	emo	tem								
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 3269.10		P/R Ded	ucti	on (\$19	2.30 Bi-W	/eekly)						
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	. ,	440.	76					
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PAGE 154 OF

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			Detailed Summary Faye		13		14		15		16	17		
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)										
<u> </u>	Full Name of Individual (Last, First, Middle Ir ALLEN, CARL E, , ,	nitial) or Full O	rganization Name		Date of Receipt									
•••	Mailing Address 8675 AZURE SKY DRIVE													
	City LAS VEGAS	State NV	Zip Code 89129-2227		Trans Amount		-		PR2575			9		
	FEC ID number of contributing federal political committee.	С									78.0)0		
	Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) ⁄led Dir		Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 663.00	יונ	P/R Dedu	uctio	on ((\$39.0)0 Bi-W	eekl	y)			
	Full Name of Individual (Last, First, Middle Ir SANTA, ERIC S, , ,	nitial) or Full O	rganization Name		Date of	Re	ecei	pt						
	Mailing Address 2101 CAMILLO COURT				M M 08	1		31	/ Y		ү)17	Y		
	City APEX	State NC	Zip Code 27502-9679		Trans: Amount				PR2575 eceipt t			}		
	FEC ID number of contributing federal political committee.	С			<u> </u>		- 7 -		- 45-		28.0)8		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate] '	P/R Deduction (\$14.04 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Ir MITCHELL, JILL K, , ,	hitial) or Full O	rganization Name		Date of	Re	ecei	pt						
	Mailing Address 11499 ASHLEY COURT				08	1		31)17	Y		
	City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251		Trans Amount				PR257			9		
	FEC ID number of contributing federal political committee.	С					,		,		30.7	76		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr		Me	əmc	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 261.46]	P/R Ded	ucti	on	(\$15.:	38 Bi-W	eekl	у)			
	JBTOTAL of Receipts This Page (optional)						-	-		-	136.8	34		

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FOR LINE NUMBER:

PAGE 155 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee							
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle SIMONSON, KELLY A, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 11680 GLOWING SUNSET	LANE		08 / D D / Y Y Y Y 2017							
City LAS VEGAS	State NV	Zip Code 89135-1658	Transaction ID : PR2575682347039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		120.00							
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 660.00	P/R Deduction (\$60.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. STIDMAN, CHRISTOPHER J, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6504 CHEROKEE TRAIL	0	Zin Onde	08 / D D / Y Y Y Y Y 2017							
City EDINA	State MN	Zip Code	Transaction ID : PR2575683847039							
		55439-1109	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Relationship	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		3269.10	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle OCHIPINTI, JOSEPH, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2751 MEETING PLACE	04-4-	Zin Ood-	08 / 0 0 / Y Y Y Y 08 31 2017							
City ORLANDO	State FL	Zip Code 32814-6136	Transaction ID : PR2575685747039 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		79.62							
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 ▼ 676.77	P/R Deduction (\$39.81 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			584.22							
TOTAL This Period (last page this line number	er only)									

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

FOR LINE NUMBER:

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PAGE 156 OF

		Detailed Summary Page		la		11b		11c	12	<u> </u>				
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	-													
Full Name of Individual (Last, First, Middl A. FINE, BRETT M, , ,	e Initial) or Full C	Organization Name	Dat	Date of Receipt										
Mailing Address 607 STONINGTON ROA		Zip Code		08 31 2017 Transaction ID : PR2575692847039										
City SILVER SPRING	State MD	20902-1547							9284703 is Period					
FEC ID number of contributing federal political committee.	С		76.92											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Corp Strat		Me	emo	ltem								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R	Dedu	uctio	on (\$38	8.46	Bi-We	ekly)					
Full Name of Individual (Last, First, Middl B. BRASCHAYKO, AVIS ZEITHAN	1ER, , ,	Organization Name	Dat	e of	Re	eceipt								
Mailing Address 10163 MISSISSIPPI BLV				08	/	D 31		/ Y	2017	Y				
City COON RAPIDS	State MN	Zip Code 55433-4531							9574703 is Period	-				
FEC ID number of contributing federal political committee.	C			30.76 Memo Item										
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 261.46	P/R	P/R Deduction (\$15.38 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. FARRELL, STEPHEN J, , ,	e Initial) or Full C	Organization Name	Dat	e of	Re	eceipt								
Mailing Address 50 MAJOR DOANE RD	1			08	1	D 31	1		2017 ^Y					
City	State MA	Zip Code 02667-7836							9624703 is Period					
FEC ID number of contributing federal political committee.	C					y .		9	76.	92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	tem								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2653.82	P/R	Dedu	ucti	on (\$38	8.46	Bi-We	ekly)					
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PAGE 157 OF

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	y information copied from such Reports and Stat for commercial purposes, other than using the na															
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٩.	Full Name of Individual (Last, First, Middle Initial MOORE, EDWARD D, , ,) or Full O		Date of Receipt												
	Mailing Address 3110 N CHESTNUT ST APT 106	1		1		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										
	City	State MN		Zip Code	Transaction ID : PR2575702747039											
	CHASKA	IVIIN		55318-4594	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			28.08											
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	Memo Item													
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	Primary General	iggi oguto	100		- I F	P/	R De	ducti	ior	า (ร	614.	.04	Bi-We	ekly)		
	Other (specify) ▼		-1	238.68	4									• *		
	Full Name of Individual (Last, First, Middle Initial HERMES, JAMIL GEORGE, , ,) or Full O	rga	nization Name		D	ate o	of Re	ece	eip	ot					
	Mailing Address 9809 BROOKFORD ROAD	08 / D D / Y Y Y Y Y 08 31 2017														
	City	State		Zip Code			Tran	sact	io	n I	D :	PR	25757	05347	039	
	POTOMAC	MD									eipt th					
	FEC ID number of contributing federal political committee.	C							,				-	:	35.7	0
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		Aggregate	Yea	ur-to-Date ▼												
	Primary General Other (specify) ▼		,	214.20	F	P/I	R Deo	ducti	ion	n (\$	517.	85	Bi-We	ekly)		
	Full Name of Individual (Last, First, Middle Initial PROKOCKI, ELIZABETH SOBERG		rga	nization Name		C)ate c	of Re	ece	eip	ot					
	Mailing Address 9746 SUNSET HILL DR					l	^M 08	1	′	D	31)	/ Y	y 2017		Y
	City	State		Zip Code		_	Tran	sact	tio	n	ID :	PF	R25757	705847	7039)
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	FEC ID number of contributing federal political committee.	С				l			,				9	19	92.3	0
	Name of Employer (for Individual)	Occi	upat	tion (for Individual)	-		N	/lemo	o	lte	m					
	United HealthCare Services Inc	SVP	•	(1										
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PAGE 158 OF

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UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P	4C)										
Full Name of Individual (Last, First, Middle II WILSON, D ELLEN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 400 STUART STREET			08 / 0 · 0 · 0 · 0 · 0 · 0 · 0 · 0 · 0 · 0										
City BOSTON	State MA	Zip Code 02116-5011	Transaction ID : PR2575708847039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Human Capital	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle In B. VOLLRATH, MICHELLE G, , ,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 7647 MARKER ROAD			08 31 / Y Y Y Y 2017										
City SAN DIEGO	State CA	Zip Code 92130-5616	Transaction ID : PR2575719847039										
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) VP SIs Acct Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 789.40	P/R Deduction (\$78.94 Bi-Weekly)										
Full Name of Individual (Last, First, Middle II C. CREED, JOHN E, , ,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 6813 67TH STREET NE			08 / D D / Y Y Y Y 2017										
City ALBERTVILLE	State MN	Zip Code 55301-4643	Transaction ID : PR2575720547039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		31.72										
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 ▼ 222.04	P/R Deduction (\$15.86 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			574.20										
TOTAL This Period (last page this line numbe	r only)												

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

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PAGE 159 OF

	EIVIZED RECEIPTS			etailed Summary Page	×	11a		1	1b		11c	12	2						
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	y information copied from such Reports and State for commercial purposes, other than using the na																		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Unit	edHealth Group PA	C)														
Α.	Full Name of Individual (Last, First, Middle Initial) CRANDALL, KIM M, , ,	or Full O	rgan	ization Name		Date of	f Re	ece	eipt										
	Mailing Address 6016 BRIGIDS CLOSE DRIVE					м м 08	/	ſ	D 31	D	/ Y	201	Y Y 7						
	City	State		Zip Code		Trans	acti	ior	n ID :	P	R25757	31247	7039						
	DUBLIN	ОН		43017-3428	_ /	Amoun	t of	Ea	ach F	Rec	eipt th	s Per	iod						
	FEC ID number of contributing federal political committee.	ů l							28.08										
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Clin Ops	Memo Item														
	Receipt For:	ggregate	Year	-to-Date 🔻															
	Primary General Other (specify) ▼		-	238.68	P	/R Ded	uctio	on	(\$14	.04	I Bi-We	ekly)							
B.	Full Name of Individual (Last, First, Middle Initial) HELLAND, ROBYN L, , ,	or Full O	rgan	ization Name		Date of	f Re	ece	eipt										
	Mailing Address 9089 PARTRIDGE RD		08 / 31 / 2017 Transaction ID : PR2575733847039																
	City	State		Zip Code		Trans	acti	ior	ו ID :	PF	R25757	33847	039						
	MINNETRISTA	MN		55375-4513	_ '	Amoun	t of	Ea	ach F	Rec	eipt th	s Per	iod						
	FEC ID number of contributing federal political committee.	С				3													
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Mgmt		М	emo	o It	tem										
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year	-to-Date ▼ 238.68	P	/R Ded	uctic	on	(\$14	.04	Bi-We	ekly)							
C.	Full Name of Individual (Last, First, Middle Initial) OLSON, KRISTIN M, , ,	or Full O	rgan	ization Name		Date of	f Re	ece	eipt										
	Mailing Address 5901 TRACY AVENUE					M M 08	1	l	D 31		/ Y	2017							
	City	State MN		Zip Code							R25757								
	EDINA	IVIIN		55436-2516		Amoun	t of	Ea	ach F	Rec	eipt th	s Per	iod						
	FEC ID number of contributing federal political committee.	С						,			y		30.40)					
	Name of Employer (for Individual) United HealthCare Services Inc		upati Comp	on (for Individual) Ili		M	emo	o li	tem										
	Receipt For: A Primary General Other (specify)	1		-to-Date ▼ 228.00	 P	P/R Ded	luctio	on	(\$15	5.20) Bi-We	ekly)							
s	UBTOTAL of Receipts This Page (optional)			••••••								5	36.56	6					
Т	OTAL This Period (last page this line number only	/)						,			-		-						

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

FOR LINE NUMBER:

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PAGE 160 OF

				Detailed Summary Page	×	11a 13		11 14		_	1c	12 16	17						
	y information copied from such Reports and Stat for commercial purposes, other than using the na					or the		pos	se of s	solic		contribut	ions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated										54011								
<u> </u>	Full Name of Individual (Last, First, Middle Initial KNORR, MOLLY LOUISE, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	ipt										
	Mailing Address 1144 PROSPECT AVENUE	1		1		м м 08	1	Ľ	D D 31	/	Y	ү ү 2017	Y						
	City HARTFORD	State CT		Zip Code 06105-1124								3544703 s Period	9						
	FEC ID number of contributing federal political committee.	С			76.92														
	Name of Employer (for Individual) United HealthCare Services Inc	ted HealthCare Services Inc SVP Risk Adjustment							Memo Item										
	Receipt For: Primary General Other (specify) ▼	82 P/R Deduction (\$38.46 Bi-Weekly)																	
в.	Full Name of Individual (Last, First, Middle Initial GROSKLAGS, JEFFREY, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	ipt										
	Mailing Address 3233 TIMBERWOLF CIRCLE	7. 0.4	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																
	City PRIOR LAKE	Ŭ l						Transaction ID : PR2575735747039 Amount of Each Receipt this Period 192.30											
	FEC ID number of contributing federal political committee.																		
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	•	tion (for Individual)		Me	emo	o Ite	em										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1634.55	P/	R Dedu	uctic	on	(\$96.1	15 B	i-Wee	ekly)							
	Full Name of Individual (Last, First, Middle Initial KRAL, JESSICA C, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	ipt										
	Mailing Address 4358 COOLIDGE AVE					08	/	L	^D 31	/	Y	2017 ^Y							
	City SAINT LOUIS PARK	State MN		Zip Code 55424-1020	<i>F</i>							3614703 s Period	9						
	FEC ID number of contributing federal political committee.	С						y			9	76.9	92						
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP I	•	tion (for Individual)		Me	emo	o It	em										
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 653.82	P	/R Ded	uctio	on	(\$38.4	46 E	3i-We	ekly)							
s	UBTOTAL of Receipts This Page (optional)			•				y			,	346.′	4						
Т	OTAL This Period (last page this line number on	ly)		•				-											

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FOR LINE NUMBER:

PAGE 161 OF

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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	ated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle MURRAY, THOMAS M, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 10 CIRCLE WEST			08 / D D / Y Y Y Y 2017										
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736547039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		434.78										
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3043.46	P/R Deduction (\$217.39 Bi-Weekly)										
Full Name of Individual (Last, First, Middle CESARETTI, GINA L, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5020 CIRCLE DOWN			08 / D D / Y Y Y Y 2017										
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739047039 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) buty Gen Counsel Mgr	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. STRICKLAND, JULIE M, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3207 SUNNYWOOD DRIV			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 Y Y Y Y										
City FULLERTON	State CA	Zip Code 92835-1858	Transaction ID : PR2575740947039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		28.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Advrtsng	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional))		847.38										
TOTAL This Period (last page this line num	per only)												

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

FOR LINE NUMBER:

(check only one)

PAGE 162 OF

ITEIVIZED RECEIPTS				Detailed Summary Page	×	11a		11b		11c		12				
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	y information copied from such Reports and S for commercial purposes, other than using the															
	NAME OF COMMITTEE (In Full)															
\sum	UnitedHealth Group Incorporate	ed PAC (l	Uni	itedHealth Group PA	NC)											
A.	Full Name of Individual (Last, First, Middle In WAITE, STEPHANIE M, , ,	itial) or Full C	Orgai	nization Name		Date of Receipt										
	Mailing Address 2501 S HORIZON DR					08	1	D 3		/ Y) 17	Y			
	City	State		Zip Code		Trans	acti	ion ID	: F	PR25757	7432	24703	9			
	APPLETON	WI		54915-5851		Amoun	t of	Each	Re	eceipt th	is F	Period				
	FEC ID number of contributing federal political committee.	С			28.08											
	Name of Employer (for Individual) United HealthCare Services Inc		upat d M	tion (for Individual) gr	Memo Item											
	Receipt For:	Aggregate	Yea	ur-to-Date ▼												
	Primary General Other (specify) ▼		-	238.68		P/R Ded	uctio	on (\$1	4.0)4 Bi-We	ekly	()				
	Full Name of Individual (Last, First, Middle In PORTZ, THOMAS G, , ,	itial) or Full C	Drgai	nization Name		Date of	f Re	eceipt								
	Mailing Address 2119 SHERIDAN HILLS RD		08 / D D / Y Y Y Y Y 2017													
	City	State		Zip Code		Trans	acti	on ID	: F	PR25757	445	4703)			
	WAYZATA	MN		55391-2327		Amoun	t of	Each	Re	eceipt th	is F	eriod				
	FEC ID number of contributing federal political committee.	С				-		- 15-		28.0)8					
	Name of Employer (for Individual) United HealthCare Services Inc		cupa Fin	tion (for Individual)		М	emc	ltem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 238.68	P	/R Ded	uctio	on (\$1	4.0	94 Bi-We	ekly	/)				
с.	Full Name of Individual (Last, First, Middle In LAMOINE, DAVID D, , ,	itial) or Full C	Drgai	nization Name		Date of	f Re	eceipt								
	Mailing Address 3607 W 89TH ST	1		1		08	1	D 3		/ Y)17 [°]	Y			
	City	State MN		Zip Code		Trans	act	ion ID):F	PR2575	755 [,]	14703	9			
	BLOOMINGTON	IVIIN		55431-1826	_	Amoun	t of	Each	Re	eceipt th	is F	eriod				
	FEC ID number of contributing federal political committee.	С				<u> </u>		,		9		95.2	22			
	Name of Employer (for Individual)	Occ	upat	tion (for Individual)		Μ	emo	b Item								
	Optum Services, Inc	Dir F	Proj	Mgmt												
	Receipt For:	Aggregate	Yea	ur-to-Date ▼												
	Primary General Other (specify)		- y -	571.32		P/R Ded	lucti	on (\$4	7.6	61 Bi-We	eekl	y)				
	UBTOTAL of Receipts This Page (optional)				- I			,		5		151.3	8			

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 163 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			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middl DOMER, HERBERT R, , , Mailing Address 2715 IONE COURT	e Initial) or Full C	rganization Name	Date of Receipt										
City	State	Zip Code	08 31 2017 Transaction ID : PR2575756047039										
COLUMBUS	OH	43235-2810	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		28.00										
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 ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middl B. FULTON, RYAN CHRISTOPHE		organization Name	Date of Receipt										
Mailing Address 805 LANEWOOD LANE	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												
City PLYMOUTH	State MN	Zip Code 55447-4347	Transaction ID : PR2575756947039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		34.76										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Prod	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. LOWE, JANET G, , ,	e Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 2439 BROADMONT DRI	VE		08 / D D / Y Y Y Y 2017										
City CHESTERFIELD	State MO	Zip Code 63017-7801	Transaction ID : PR2575758647039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		28.08										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acct Mgmt TPA	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	l)		90.84										
TOTAL This Period (last page this line num	ber only)	••••••											

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

FOR LINE NUMBER:

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PAGE 164 OF

		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 t																				
NAME OF COMMITTEE (In Full)																				
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	łC)																	
Full Name of Individual (Last, First, Middle EKLO, BENJAMIN N, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt														
Mailing Address 3942 CAMPELLO CURVE				м м 08	1	3 [,]		/ Y	ү ү 2017	Y										
City	State	Zip Code		Trans	acti	ion ID	: P	R25757	76184703	9										
CHASKA	MN	55318-4639	A	Amount	of	Each	Re	ceipt th	is Period											
FEC ID number of contributing federal political committee.	cal committee.						666.66													
Name of Employer (for Individual) United HealthCare Services Inc							Memo Item													
Receipt For:	Aggregate	Year-to-Date ▼	—																	
Primary General Other (specify) ▼	Primary General General							P/R Deduction (\$333.33 Bi-Weekly)												
Full Name of Individual (Last, First, Middle CUNNINGHAM, MICHAEL J, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt														
Mailing Address 50 SOUTH 16TH STREET UNIT 4706		08 / D D / Y Y Y Y Y 2017																		
	State	Zip Code							67847039	}										
PHILADELPHIA	PA	19102-2534	A	\mount	of	Each	Re	ceipt th	is Period											
FEC ID number of contributing federal political committee.	С							-	30.7	76										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O NA Acct		Me	əmo	b Item														
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 261.46	P/	R Dedu	uctic	วท (\$1:	5.38	8 Bi-We	ekly)											
Full Name of Individual (Last, First, Middle MONTOYA, MATTHEW D, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt														
Mailing Address 12370 BRADFORD DR				M M 08	/	D 3	1		2017 [°]											
City PARKER	State CO	Zip Code 80134-3609							77764703	9										
		00104-0009	A	\mount	of	Each	Re	ceipt th	is Period											
FEC ID number of contributing federal political committee.	C					,		,	28.0	00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt		Me	emc	o Item														
Receipt For:		Year-to-Date ▼	\neg																	
Primary General Other (specify)	238.00] P/	/R Ded	uctio	on (\$1	4.0	0 Bi-We	ekly)												
SUBTOTAL of Receipts This Page (optional).			,		-		_		725.4	2										
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Use separate schedule(s)

FOR LINE NUMBER:

PAGE 165 OF

17			Use separate schedule(s)	(check only one)										
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12										
	y information copied from such Reports and Stat													
or	for commercial purposes, other than using the n	ame and a	address of any political committee	to solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia ROEPKE, KRISTIN K, , ,	l) or Full O	Organization Name	Date of Receipt										
	Mailing Address 11828 200TH STREET	1		08 31 / Y Y Y Y 2017										
	City SILVER LAKE	State MN	Zip Code 55381-6069	Transaction ID : PR2575777747039 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		28.08										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir H	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Initia MULLINS, CHRISTOPHER J, , ,	l) or Full O	Organization Name	Date of Receipt										
	Mailing Address 15560 SMITHFIELD PLACE		08 31 2017											
	City CENTREVILLE	State VA	Zip Code 20120-4901	Transaction ID : PR2575778747039										
	FEC ID number of contributing		20120-4901	Amount of Each Receipt this Period										
	federal political committee.	С		38.46										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO	Memo Item										
	Receipt For:	Aggregate	Year-to-Date V											
	Other (specify) ▼		, 2826.91	P/R Deduction (\$19.23 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia MORRIS, CAROLYN T, , ,	l) or Full O	Organization Name	Date of Receipt										
	Mailing Address PO BOX 1744			08 / D D / Y Y Y Y 08 31 2017										
	City SHIPROCK	State NM	Zip Code 87420-1744	Transaction ID : PR2575780947039 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) rt Affs Assc Dir	Memo Item										
	Receipt For: Primary General Other (specify)	Primary General General												
s	UBTOTAL of Receipts This Page (optional)		•	94.70										
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Use separate schedule(s)

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PAGE 166 OF

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		Detailed Summary Page											
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NAME OF COMMITTEE (In Full)													
angle UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P/	4C)										
Full Name of Individual (Last, First, Middle MADDUX, SUSAN V, , ,	Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 16426 FARMERS MILL LA	NE		08 / D D / Y Y Y Y 08 31 2017										
City	State	Zip Code	Transaction ID : PR2575783847039										
CHESTERFIELD	MO	63005-4549	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		28.08										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Pharm Ops	Memo Item										
Receipt For:	I	•											
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
			1										
Full Name of Individual (Last, First, Middle B. MAURER, CARRIE J, , ,	Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 2899 EDGEWATER COVE	08 / D D / Y Y Y Y 2017												
City	State	Zip Code	Transaction ID : PR2575798147039										
WOODBURY	MN	55125-8705	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		432.22										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3054.87	P/R Deduction (\$216.11 Bi-Weekly)										
Full Name of Individual (Last, First, Middle SANKEN, SARA MARIE, , ,	Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 3018 ASPEN LAKE DRIVE			08 31 2017										
City	State	Zip Code	Transaction ID : PR2575798547039										
BLAINE	MN	55449-7517	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		28.08										
Name of Employer (for Individual)	000	upation (for Individual)	Memo Item										
Optum Services, Inc		nan Capital Partner Mgr											
Receipt For:		Year-to-Date ▼											
Primary General Other (specify)		238.68	P/R Deduction (\$14.04 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			488.38										
SUBTOTAL of Receipts This Page (optional).													

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

FOR LINE NUMBER:

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PAGE 167 OF

			Detailed Summary Page	×	11a		11		11c		12								
	tion copied from such Reports and Sta							se of											
	ercial purposes, other than using the n	ame and a	ddress of any political committee	e to so	licit cor	ntrib	outio	ons fr	rom si	uch c	ommitte	90.							
\	F COMMITTEE (In Full) IHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)															
	e of Individual (Last, First, Middle Initia ACOSTA NICOLE, , ,	l) or Full O	rganization Name	[Date of	Re	ecei	pt											
Mailing A	ddress 910 MANILA ST				08	/		31	/		2017	Y							
City NASHVII		State TN	Zip Code		Trans	acti	ion	ID : I	PR257	75800	04703	•							
			37206-3437	_ /	Amount	of	Ea	ch Re	eceipt	this	Period								
	umber of contributing plitical committee.	С		125.00															
	Employer (for Individual) ealthCare Services Inc							Memo Item											
Receipt F		Aggregate	Year-to-Date ▼																
	nary General er (specify) ▼		437.50	P/	/R Ded	uctio	on	(\$62.	50 Bi-'	Week	ly)								
	e of Individual (Last, First, Middle Initia E, CAROL L, , ,	l) or Full O	rganization Name		Date of	Re	ecei	pt											
Mailing A	ddress 10415 HOMEWARD HILLS ROA	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																	
City		State	Zip Code)							
EDEN PF		MN	55347-4900		Amount	of	Ea	ch Re	eceipt	this	Period								
	number of contributing plitical committee.	inder of contributing C						714.28											
	Employer (for Individual) ervices, Inc		upation (for Individual) Gen Mgmt		Me	emc	o Ite	əm											
	For: nary General er (specify) ▼	Aggregate	Year-to-Date ▼ 1785.70	P/	/R Dedi	uctio	on ((\$357	.14 Bi	-Wee	kly)								
	e of Individual (Last, First, Middle Initia PE, ADAM C, , ,	l) or Full O	rganization Name		Date of	Re	ecei	pt											
	ddress 13932 UTAH AVE S				08	/		31	1		017	Y							
City SAVAGE		State MN	Zip Code								624703	Ð							
			55378-2159	_ /	Amount	of	Ea	ch Re	eceipt	this	Period								
	number of contributing plitical committee.	С				_	y		. ,		384.6	60							
	Employer (for Individual) ealthCare Services Inc							em											
Receipt F	For:	Aggregate	Year-to-Date 🔻																
	nary General er (specify)		3269.10	P.	/R Ded	ucti	ion	(\$192	2.30 B	i-Wee	ekly)								
SUBTOTAL	of Receipts This Page (optional)		•	.			,		.,		1223.8	8							
TOTAL Thi	s Period (last page this line number or	ıly)	••••••				-		,		1.4								

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PAGE 168 OF

		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	ted PAC (I	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle LUKENBILL, JAMES F, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1608 SIENNA DR			Mom / 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 CEDAR PARK	State TX	Zip Code 78613-4061											
FEC ID number of contributing federal political committee.	С		34.76										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) IT Proj Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)											
Full Name of Individual (Last, First, Middle B. RUSSELL, LAURIE ERIN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3108 SONIA DRIVE			08 / D D / Y Y Y Y 08 31 2017										
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2575812147039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		78.00										
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 ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. MECKEY, SAMUEL JAMES, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1828 WYNDAM DRIVE			08 / D D / Y Y Y Y Y 2017										
City SHAKOPEE	State MN	Zip Code 55379-5437	Transaction ID : PR2575814547039 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) Ops	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			497.36										
TOTAL This Period (last page this line number	er only)												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 169 OF

		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<u> </u>				
Any information copied from such Reports and or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle I SEXTON, ELLEN R, , ,	nitial) or Full C	rganization Name	C	Date of	Re	ceipt							
Mailing Address 14750 CRESTWOOD COUR	RT		08 31 2017										
City ELM GROVE	StateZip CodeWI53122-1603			Transaction ID : PR2575823247039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С					,		504.	80				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2572.05	P/	R Dedu	uctio	on (\$252	2.40 Bi-W	Veekly)					
Full Name of Individual (Last, First, Middle I MCNATT, RICHARD ELLIOTT, , ,	nitial) or Full C	rganization Name		Date of	Re	ceipt							
Mailing Address 1120 KENSINGTON COUR		State Zip Code					/ Y	2017	Y				
City ALPHARETTA	State GA				-		32494703	9					
FEC ID number of contributing federal political committee.	C		amount	OI			his Period 76.	92					
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP		Me	emo	Item								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle II C. BRADLEY, JOEL F, , ,	nitial) or Full C	rganization Name		Date of	Re	ceipt							
Mailing Address 300 WHITE MOSS PLACE				м м 08	/	31) / Y	2017	Y				
City FRANKLIN	State TN	Zip Code 37064-8628	A					82584703 nis Period	9				
FEC ID number of contributing federal political committee.	С					,	, y	36.	92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) led Dir		Me	emo	Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 313.82]	R Dedi	uctio	on (\$18	.46 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional)						,	. ,	618.	64				
TOTAL This Period (last page this line numbe	r only)						- 40						

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

FOR LINE NUMBER:

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PAGE 170 OF

		Detailed Summary Page	X 11a	11	1b	11c	12						
			13	14		15	16	17					
Any information copied from such Reports a or for commercial purposes, other than usin													
NAME OF COMMITTEE (In Full)		Initad Haalth Oracin D											
VinitedHealth Group Incorpo													
Full Name of Individual (Last, First, Midd A. KAUFMAN, PHILIP R, , ,	lle Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 1680 NORTH FARM RC	DAD												
City	State	Zip Code	Transa	Transaction ID : PR2575829847039									
ORONO	MN	55356-9309	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		421.24										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Me	emo It	tem								
Receipt For:	Aggregate	Year-to-Date V											
Other (specify) ▼		3104.34	P/R Dedu	P/R Deduction (\$210.62 Bi-Weekly)									
			-										
Full Name of Individual (Last, First, Midd B. HUNTLEY, MICHELLE M, , ,	ile Initial) or Full C	organization Name	Date of	Rece	eipt								
Mailing Address 19503 HARMONY AVE	Mailing Address 19503 HARMONY AVE												
City	Zip Code	Transaction ID : PR2575832047039											
ROGERS	MN	55374-4843	Amount	of Ea	ach Ree	ceipt th	is Period						
FEC ID number of contributing federal political committee.	С		207.36										
Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) puty Gen Counsel	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$103.68 Bi-Weekly)										
Primary General Other (specify) ▼		2330.10											
			-										
Full Name of Individual (Last, First, Midd	,	nganization Name	Date of	Rece	eipt								
Mailing Address 8206 WEST 16TH STRE	ET		м м 08	/	D D D 31	/ Y	2017	Y					
City	State	Zip Code	Transa	actior	n ID : P	R2575	83554703	9					
SAINT LOUIS PARK	MN	55426-1904	Amount	of Ea	ach Reo	ceipt th	is Period						
FEC ID number of contributing federal political committee.	С			,		,	28.	08					
Name of Employer (for Individual)	Occ	upation (for Individual)	Me	emo It	tem								
Optum Services, Inc		Assc Gen Counsel											
Receipt For:	Aggregate	Year-to-Date V											
Other (specify)		238.68	P/R Dedu	uction	ı (\$14.04	4 Bi-We	eekly)						
					_	_	656.	68					
SUBTOTAL of Receipts This Page (option	al)				-	y	000.	00					
TOTAL This Period (last page this line nur	mber only)												

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FOR LINE NUMBER:

PAGE 171 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			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle A. JERDE, MARY J, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 304 EAST VERA LANE			08 31 2017									
City TEMPE	State AZ	Zip Code 85284-4036	Transaction ID : PR2575837447039									
		05204-4050	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		95.22									
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 ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. MANDELL, WILLIAM, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 720 MISSION HILL WAY			08 31 2017									
City	State	Zip Code	Transaction ID : PR2575837847039									
COLORADO SPRINGS	CO	80921-2672	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		238.68	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. WILLIAMS, DONNA LEE, , ,	Initial) or Full C	Prganization Name	Date of Receipt									
Mailing Address 5526 55TH AVENUE			08 31 2017									
City VERO BEACH	State FL	Zip Code 32967-2460	Transaction ID : PR2575838347039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		34.76									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Prov Install	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			158.06									
TOTAL This Period (last page this line number	er only)											

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 172 OF

				or each category of the Detailed Summary Page	×	11a 13		11b		11c	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose		oliciting	contribu	tions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) BEESON, MARY JANE, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot						
	Mailing Address 204 BLUE INDIGO CT				08 / D D / Y Y Y Y Y 2017										
	City PONTE VEDRA BEACH	State FL		Zip Code 32082-6543	Transaction ID : PR2575839547039 Amount of Each Receipt this Period 192.30										
		C		32002-0343											
	Name of Employer (for Individual)	Осси	upat	ion (for Individual)	Memo Item										
	Optum Services, Inc	VP	Gen	Mgmt	_										
	Receipt For: A Primary General Other (specify) ▼	r-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)												
B.	Full Name of Individual (Last, First, Middle Initial) HARRISON, CHARLES M, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot						
	Mailing Address 10603 MILLET SEED HILL	08 31 / Y Y Y Y Y 2017													
	City COLUMBIA	State MD		Zip Code 21044-4150				-			3 4034703 is Period				
	FEC ID number of contributing federal political committee.	С		28.08											
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Med	Memo Item												
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) WILLIAMS, DALE, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot						
	Mailing Address 121 CHOCTAW CIRCLE					м м 08	/	D	31	/ Y	үүү 2017	Y			
	City CHANHASSEN	State MN		Zip Code 55317-9505							84924703				
		_		55517-9505	_	mount	of	Eac	h Re	ceipt th	is Period	_			
	FEC ID number of contributing federal political committee.	C			H		_	y		IJ.	28.	08			
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		Me	emo) Ite	m						
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 238.68	P/	R Ded	uctio	on (S	\$14.04	4 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•••••							248.	46			
т	OTAL This Period (last page this line number only	/)		•	Ī			,		-					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 173 OF

		Use separate schedule(s)	(check only one)										
TEMIZED 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 (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle BOROCH, BLAIR WILLIAM, , ,	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address 800 BELFRY DRIVE			Mom / D = D / Y = Y = Y Y 08 31 2017 2017 Transaction ID : PR2575849947039 Amount of Each Receipt this Period										
City BLUE BELL	State PA	Zip Code 19422-1210											
FEC ID number of contributing federal political committee.	С		36.92										
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 ▼ 313.82	P/R Deduction (\$18.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. GOLDEN, WILLIAM J, , ,	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address 106 SOUND COURT			08 / D D / Y Y Y Y Y 2017										
City NORTHPORT	State NY	Zip Code 11768-3527	Transaction ID : PR2575859347039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.30										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item										
Receipt For:	Aggregate	Year-to-Date V											
Primary General Other (specify) ▼		4134.55	P/R Deduction (\$96.15 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. COTTINGTON, NYLE BRENT, ,		rganization Name	Date of Receipt										
Mailing Address 6630 EMPIRE COURT			08 / D D / Y Y Y Y Y 2017										
City MAPLE GROVE	State MN	Zip Code 55311-3433	Transaction ID : PR2575865347039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
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 ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			306.14										
TOTAL This Period (last page this line number	er only)												

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

FOR LINE NUMBER:

(check only one)

PAGE 174 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a		11	b		11c	1c 12			
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	y information copied from such Reports and State for commercial purposes, other than using the na														
\backslash	NAME OF COMMITTEE (In Full)				• `										
$\Big)$	UnitedHealth Group Incorporated	PAC (l	Jni	itedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) PEZHMAN, PAYMAN, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt						
	Mailing Address 3016 GROVELAND SCHOOL RC	DAD			08 31 2017										
	City	State		Zip Code	Transaction ID : PR2575883547039										
	WAYZATA	MN		55391-2816	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) gment Gen Counsel		Me	emo) Ite	em						
	Poppint For:			ar-to-Date ▼	-										
	Primary General Other (specify) ▼	1634.55	P/	'R Dedi	uctic	on	(\$96.	15	Bi-We	ekly)					
В.	Full Name of Individual (Last, First, Middle Initial) LANGAN, PATRICK J, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt						
	Mailing Address 405 MEADOW LANE		м м 08	1	[31]	/ Y	201						
	City	State		Zip Code		Trans	acti	on	ID : I	PR:	25758	8504	7039	_	
	BENSON	MN		56215-1033	A	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				194.00							D		
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	tion (for Individual)	Memo Item											
	Receipt For:	Aggregate	P/R Deduction (\$97.00 Bi-Weekly)												
	Other (specify) V		,	1649.00		N Deut		, ווכ	(497.0	501	DI-Wee	SKIY)			
С.	Full Name of Individual (Last, First, Middle Initial) PLOURDE, ROBERT W, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt						
	Mailing Address 3551 GUNSTON LANE			1		м м 08	1	Ľ	31]	/ Y	Y 201			
	City	State		Zip Code				-			25758			_	
	WOODBURY	MN		55129-4918	/	Amount	of	Ea	ch Re	ece	eipt this	s Pei	riod		
	FEC ID number of contributing federal political committee.	С				_		,			g		28.0	3	
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I		tion (for Individual)		Me	emo	o Ite	em						
	Respiret For:	I		or to Data V	-										
	Primary General	nggregatë	rea	ur-to-Date ▼	P	/R Ded	uctio	on	(\$14.	04	Bi-We	eklv)			
	Other (specify)		-	238.68	P/R Deduction (\$14.04 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•				,		l	, ,	4	14.38	3	
т	OTAL This Period (last page this line number onl	y)		•				,		1	- J		-		

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 175 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 usin			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	NC)								
Full Name of Individual (Last, First, Mide A. RANDALL, RHONDA L, , ,	-	organization Name	Date of Receipt								
Mailing Address 48 INTERLAKEN ROAD	State	Zip Code	08 / 31 2017 Transaction ID : PR2575889647039								
ORLANDO	FL	32804-3418	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		36.06								
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 ▼ 208.43	P/R Deduction (\$18.03 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. JENSEN PFIEFFER, KIM M, , ,		organization Name	Date of Receipt								
Mailing Address 9449 ASPEN RD	08 / D D / Y Y Y Y 2017										
City LAKEVILLE	State MN	Zip Code 55044-8148	Transaction ID : PR2575929747039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		95.22								
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 ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)								
Full Name of Individual (Last, First, Mide MCGOLDRICK, CHRISTOPH		organization Name	Date of Receipt								
Mailing Address 48 MOUNTAIN TERRA			08 / D D / Y Y Y Y 2017								
City WEST HARTFORD	State CT	Zip Code 06107-1533	Transaction ID : PR2575930447039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs & Bus Dev	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		159.36								
TOTAL This Period (last page this line nu	mber only)	•									

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

FOR LINE NUMBER:

(check only one)

PAGE 176 OF

			for each category of the	≭ 11a 11b 11c 12									
			Detailed Summary Page										
	y information copied from such Reports and State for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group P/	AC)									
Α.	Full Name of Individual (Last, First, Middle Initial) MEDEIROS, MICHAEL W, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 7112 LANGMUIR DRIVE			08 31 2017									
	City	State	Zip Code	Transaction ID : PR2575930647039									
	MCKINNEY	ТХ	75071-4606	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									
		ggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		663.00	P/R Deduction (\$39.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) ZITZER, CHRISTOPHER C, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 2848 FRANCE AVE S	08 / D D / Y Y Y Y Y 2017											
	City ST LOUIS PARK	State MN	Zip Code 55416-4204	Transaction ID : PR2575933347039									
			55410-4204	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		88.56									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	agregate	Year-to-Date ▼ 601.56	P/R Deduction (\$44.28 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) MATTERA, RICHARD J, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 483 HIGHCROFT ROAD			08 / D D / Y Y Y Y 08 31 2017									
	City	State	Zip Code	Transaction ID : PR2575938447039									
	WAYZATA	MN	55391-1548	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual)		upation (for Individual)	Memo Item									
	Optum Services, Inc Receipt For:	1	Group Gen Counsel										
	Primary General	ggregate	Year-to-Date ▼	P/P Doduction (\$102.20 Di Maakka)									
	Other (specify)		3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			551.16									
т	OTAL This Period (last page this line number only	/)											

Use separate schedule(s)

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PAGE 177 OF

TEMIZED 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 the name and a		erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Ful UnitedHealth Group Ir	,	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, F A. STANDIG, LAUREN DANA		rganization Name	Date of Receipt									
Mailing Address 8660 FARLEY	WAY	Zip Code	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									
City FAIR OAKS	CA	95628-5352	Transaction ID : PR2575939847039									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
Name of Employer (for Individua United HealthCare Services Inc	al) Occu Mec	upation (for Individual) I Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$15.00 Bi-Weekly)									
Full Name of Individual (Last, F CIRAFESI, JUDY L B, , ,		rganization Name	Date of Receipt									
Mailing Address 820 BETZ CRE	1	08 / D D / Y Y Y Y 2017										
City SAVANNAH	State GA	Zip Code 31410-2602	Transaction ID : PR2575953547039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	ů l											
Name of Employer (for Individua United HealthCare Services Inc	,	upation (for Individual) Ntwk Prgms	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, F KISCH, DAVID J, , ,	irst, Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7715 GIBRALT	ER TERRACE		08 / D D / Y Y Y Y 2017									
City APPLE VALLEY	State MN	Zip Code 55124-6124	Transaction ID : PR2575966047039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		30.00									
Name of Employer (for Individua Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)									
SUBTOTAL of Receipts This Pag	e (optional)		88.08									
TOTAL This Period (last page this												

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

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PAGE 178 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a		11		_	11c	12	ſ			
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	y information copied from such Reports and State for commercial purposes, other than using the na															
\backslash	NAME OF COMMITTEE (In Full)				\sim											
	UnitedHealth Group Incorporated	PAC (l	Uni	itedHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initial) PIACENTINI, KAREN K, , ,	or Full O	rgar	nization Name	Date of Receipt											
	Mailing Address 132 E 35TH ST APT 13G				08 31 2017											
	City	State		Zip Code	Transaction ID : PR2575968547039											
	NEW YORK	NY		10016-3892	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			909.08											
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Svc Acct Mgmt		M	emo) Ite	em							
	Peopint For:			ar-to-Date ▼	-											
	Primary General Other (specify) ▼	P	/R Ded	uctic	on	(\$454	1.54	l Bi-We	eekly)							
В.	Full Name of Individual (Last, First, Middle Initial) DICELLO, MARK A, , ,	or Full O	rgar	nization Name		Date of	Re	cei	ipt							
	Mailing Address 5360 ANACALA CT		м м 08	/	Γ	31	1	/ Y	2017		1					
	City	State		Zip Code		Trans	acti	on	ID : I	PR	25759	77947	039			
	WESTERVILLE	ОН		43082-8352	/	Amount	of	Ea	ich Re	ece	eipt this	s Peri	od			
	FEC ID number of contributing federal political committee.	С	28.00													
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	Memo Item													
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgar	nization Name		Date of	Re	cei	ipt							
	Mailing Address 422 COLVER ROAD					^M 08	/	Ľ	D D D]	/ Y	2017		1		
	City	State		Zip Code		Trans	acti	ion	ID :	PR	25759	79347	039			
	NAZARETH	PA		18064-8301	_ /	Amount	of	Ea	ich Re	ece	eipt this	s Peri	od			
	FEC ID number of contributing federal political committee.	С						,			,	3	34.76			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Mgr		tion (for Individual)		M	emo	o Ite	em							
	Receipt For:			ur-to-Date ▼												
	Primary General Other (specify)		-	208.56	P	/R Ded	uctio	on	(\$17.:	38	Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)											97	1.84			
	OTAL This Period (last page this line number only			r	ĺ			,			-		-			
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PAGE 179 OF

TEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
TEMIZED 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 to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorport	ated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle CHURCHILL, CAROL ANN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 230 BATTALION WAY			08 / D D / Y Y Y Y 08 31 / 2017									
City MOUNT JULIET	State TN	Zip Code 37122-6135	Transaction ID : PR2575988347039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
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 ▼ 224.00	P/R Deduction (\$0.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. GOLD, PAMELA J, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 8370 DYNASTY WAY		08 31 / Y Y Y Y										
City SALT LAKE CITY	State	Zip Code 84121-6089	Transaction ID : PR2575988647039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. SCHULTZ, STACY A, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4012 S XERXES AVENUE			08 / D D / Y Y Y Y 2017									
City MINNEAPOLIS	State MN	Zip Code 55410-1146	Transaction ID : PR2575990947039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			132.92									
TOTAL This Period (last page this line numb	per only)											

FOR LINE NUMBER:

PAGE 180 OF

	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17										
			person for the purpose of soliciting contributions are 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. SCHMITZ, BRADLEY J, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 506 CHALUPSKY AVE			08 31 2017										
City NEW PRAGUE	State MN	Zip Code 56071-6819	Transaction ID : PR2576005847039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		49.52										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 297.12	P/R Deduction (\$24.76 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. SQUARRELL SHABLIN, KAREN		rganization Name	Date of Receipt										
Mailing Address 1377 ROWLAND ROAD	08 31 / Y Y Y Y 08 31 2017												
City LANGHORNE	State PA	Zip Code 19047-3106	Transaction ID : PR2576017347039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		28.08										
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. SANN, DAVID, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 8326 ELKO DRIVE			08 / D D / Y Y Y Y 2017										
City ELLICOTT CITY	State MD	Zip Code 21043-6913	Transaction ID : PR2576026447039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		92.30										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 684.58	P/R Deduction (\$46.15 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	l)		169.90										
TOTAL This Period (last page this line num	ber only)												

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PAGE 181 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					
			person for the purpose of soliciting contributions te to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	ated PAC (l	JnitedHealth Group P	AC)					
 Full Name of Individual (Last, First, Middle SONERHOLM, KIMBERLY K, , , 	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7210 HEGGIE AVE			08 31 2017					
City LAS VEGAS	State NV	Zip Code 89131-3233	Transaction ID : PR2576033247039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) KA VP SIs Acct Mgt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. HOLZER SPARR, CYNTHIA, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 30 BRIDGHAM FARM RO			08 31 2017					
City RUMFORD	State RI	Zip Code 02916-1304	Transaction ID : PR2576034847039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄Ied Dir	P/R Deduction (\$14.04 Bi-Weekly)					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68						
Full Name of Individual (Last, First, Middle ADAMS, GAYLE Q, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 39 CANYON RIDGE DRIV	/E	Zip Code	08 31 2017					
City SANDIA PARK	NM	87047-8509	Transaction ID : PR2576040347039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategic Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)		248.38					
TOTAL This Period (last page this line num	per only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 182 OF

ITEMIZED REGEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middl BYRNES, CHRISTOPHER A, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 705 IRVING PLACE			08 31 / Y Y Y Y Y 08 31 2017								
City DULUTH	State MN	Zip Code	Transaction ID : PR2576042847039								
		55812-1419	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼	Primary General General										
Full Name of Individual (Last, First, Middl B. KANDALAFT, KEVIN P, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 4189 WINDSOR POINT F	PLACE		08 31 2017								
City	State	Zip Code	Transaction ID : PR2576043647039								
EL DORADO HILLS	CA	95762-3797	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
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 ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. STONE, LAURA L, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 4644 VENETO DRIVE			08 31 / Y Y Y Y 2017								
City	State	Zip Code	Transaction ID : PR2576045147039								
FRISCO	ТХ	75033-7135	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.00								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	Ntw	k Contract Dir									
Other (specify)		238.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)	•••••	297.22								
TOTAL This Period (last page this line num	ber only)	••••••									

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

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PAGE 183 OF

		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 a or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)	-										
> UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group PA	(C)								
Full Name of Individual (Last, First, Middl A. GROENENDAAL, MICHAEL R, , ,	e Initial) or Full C	rganization Name	Date of R	eceipt							
Mailing Address 1017 N EUCLID			08	/ D D / Y 31	2017	Y					
City	State	Zip Code		tion ID : PR2576							
OAK PARK	12	60302-1321	Amount of	f Each Receipt th	nis Period						
FEC ID number of contributing federal political committee.	C			-195	28.0	0					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Executive Compensation	Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	P/R Deduct	ion (\$14.00 Bi-W	eekly)						
Full Name of Individual (Last, First, Middl B. VINCENT, BRYAN M, , ,	e Initial) or Full C	rganization Name	Date of R	eceipt							
Mailing Address 4221 WEBSTER AVENU			08	/ D D / Y	2017	Ŷ					
City SAINT LOUIS PARK	State MN	Zip Code 55416-3143		tion ID : PR2576							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼		-							
Primary General Other (specify) ▼		238.68	P/R Deduct	ion (\$14.04 Bi-Wo	eekly)						
Full Name of Individual (Last, First, Middl C. MONICAL, KENT, , ,	e Initial) or Full C	rganization Name	Date of R	eceipt							
Mailing Address 9795 E PIEDRA DRIVE			M M 08	/ D D / Y 31	2017 [°]	Ŷ					
City SCOTTSDALE	State AZ	Zip Code 85255-9231		tion ID : PR2576 f Each Receipt th)					
FEC ID number of contributing federal political committee.	С				76.9	2					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prd	Mem	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82	P/R Deduct	tion (\$38.46 Bi-W	eekly)						
SUBTOTAL of Receipts This Page (optiona	l)			, <u>,</u>	133.0	0					
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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FOR LINE NUMBER:

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PAGE 184 OF

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	y information copied from such Reports and State							ро							
or	for commercial purposes, other than using the na														
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jnited	Health Group PA	vC)										
Α.	Full Name of Individual (Last, First, Middle Initial) REX, JOHN F, , ,) or Full O	Irganizati	on Name	_ [Date of	[:] Re	эсе	∍ipt						
	Mailing Address 503 HARRINGTON ROAD]	M M 08			31	<u>ן</u>	/ Y	ү ү 2017	Y		
	City	State		Code		Trans	acti	io	n ID :	PF	R25760	6004703	9		
	WAYZATA	MN	55	5391-1512	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						4		4	-	384.	60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (i G CFO	for Individual)		M	emo	o l'	tem						
	Primary General	Aggregate	Year-to-l			/R Ded	uctic	on	(\$192	2.3	30 Bi-W	eekly)			
_	Other (specify) V		- J	3269.10				_		_					
B.	Full Name of Individual (Last, First, Middle Initial) MCEWAN, JOSHUA M, , ,) or Full O	organizati	on Name		Date of	Re	ece	əipt						
	Mailing Address 4711 WEST 28TH STREET				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										
	City SAINT LOUIS PARK											8574703	-		
	FEC ID number of contributing	C				Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP ⁻	•	(for Individual)		M	emo	o l	tem						
	Receipt For:	Aggregate	Year-to-l	Date V	 D/	P/R Deduction (\$88.46 Bi-Weekly)									
-	Other (specify) V		,	1203.82		P/R Deduction (\$88.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) DUDA, MICHAEL R, , ,) or Full O	Irganizati	on Name		Date of	[:] Re		∍ipt	_					
	Mailing Address 5208 RICHWOOD DRIVE					^M 08	1	ľ	D D D		/ Y	2017	Y		
	City EDINA	State MN		Code 436-2322								08994703			
	FFC ID number of contributing					moun	ιof	E	ach F	iec	eipt thi	is Period	_		
	federal political committee.	С				<u> </u>	-	9		-		192.	30		
	Name of Employer (for Individual) United HealthCare Services Inc						lemo	οI	Item						
	Receipt For:	Aggregate	Year-to-L	Date ▼		-						• -			
	Other (specify)			1634.55	P/R Deduction (\$96.15 Bi-Weekly)										
	UBTOTAL of Receipts This Page (optional)						_	-	_	=	-	753.	32		
3				>			+	,	+	ŧ	9				
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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PAGE 185 OF

	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 nar									
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)						
Α.	Full Name of Individual (Last, First, Middle Initial) HARBISON, CECILIA A, , ,	or Full O	rganization Name	Date of Receipt						
	Mailing Address 373 WHEATFIELD CIRCLE			08 / D D / Y Y Y Y Y 2017						
	City	State PA	Zip Code	Transaction ID : PR2576100147039						
	HATFIELD	Γ Α	19440-3089	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		34.76						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item						
	Dessint For:		Year-to-Date ▼	-						
	Primary General Other (specify) ▼	208.56	P/R Deduction (\$17.38 Bi-Weekly)							
В.	Full Name of Individual (Last, First, Middle Initial) DAHL, KEVIN J, , ,	or Full O	rganization Name	Date of Receipt						
	Mailing Address 4242 N CAPISTRANO DR APT 135	08 31 2017								
	City	Transaction ID : PR2576100247039								
	DALLAS	ТΧ	75287-4036	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item						
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name	Date of Receipt						
	Mailing Address 555 CANAL ST APT 1602			08 31 2017						
	City	State	Zip Code	Transaction ID : PR2576103147039						
	MANCHESTER	NH	03101-1523	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual)	upation (for Individual) ware Engineer Cnslt	Memo Item							
	Optum Services, Inc	_								
	Receipt For: A									
	Other (specify)		238.68	P/R Deduction (\$14.04 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			90.92						
т	OTAL This Period (last page this line number only	′)	•							

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 186 OF

	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)		darees of any pointear commute							
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle JOHNSON, DARRIN D, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11 BERTON COURT			08 31 / Y Y Y Y 08 31						
City MIDDLETOWN	State DE	Zip Code 19709-9932	Transaction ID : PR2576103747039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		457.86						
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 ▼ 2939.46	P/R Deduction (\$228.93 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. DIAMOND, TIFFANY D, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5 HARVEY DRIVE			08 31 / Y Y Y Y 2017						
City	State	Zip Code	Transaction ID : PR2576105547039						
GOFFSTOWN	NH	03045-2315	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		95.22						
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 ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. CASEY, TAMMY L, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 45 STEELE ROAD			08 / D D / Y Y Y Y 2017						
City NEW HARTFORD	State CT	Zip Code 06057-2621	Transaction ID : PR2576107347039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.08						
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			581.16						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 187 OF

			Use separate schedule(s)	(cł	(check only one)								
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page				11b	11c	12	<u> </u>			
	ny information copied from such Reports and S												
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to s	olicit co	ntrib	outions f	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 KIEWEL, NATHAN R, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 1137 PRAIRIE VIEW DR SW				08 31 2017								
	City HUTCHINSON	State MN	Zip Code 55350-6725	_					1754703 is Period	9			
	FEC ID number of contributing federal political committee.	С							28.0	00			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Apps Dev		Μ	emo	tem						
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 238.00				P/R Ded	ucti	on (\$14	.00 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Init KENT, CHRIS, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
Mailing Address 13273 CARLINGFORD LANE					08 / D D / Y Y Y Y 2017								
	City ROSEMOUNT	State MN	Zip Code 55068-6308	-					1904703)			
	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 ▼ 653.82		P/R Deduction (\$38.46 Bi-Weekly)								
<u>с</u> .	Full Name of Individual (Last, First, Middle Init SANCHEZ, VINCENT E, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 5025 BRANFORD COURT				M M 08	/	31		2017	Y			
	City DUBLIN	State CA	Zip Code 94568-7241						12694703 is Period	9			
	FEC ID number of contributing federal political committee.	Ŭ			34.76								
	Name of Employer (for Individual) United HealthCare Services Inc	Inited HealthCare Services Inc VP Gen Mgmt				Memo Item							
Receipt For: Aggregate Year-to-Date Primary General Other (specify) Other			Year-to-Date ▼ 208.56	1	P/R Ded	lucti	on (\$17	.38 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•					139.6	8			
T I	OTAL This Period (last page this line number	only)		- •	Γ.		-						

FOR LINE NUMBER:

PAGE 188 OF

	Use separate schedule(s)	(check only one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using t			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 A. KERAN, PATRICK M , , ,	Initial) or Full C	rganization Name	Date of Receipt	
Mailing Address 6631 108TH CT			08 31 2017	
City BROOKLYN PARK	State MN	Zip Code 55445-6503	Transaction ID : PR2576137847039 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		28.08	
Name of Employer (for Individual) Optum Services, Inc	Optum Services, Inc Dir IT			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)	
Full Name of Individual (Last, First, Middle B. BOADO, ANDREA M, , ,	Initial) or Full C	rganization Name	Date of Receipt	
Mailing Address 14924 PONDVIEW CIRCLE			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	
City WAYZATA	State MN	Zip Code 55391-2249	Transaction ID : PR2576144647039 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		454.54	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2727.24	P/R Deduction (\$227.27 Bi-Weekly)	
Full Name of Individual (Last, First, Middle) C. NELSON, STEVEN H, , ,	Initial) or Full C	rganization Name	Date of Receipt	
Mailing Address 640 LOCUST HILLS DRIVE			M - M / D - D / Y - Y - Y Y 08 31 2017	
City WAYZATA	State MN	Zip Code 55391-1973	Transaction ID : PR2576144847039 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		384.60	
Name of Employer (for Individual) United HealthCare Services Inc	HealthCare Services Inc EVP UHC CEO			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)	
SUBTOTAL of Receipts This Page (optional).			867.22	
TOTAL This Period (last page this line number	er only)			

FOR LINE NUMBER:

PAGE 189 OF

	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	ig the name and a								
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Midd A. FRIDNER, JOHN E, , ,	lle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 782 PENFIELD DR			08 31 2017						
City CAROL STREAM	State IL	Zip Code 60188-4738	Transaction ID : PR2576147547039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		78.00						
Name of Employer (for Individual) United HealthCare Services Inc									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 663.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd SCOTT III, GARLAND G, , ,	lle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8018 PERLETTE COUR			08 31 Y Y Y Y Y Y						
City KERNERSVILLE	State NC	Zip Code 27284-9957	Transaction ID : PR2576151047039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		500.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻	1						
Other (specify) ▼		2750.00	P/R Deduction (\$250.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. MYHRAN, LYNN M, , ,	lle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2280 FOX STREET	State	Zip Code	08 31 2017						
City ORONO	MN	55356-9652	Transaction ID : PR2576158447039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		416.66						
Name of Employer (for Individual) Optum Services, Inc	Occ Optu	Memo Item							
Receipt For: Primary General Other (specify)									
SUBTOTAL of Receipts This Page (optional	al)		994.66						
TOTAL This Period (last page this line nur	mber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 190 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 berson 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 BENSON, JEAN C, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 14951 HIGHLAND COUR	Г NE		08 31 Y Y Y Y 08 31 2017						
City PRIOR LAKE	State MN	Zip Code 55372-4109	Transaction ID : PR2576310947039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc	Occi VP	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. ELLIOTT III, THOMAS L, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1880 SUGARLOAF CLUB	DR		08 31 2017						
City DULUTH	State GA	Zip Code 30097-7451	Transaction ID : PR2576313347039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P CInt Relationship	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. KENIRY, DANIEL J, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5553 LITTLE FALLS ROA			08 / D D / Y Y Y Y 2017						
City ARLINGTON	State VA	Zip Code 22207-1525	Transaction ID : PR2577379347039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			961.50						
TOTAL This Period (last page this line numb	per only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 191 OF

	Use separate schedule(s)	(ch	(check only one)										
			for each category of the Detailed Summary Page		K 11a 13		11b	11c	12	47			
	y information copied from such Reports and Star for commercial purposes, other than using the n				for the		pose of		contribu				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia TIDMARSH, BRIAN J, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
Mailing Address 14425 NORTH 15TH STREET					08 31 2017								
	City PHOENIX	State AZ	Zip Code 85022-4454					PR25787 Receipt th					
United HealthCare Services Inc SCE							т. I.		29.	14			
			pation (for Individual) 2 NA Accts		Me	emc	Item						
			Year-to-Date ▼ 233.98	1	P/R Dedu	uctio	on (\$14.	.57 Bi-We	eekly)				
B.	Full Name of Individual (Last, First, Middle Initia LONG, PAUL NELSON, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
Mailing Address 12352 PRINCETON AVE					м м 08	/	31	/ Y	ү 2017	Y			
2	City EDEN PRAIRIE	State MN	Zip Code 55347-1936	-				PR25787					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 238.68]	P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia STRODE, KURT A, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 15 MIRA SEGURA				M M 08	1	31		2017 [°]				
	City RANCHO SANTA MARGARITA	State CA	Zip Code 92688-4113					PR2578					
Optum Services, Inc As					<u> </u>		,	, <u>,</u>	28.	84			
			Occupation (for Individual) Assc Gen Counsel					Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	rear-to-Date ▼ 245.14]	P/R Ded	ucti	on (\$14.	.42 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	. ,	86.	06			
т	OTAL This Period (last page this line number on	ly)		- •				т. Т.					

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PAGE 192 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 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Fu									
		JnitedHealth Group PA	AC)						
Full Name of Individual (Last, F ASNER, BARTLEY S, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 25 OFFSHOR	E		M = M / D = D / Y = Y = Y = Y Y 08 31 2017						
City NEWPORT BEACH	State CA	Zip Code 92657-2162	Transaction ID : PR2578819447039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			469.50						
Name of Employer (for Individu Optum Services, Inc	al) Occu CEC	Memo Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2887.20	P/R Deduction (\$234.75 Bi-Weekly)						
Full Name of Individual (Last, F B. HALTIWANGER, RACH		rganization Name	Date of Receipt						
Mailing Address 1668 KIRKWO			08 / D D / Y Y Y Y 2017						
City BRENTWOOD	State	Zip Code 37027-8678	Transaction ID : PR2578820247039						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individu United HealthCare Services Inc	,	upation (for Individual) Compli	Memo Item						
Receipt For:		Year-to-Date V	-						
Other (specify) ▼		231.85	P/R Deduction (\$14.79 Bi-Weekly)						
Full Name of Individual (Last, F C. DUFFEY, KRISTY O, ,		rganization Name	Date of Receipt						
Mailing Address 8906 WINGED	I		08 / D D / Y Y Y Y 2017						
City PASADENA	State MD	Zip Code 21122-6670	Transaction ID : PR2578823247039 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individu Optum Services, Inc		upation (for Individual) If Clin Off	Memo Item						
Receipt For: Primary General Other (specify)	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Pag	ge (optional)		883.68						
TOTAL This Period (last page thi	is line number only)								

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 193 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle A. CIAVOLA, LAURA, , , Mailing Address 1686 WILDFIRE LANE	e Initial) or Full C	organization Name	Date of Receipt									
City	State	Zip Code	08 31 2017 Transaction ID : PR2578824347039									
FRISCO	ТХ	75033-7325	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. BUSBEE, NATHANAEL, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 611 ORPINGTON RD			08 / D D / Y Y Y Y Y 2017									
City BALTIMORE	State MD	Zip Code 21229-2128	Transaction ID : PR2578826747039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. COHEN, JAY J, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 98 VISTA DEL SOL			08 / D D / Y Y Y Y 2017									
City LAGUNA BEACH	State CA	Zip Code 92651-6748	Transaction ID : PR2578829647039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual)) Med Grp Physn	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	l)		653.82									
TOTAL This Period (last page this line num	ber only)											

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

FOR LINE NUMBER:

PAGE 194 OF

	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			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)		, p									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle FARMER, RACHEL C, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1929 ALBIZIA COURT			08 31 2017								
City BATON ROUGE	State LA	Zip Code 70808-3973	Transaction ID : PR2595208347039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		126.92								
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 ▼ 928.82	P/R Deduction (\$63.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle LONIGRO, ANTHONY S, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 3186 WEST CANYON AVE			08 / D D / Y Y Y Y Y 2017								
City SAN DIEGO	State CA	Zip Code 92123-5426	Transaction ID : PR2595225847039								
	_	92123-3420	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		653.82	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. DUCAYET, JULIA S, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 5508 HARRIET AVE S			08 31 2017								
City MINNEAPOLIS	State MN	Zip Code 55419-1830	Transaction ID : PR2595232947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item								
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			231.92								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 195 OF

IT.	Use separate schedule(s)				(check only one)							
	EMIZED RECEIPTS		for each category of Detailed Summary		X 11a	11b	11c	12	 .			
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\overline{\langle}$	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	PAC (L	JnitedHealth G	roup PAC	C)							
Α.	Full Name of Individual (Last, First, Middle Initia SCOTT, WESTON PRICE, , ,	l) or Full Or	rganization Name		Date of	Receipt						
	Mailing Address 1050 LAKE CAROLYN PKWY APT 4349	1			08 31 / Y Y Y Y							
	City IRVING	State TX	Zip Code 75039-3999			of Each Re)			
	FEC ID number of contributing federal political committee.	С				- J -	- 45-	61.5	4			
	Name of Employer (for Individual) Optum Services, Inc	Occu Med	upation (for Individual) I Dir		Me	emo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5	23.09	P/R Dedu	uction (\$30.7	77 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia SHORT, MARIANNE D, , ,	l) or Full Or	rganization Name		Date of	Receipt						
	Mailing Address 2215 SUMMIT AVENUE				08	/ D D 31	/ Y	2017	Y			
	City SAINT PAUL	State MN	Zip Code 55105-1002			action ID : F						
	FEC ID number of contributing	_	33103-1002	_	Amount	of Each Re	eceipt th	is Period	_			
	federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Gen Counsel	Me	mo Item							
		Aggregate	Year-to-Date 🔻		P/R Deduction (\$192.30 Bi-Weekly)							
	Other (specify) ▼		32	269.10								
C.	Full Name of Individual (Last, First, Middle Initia PATRICK, ALLEN K, , ,	l) or Full Or	rganization Name		Date of	Receipt						
	Mailing Address 225 W ESCALONES	1			M M 08	/ D D 31	/ Y	2017	Y			
	City SAN CLEMENTE	State CA	Zip Code 92672-5102			of Each Re			•			
	FEC ID number of contributing federal political committee.	С				y	, <u>,</u>	28.0	8			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt		Me	emo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2	238.68	P/R Ded	uction (\$14.0	04 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)							474.2	2			
т	OTAL This Period (last page this line number on	ly)		····· •								

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

FOR LINE NUMBER:

PAGE 196 OF

	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	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle SWANSON, AMY N, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 621 SPARROW WAY			08 31 Y Y Y Y Y 2017								
City WADSWORTH	State OH	Zip Code 44281-7716	Transaction ID : PR2601140747039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify) \mathbf{v}	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MCBRIEN, ROBERT A, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 4 APPLETREE LANE	1-		08 / D D / Y Y Y Y Y 2017								
City CARLE PLACE	State NY	Zip Code 11514-1321	Transaction ID : PR2601148947039								
		11514-1321	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		238.68	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MOORE, DOUGLAS LEE, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 3900 BLACKJACK OAK LA	NE		08 31 2017								
City PLANO	State TX	Zip Code 75074-7790	Transaction ID : PR2601149647039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Hlthcare Econ	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			248.46								
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) _ _____

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PAGE 197 OF

EMIZED RECEIPTS Use separate schedule(s) for each category of the	(check												
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Any information copied from such Reports a or for commercial purposes, other than using			erson for t	he pu	irpose of	soliciting	contribu	tions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middl LESTER, SHAUNA MAHLE, , ,	e Initial) or Full O	rganization Name	Date	e of F	leceipt								
Mailing Address 1747 228TH PL SE				08 31 2017									
City SAMMAMISH	State WA	Zip Code 98075-7250					1 5474703 is Period	9					
FEC ID number of contributing federal political committee.	С					-	28.	08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt		Mem	no Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R D)educ	tion (\$14	.04 Bi-We	eekly)						
Full Name of Individual (Last, First, Middl B. PERERA, SUSAN ANN, , ,	e Initial) or Full O	rganization Name	Date	e of F	Receipt								
Mailing Address 1201 UNITY AVE N				м 8	/ D 1		2017	Y					
City GOLDEN VALLEY	State MN	Zip Code 55422-4735					6884703	9					
FEC ID number of contributing federal political committee.	С					Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc						Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Middl c. KAPROW, MARC GORDON,		rganization Name	Date	e of F	Receipt								
Mailing Address 5079 SW 89TH AVE)8	/ D 31		үүү 2017	Y					
City COOPER CITY	State FL	Zip Code 33328-3636				Receipt th	1 7904703 is Period	9					
FEC ID number of contributing federal political committee.	С				y	. ,	76.	92					
Name of Employer (for Individual) United HealthCare Services Inc	Occu	upation (for Individual) c Dir	P/R Deduction (\$38.46 Bi-Weekly)										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82											
SUBTOTAL of Receipts This Page (optiona	l)				y		133.0	08					
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:

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PAGE 198 OF

ITEMIZED RECEIPTS		Detailed Summary Page	✗ 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											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group PA	(C)								
Full Name of Individual (Last, First, Middle In HUDSON, JEFFREY A, , ,	itial) or Full C	Organization Name	Date of Receipt								
Mailing Address 1536 BREWSTER DRIVE			08 31 2017								
City	State	Zip Code	Transaction ID : PR2605703047039								
CARROLLTON	TX	75010-6444	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Ops	Memo Item								
Receipt For:		Year-to-Date ▼									
Primary General Other (specify) ▼		238.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In B. MCBEATH, ROBERT, , ,	itial) or Full C	Organization Name	Date of Receipt								
Mailing Address 2537 RED ARROW DRIVE			08 31 2017								
City	State	Zip Code	Transaction ID : PR2605708947039								
LAS VEGAS	NV	89135-1628	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		476.18								
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		cupation (for Individual) O Med Grp Physn	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2857.08	P/R Deduction (\$238.09 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In C. RICKS, RHONDA PARKER, , ,	itial) or Full C	Organization Name	Date of Receipt								
Mailing Address 5084 JERICHO ROAD			08 / D / Y Y Y Y 2017								
City	State	Zip Code	Transaction ID : PR2605733447039								
COLUMBIA	MD	21044-5409	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item								
Receipt For:		Year-to-Date ▼									
Other (specify)		261.46	P/R Deduction (\$15.38 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			534.94								
TOTAL This Period (last page this line number											

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 199 OF

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 Incorp	orated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Mid DAVIS, KELLY MARIE, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 905 N LEBANON ST			M M / 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 Y										
City	State	Zip Code	Transaction ID : PR2605734247039										
ARLINGTON	VA	22205-1433	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Dir	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		653.82	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Min B. FINLAY, CHRISTOPHER DAN	ddle Initial) or Full C /ID WY, , ,	rganization Name	Date of Receipt										
Mailing Address 3221 COLFAX AVE S			08 / D D / Y Y Y Y 2017										
City	State	Zip Code	Transaction ID : PR2605735147039										
MINNEAPOLIS	MN	55408-3555	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		30.40										
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 ▼ 228.00	P/R Deduction (\$15.20 Bi-Weekly)										
Full Name of Individual (Last, First, Mic C. MALONE, TRACY, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 900 S 22ND ST			08 / D D / Y Y Y Y 2017										
City	State VA	Zip Code	Transaction ID : PR2605736947039										
ARLINGTON	VA	22202-2625	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optic	nal)		491.92										
TOTAL This Period (last page this line n	umber only)	•											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 200 OF

		Use separate schedule(s)	(check c	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	47				
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 PA	AC)									
Full Name of Individual (Last, First, Middle I A. JAEGER, MICHELLE, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt							
Mailing Address 14506 MCGINTY ROAD W	EST		08 31 2017									
City WAYZATA	State MN	Zip Code 55391-2541					7 5394703 is Period	9				
FEC ID number of contributing federal political committee.	С				-y		30.4	10				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.00	P/R D	educt	ion (\$15.	.20 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I B. SMITH, LARRY, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt							
Mailing Address 1164 RUE CHINON			M 08		31	/ Y	2017	Ŷ				
City MANDEVILLE	State LA	Zip Code 70471-1213					60647039)				
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) c Dir Compli		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	I	Year-to-Date ▼ 326.91	P/R Deduction (\$19.23 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. WEISSEL, MICHAEL E, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt							
Mailing Address 99 HAGEN ROAD			O a		31) / Y	2017	Ŷ				
City NEWTON	State MA	Zip Code 02459-2731					34294703 is Period	9				
FEC ID number of contributing federal political committee.	С				y a		384.6	60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec		Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R D	educt	ion (\$19:	2.30 Bi-W	/eekly)					
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PAGE 201 OF

				each category of that ailed Summary Pag		×	11a		11b		11c	12	<u> </u>							
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NAME OF COMMIT	TEE (In Full) Group Incorporate	d PAC (l	United	dHealth Grou	up PA(C)														
A. SONSTEGARD,	NATHAN, , ,	(Last, First, Middle Initial) or Full Organization Name THAN, , ,										Date of Receipt								
Mailing Address 421	16 ZENITH AVE S	01-1-	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 Y Y Y Y																	
City MINNEAPOLIS		State MN		o Code 55410-1413		Transaction ID : PR2606844447039														
FEC ID number of c federal political com	0	С	Amount of Each Receipt this Period																	
Name of Employer (UHC International Se	,	Occ VP	•	(for Individual)		Me	emo	Ite	m											
Receipt For: Primary Other (specify)	General ▼	Aggregate	Year-to	-Date ▼ 238.6	68	- P/	/R Ded	uctic	on (S	\$14.0	4 Bi-We	ekly)								
	ual (Last, First, Middle Initi OHN MATTHEW, , ,	ial) or Full C	Organiza	tion Name		[Date of	Ree	ceip	ot										
UN	08 HARBOURSIDE DRIVE IT 403		08 / D D / Y Y Y Y 2017																	
City LONGBOAT KEY		State FL		-			-			4514703 is Period	9									
FEC ID number of c federal political com	0	С							,		-9	384.	60							
Name of Employer (United HealthCare Se		upation s M&V	(for Individual)			Me	emo	Ite	m											
Receipt For: Primary Other (specify)	General ▼	Aggregate Year-to-Date ▼ 3269.10							P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individ c. RAWLINSON,	ual (Last, First, Middle Initi DORIEN M, , ,	ial) or Full C	Organiza	tion Name		[Date of	Ree	ceip	ot										
	95 W RED ROCK DRIVE						^M 08	1	D	31	/ Y	2017	Y							
City LARKSPUR		State CO		o Code 0118-8413								85464703	9							
FEC ID number of c federal political com	0	С					THOUIIL		J			is Period 28.	08							
Name of Employer (United HealthCare S							Memo Item													
Receipt For: Primary Other (specify)	General	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)																	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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FOR LINE NUMBER:

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PAGE 202 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	-			11	H	_	11c	12	<u> </u>	
	y information copied from such Reports and Statem for commercial purposes, other than using the nam					the			se of	soli				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	PAC (U	InitedHealth Group P	AC)										
Α.	Full Name of Individual (Last, First, Middle Initial) c EYER, JAN V, , ,	or Full Org	ganization Name		Date of Receipt									
	Mailing Address 6241 CRESTBROOK DRIVE				08 / D D / Y Y Y Y Y 2017									
	5	State CO	Zip Code 80465-2225									575470		
	FEC ID number of contributing federal political committee.	_			Amo	Sunt	t of	Ea	ich R	lecei	ipt thi	s Peric 28	d 3.08	
	Name of Employer (for Individual) Optum Services, Inc	Occuj Exec	pation (for Individual) Dir			M	emc	o Ite	em					
	Receipt For: Ag Primary General Other (specify) ▼	gregate Y	Year-to-Date ▼ 238.68] ^P	9/R [Ded	luctio	on	(\$14.	.04 E	3i-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initial) c	or Full Org	ganization Name		Date	e of	f Re	ecei	ipt					
	Mailing Address 706 SUE BARNETT					™ 08	1	Ľ	D D 31	1	Y	y y 2017	Y	
	5	dividual) Occupation (for Individual)						-				030470 s Peric		
	FEC ID number of contributing federal political committee.							-			- J -	10	0.00	
	Name of Employer (for Individual) United HealthCare Services Inc							o Ite	em					
	Receipt For: Ag Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00						P/R Deduction (\$50.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial) c MARGRITZ, CYNTHIA ANN, , ,	or Full Org	ganization Name		Dat	e of	f Re	ecei	ipt					
	Mailing Address 16702 L STREET				(08 [™]		L	D D 31			y 2017		
	5	State NE	Zip Code 68135-1324									061470		
	FEC ID number of contributing federal political committee.	_	00133-1324		Amo	ount	t of	Ea	ich R	ecei	ipt thi	s Peric 28	d 3.08	
	Name of Employer (for Individual)		pation (for Individual)	_		М	emc	o Ite	em		,			
	United HealthCare Services Inc Receipt For: Ag Primary General Other (specify) Image: Content of the second	1	Dir Clin Qlty Year-to-Date ▼ 238.68	F	9/R I	Ded	lucti	ion	(\$14.	.04 E	Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)			▶							9	156	6.16	
т	OTAL This Period (last page this line number only).			•				-			- J -		-	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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FOR LINE NUMBER:

PAGE 203 OF

171	Use separate schedule(s)			(ch	eck only	/ or	ne)	L						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12	1 47				
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initia FICKER, MARK D, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 173 LAURELWOOD DRIVE				08 / D D / Y Y Y Y Y 08 31 2017									
	City NOVATO	State CA	Zip Code 94949-8427	Transaction ID : PR2607806747039 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С							83.	32				
	Name of Employer (for Individual) Optum Services, Inc	Occu VP C	pation (for Individual) Dps		Me	emc	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.24		P/R Dedi	ucti	on (\$41.	.66 Bi-We	eekly)					
B.	Full Name of Individual (Last, First, Middle Initia CEGLIA, VINCENT C, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 47 CONTRY ACRES DRIVE				08	1	31	/ Y	2017	Y				
	City HAMPTON	State NJ	Zip Code 08827-4112					PR26080 leceipt th						
	FEC ID number of contributing federal political committee.	С	28.08											
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir (Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia SCHWARTZ, SHAWN DAVID, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 338 SNELLING AVE S				08	1	31		2017					
	City SAINT PAUL	State MN	Zip Code 55105-2048					PR2608						
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		28.	08				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Dir Ntwk Prgms		Me	emo	tem							
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 238.68					P/R Deduction (\$14.04 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•••••	•			, .	. ,	139.	48				
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Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 204 OF

TEMIZED RECEIPTS		category of the 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)	rated PAC (UnitedHe	ealth Group PA	NC)									
Full Name of Individual (Last, First, Middl LANDO, LISA MARIE, , ,	e Initial) or Full Organization	Name	Date of Receipt									
Mailing Address 60 PINEAPPLE STREET APT 3J			08 / D D / Y Y Y Y 08 31 2017									
City BROOKLYN	State Zip Co	de 1-6839	Transaction ID : PR2608059547039									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 76.92									
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Dir Gen Mgmt	Individual)	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	e ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middl 3. FLYNN, VIRGINIA A, , ,	e Initial) or Full Organization	Name	Date of Receipt									
Mailing Address 30 VAN TERRACE			08 31 / Y Y Y Y 08 31 2017									
City SPARKILL	StateZip CoNY10976	de 5-1406	Transaction ID : PR2608061247039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Dir Med Clin Op	,	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	e ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middl 5. FERGUSON, SANDRA, , ,	e Initial) or Full Organization	Name	Date of Receipt									
Mailing Address 710 SOUTH SHERATON			08 / D D / Y Y Y Y Y 08 31 2017									
City AKRON	State Zip Co OH 44319	de)-1918	Transaction ID : PR2608061947039									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 76.92									
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Assc Dir Med Cl	Memo Item										
Receipt For:	Aggregate Year-to-Date	e 🔻	P/R Deduction (\$38.46 Bi-Weekly)									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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PAGE 205 OF

				or each category of the Detailed Summary Page		× 11a 13		11b		11c 15	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na					for the		pose c		liciting	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) CARROLL, SARAH SMITH, , ,	or Full O	Drgan	ization Name		Date of Receipt										
	Mailing Address 18411 BEAVERWOOD RD				08 31 2017 Transaction ID : PR2608064147039											
	City MINNETONKA	State MN		Zip Code 55345-3100		Tran	sacti	ion ID	: PR	R26080	6414703	9				
	MINNETONKA			55545-5100	_	Amou	nt of	Each	Rec	eipt this	s Period					
	FEC ID number of contributing federal political committee.	С						-		-y	30.	40				
	Name of Employer (for Individual) United HealthCare Services Inc		cupati d Dir	on (for Individual)		N	/lemc	Item								
	Receipt For:		Yea	r-to-Date ▼												
	Primary General Other (specify) ▼		7	212.80		P/R De	ductio	on (\$1	5.20	Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initial) HECK, ALLYN RICHARD, , ,	or Full O	Drgan	ization Name		Date of	of Re	eceipt								
	Mailing Address 3233 BARHITE STREET					08 / D D / Y Y Y Y 08 31 2017										
	City	State		Zip Code		Tran	sacti	on ID	: PR	26098	1094703	9				
	PASADENA	CA		91107-1254		Amour	nt of	Each	Rec	eipt this	s Period					
	FEC ID number of contributing federal political committee.	С				28.08										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) · Underwriting		P/R Deduction (\$14.04 Bi-Weekly)										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 238.68												
с.	Full Name of Individual (Last, First, Middle Initial) BODELL, LESLIE, , ,	or Full O	Drgan	ization Name		Date of	of Re	eceipt								
	Mailing Address 18710 34TH AVENUE NORTH					08	VI /	3		/ Y	y 2017	Y				
	City	State		Zip Code		Tran	sact	ion ID	: PF	R26098	1134703	9				
	PLYMOUTH	MN		55447-1000		Amour	nt of	Each	Rec	eipt thi	s Period					
	FEC ID number of contributing federal political committee.	С						9		9	714.	28				
	Name of Employer (for Individual) Optum Services, Inc	Occi VP (•	on (for Individual)		Ν	/lemc	ltem								
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 1785.70	P/R Deduction (\$357.14 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)			•	<u> </u>	Ľ.	-	, ,	-	9	772.	76				
Т	OTAL This Period (last page this line number onli	y)		••••••				_		-						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 206 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)		Inited Health Crown D									
	aleu PAC (AC)								
Full Name of Individual (Last, First, Middle WRIGHT, NORMAN L, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 5205 KELSEY TERRACE			M M J 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 Y								
City EDINA	State MN	Zip Code 55436-1172									
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. FAULKNER, RYAN J, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 230 W AVENIDA ALESSAN			08 / D D / Y Y Y Y Y 2017								
City SAN CLEMENTE	State CA	Zip Code 92672-4333	Transaction ID : PR2609813147039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.											
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. STRAUSS, DAVID E, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 5000 FRANCE AVENUE S UNIT 33			08 / D D / Y Y Y Y 2017								
City MINNEAPOLIS	State MN	Zip Code 55410-2061	Transaction ID : PR2612521847039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		454.54								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Total Rewards	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2954.51	P/R Deduction (\$227.27 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			867.22								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 207 OF

171			Use separate schedule(s)	(ch	eck only	/ one)	L					
			for each category of the Detailed Summary Page		′ 11a 13		11b	11c 15	12	Г	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the	purpc	ose of a	soliciting	contri	butio	ns		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia SMITH, MELANIE J, , ,	al) or Full Or	ganization Name		Date of Receipt								
	Mailing Address 15340 HIGHLAND PLACE				M M / 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 MINNETONKA	State MN	Zip Code 55345-4613	_				PR26125 eceipt th			_		
	FEC ID number of contributing federal political committee.	С			<u> </u>	- 7			g	95.22			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ecruit Ops		Me	emo I	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 571.32]	P/R Ded	uctior	n (\$47.6	61 Bi-W€	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia BAKER, MICHAEL, , ,	al) or Full Or	ganization Name		Date of	Rece	eipt						
	Mailing Address 2383 HIGHOVER TRAIL				M M 08	/	D D D 31	/ Y	2017	ÝÝ]		
	City CHANHASSEN	State MN	Zip Code 55317-4744					PR26125					
	FEC ID number of contributing federal political committee.	С				. 01 E		eceipt th		00 84.60			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Cust Svs	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 3269.10] F	P/R Dedu	uction	n (\$192.	.30 Bi-W	'eekly)				
с.	Full Name of Individual (Last, First, Middle Initia RIVERS, CAROLINE J, , ,	al) or Full Or	ganization Name		Date of	Rece	eipt						
	Mailing Address 6368 TIMBER TRACE				08	1	D D 31	/ Y	2017]		
	City BROWNSBURG	State IN	Zip Code 46112-8641					PR26128 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>	, j		, ,	2	29.66			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Contract Dir	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 231.57	P/R Deduction (\$14.83 Bi-Week					ekly)				
s	UBTOTAL of Receipts This Page (optional)			' ►					50	9.48			
т	OTAL This Period (last page this line number or	וy)		→						-			

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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PAGE 208 OF

		Detailed Summary Page	×	11a		11b		11c	12							
				13		14		15	16	17						
Any information copied from such Reports ar or for commercial purposes, other than using																
NAME OF COMMITTEE (In Full)																
UnitedHealth Group Incorpor	``	•	AC)													
Full Name of Individual (Last, First, Middle DECKMANN, NATASHA, , ,	e Initial) or Full O	rganization Name		Date of Receipt												
Mailing Address 34 WEST 17TH STREET	#3			м м 08	/		D 31	/ Y	2017	Y						
City	State	Zip Code	٦ '	Transaction ID : PR2612534647039												
NEW YORK	NY	10011-5709	A	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														
Receipt For:	I	Year-to-Date ▼	-													
Primary General Other (specify) ▼		3269.10	P/	P/R Deduction (\$192.30 Bi-Weekly)												
Full Name of Individual (Last, First, Middle B. HANSEN, KIMBERLY A, , ,	e Initial) or Full O	rganization Name		Date of	Re	eceipt										
Mailing Address 6227 UPLAND LN N				08 / D D / Y Y Y Y 2017												
City	State	Zip Code		Trans	acti	ion II) : P	R26133	83247039							
MAPLE GROVE	MN	55311-4003	A	mount	of	Each	n Re	ceipt th	is Period							
FEC ID number of contributing federal political committee.	С			34.76												
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Prov Data						Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/	P/R Deduction (\$17.38 Bi-Weekly)												
Full Name of Individual (Last, First, Middle C. DEIDESHEIMER, THERESA A		rganization Name		Date of	Re	eceipt										
Mailing Address 6319 21 ST AVE NE				M M 08	/		31	/ Y	2017	Ŷ						
City	State	Zip Code		Trans	acti	ion II	D : P	R26133	38344703	9						
SEATTLE	WA	98115-6915	A	mount	of	Each	Re	ceipt th	is Period							
FEC ID number of contributing federal political committee.	С					y		y	34.7	76						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	b Iten	n									
Receipt For:	I	0	_	-												
Primary General Other (specify)		Aggregate Year-to-Date ▼ 208.56					P/R Deduction (\$17.38 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)					,		9	454.1	2						
TOTAL This Period (last page this line num	ber only)	•••••				- -		-								

Use separate schedule(s)

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PAGE 209 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIVIIZED REGEIFIJ		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 te to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	ig the name and a	duress of any pointear commute									
UnitedHealth Group Incorpo	orated PAC (I	UnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Midd A. DICKINSON, DAVID PAUL, , ,	le Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 57 ATKINSON LANE			08 / D D / Y Y Y Y 08 31 2017								
City SUDBURY	State MA	Zip Code 01776-1938	Transaction ID : PR2613388947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		142.84								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 857.04	P/R Deduction (\$71.42 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. TAYLOR, SCOTT ANTHONY, ,		Organization Name	Date of Receipt								
Mailing Address 7927 RHODE ISLAND C			08 / D D / Y Y Y Y Y 2017								
	State MN	Zip Code	Transaction ID : PR2613392347039								
BLOOMINGTON		55438-1194	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		38.46								
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		, 326.91	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. KREJCI, ANDREW, , ,	le Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 19880 LAKEVIEW AVEN	1		08 / D D / Y Y Y Y 08 31 2017								
City EXCELSIOR	State MN	Zip Code 55331-9352	Transaction ID : PR2614310747039								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	al)		209.38								
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FOR LINE NUMBER:

PAGE 210 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a □ 11b □ 11c □ 12								
			erson for the purpose of soliciting contributions								
	the name and a	ddress of any political committe	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 LIBERATO, CHRISTINE P, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2334 EAST CAROL AVE	NUE		08 / D D / Y Y Y Y 2017								
City PHOENIX	State AZ	Zip Code 85028-4613	Transaction ID : PR2614313847039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. VAIL, ABIGAIL LONDON, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3636 DEXTER 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								
City TALLAHASSEE	State FL	Zip Code 32312-1022	Transaction ID : PR2614315647039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		Memo Item								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 928.82	P/R Deduction (\$63.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. THOMPSON JR, JOHN C, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1697 COUNCIL BLUFF D			08 / D D / Y Y Y Y Y 2017								
City ATLANTA	State GA	Zip Code 30345-4137	Transaction ID : PR2614322347039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		43.46								
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 ▼ 304.22	P/R Deduction (\$21.73 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona)		200.38								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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FOR LINE NUMBER:

(check only one)

PAGE 211 OF

	EMIZED RECEIPTS		or each category of the Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		oose		oliciting	contribu	tions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) BURKHOLDER, CHAD, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot						
	Mailing Address 2423 DUBONNET DRIVE					08 / D D / Y Y Y Y 08 / 31 / 2017									
	City MACUNGIE	State PA		Zip Code 18062-8857		Transaction ID : PR2615073447039									
		1.4		18002-8637	_ A	mount	of	Eac	h Reo	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С			648.34										
	Name of Employer (for Individual) Optum Services, Inc	Occi VP (•	ion (for Individual)	Memo Item										
	Receipt For:		Yea	ur-to-Date ▼	_										
	Primary General Other (specify) ▼		- J -	2082.37	P/	R Ded	uctio	on (\$	\$324. ⁻	17 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initial) VANNORMAN, SAMUEL O, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot						
	Mailing Address 6216 CONCORD AVE					08 / D D / Y Y Y Y 2017									
	City	State		Zip Code		Trans	acti	on I	ID : P	R26150	8604703	9			
	EDINA	MN		55424-1736	A	mount	of	Eac	h Reo	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С				28.08									
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	tion (for Individual) d		Memo Item										
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 238.68	P/	P/R Deduction (\$14.04 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) SOLOMON, RANDALL L, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot						
	Mailing Address 760 HAIGHT STREET					м м 08	/	D	^р 31	/ Y	2017	Y			
	City	State		Zip Code		Trans	acti	ion l	ID : P	R26156	67154703	9			
	SAN FRANCISCO	CA		94117-3317	A	mount	of	Eac	h Reo	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С						9		y	76.	92			
	Name of Employer (for Individual)		•	ion (for Individual)	11	Me	emo	Ite	m						
	Optum Services, Inc Receipt For:	Sr B	ehvi	rl Med Dir	_										
	Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 653.82	P/	P/R Deduction (\$38.46 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•							753.:	34			
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 212 OF

			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and State for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	.C)									
Α.	Full Name of Individual (Last, First, Middle Initial) BIRNBAUM, MICHAEL, , ,	or Full Or	rganization Name	Date of Receipt									
	Mailing Address 55 DEAN STREET			M M / D P Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y 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 BROOKLYN	State NY	Zip Code	Transaction ID : PR2615671647039									
	BROOKETN		11201-6245	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		428.56									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Hithcare Econ	Memo Item									
	Receipt For:		Year-to-Date V	_									
	Primary General Other (specify) ▼	ggregate	3071.36	P/R Deduction (\$214.28 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) NIEMYER, ELIZABETH S, , ,	or Full Or	rganization Name	Date of Receipt									
	Mailing Address 9237 ENGLISH MEADOW WAY			08 / D D / Y Y Y Y 2017									
	City	State	Zip Code	Transaction ID : PR2615682847039									
	LAYTONSVILLE	MD	20882-1348	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		184.62									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (upation (for Individual) Ops	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2669.16	P/R Deduction (\$92.31 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) KNUTSON, DIANE M, , ,	or Full Or	rganization Name	Date of Receipt									
	Mailing Address 4320 POLARIS LANE NORTH			08 31 2017									
	City	State	Zip Code	Transaction ID : PR2615923947039									
	PLYMOUTH	MN	55446-2658	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		100.00									
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item									
	Optum Services, Inc	Dir N	Itwk Pricing										
	Receipt For:	ggregate `	Year-to-Date ▼										
	Primary General Other (specify)		550.00	P/R Deduction (\$50.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			713.18									
Т	OTAL This Period (last page this line number only	/)	•••••										

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 213 OF

			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
or	y information copied from such Reports and State for commercial purposes, other than using the na			on for the purpose of soliciting contributions									
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PAC	;)									
Α.	Full Name of Individual (Last, First, Middle Initial) YOUNG, JENNIFER LORYN, , ,	or Full C	Organization Name	Date of Receipt									
	Mailing Address 321 CLINTON PLACE	Stata	Zin Codo	08 / D D / Y Y Y Y 2017									
	City HACKENSACK	State NJ	Zip Code 07601-2802	Transaction ID : PR2615929447039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		28.08									
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) P Sales	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	lggregate	e Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) KIRBY, WESLEY, , ,	or Full C	Organization Name	Date of Receipt									
	Mailing Address 3213 SAGE BRUSH TRL		08 31 / Y Y Y Y Y 2017										
	City PLANO	State TX	Zip Code 75023-5631	Transaction ID : PR2615957047039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		28.08									
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Cnslt Bus Adv/Tech	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate	e Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) LONGORIA, PATRICIA CAMACHO,		Organization Name	Date of Receipt									
	Mailing Address 906 BLUEBIRD			08 / D D / Y Y Y Y Y 2017									
	City MANCHACA	State TX	Zip Code 78652-4154	Transaction ID : PR2617361147039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		28.08									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) sc Dir Mktg	Memo Item									
	Receipt For: A Primary General Other (specify)	vggregate	e Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		····· ►	84.24									
	OTAL This Period (last page this line number only												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 214 OF

	Use separate schedule(s)	(check onl	(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 NAME OF COMMITTEE (In Full)	the name and a	looress of any political committee	e to solicit col	ntributions fro	om sucr	Committe						
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle MIRVISS, ALAN H, , ,	Initial) or Full C	organization Name	Date of	Date of Receipt								
Mailing Address 73 DOWNEY			08 31 2017 Transaction ID : PR2617361747039 Amount of Each Receipt this Period									
City SAN FRANCISCO	State CA	Zip Code 94117-4015										
FEC ID number of contributing federal political committee.	C			- 19-		28.0	8					
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Proj Mgr II	м	emo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Ded	uction (\$14.0	4 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle B. PASSINEAU, MEGHAN ROSE, ,		organization Name	Date of	f Receipt								
Mailing Address 4 BUROAK DRIVE			M M 08	08 31 2017								
City HOPEWELL JUNCTION	State NY	Zip Code 12533-6434		action ID : P t of Each Re			<u> </u>					
FEC ID number of contributing federal political committee.	C			28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	м	emo Item								
Receipt For:	Aggregate	Year-to-Date V										
Other (specify) ▼		238.68	P/R Ded	uction (\$14.0	4 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle TRAW, KEVIN JON, , ,	Initial) or Full C	organization Name	Date of	f Receipt								
Mailing Address 518 13TH ST		1	M _ M 08	31	I L	у у 2017						
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038		saction ID : F t of Each Re)					
FEC ID number of contributing federal political committee.	С			- y -	y	76.9	2					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Process	М	emo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82	P/R Ded	eekly)								
SUBTOTAL of Receipts This Page (optional)						133.0	8					
TOTAL This Period (last page this line numb	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 215 OF

	EMIZED RECEIPTS		or each category of the Detailed Summary Page	×	11a		-	1b	11c	12	<u> </u>				
	y information copied from such Reports and State for commercial purposes, other than using the na							rpo							
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) CHERRY, MARK LEE, , ,	or Full O	Orgar	nization Name		Date of Receipt									
	Mailing Address 612 BEMIS HEIGHTS PL					M M / D P Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y 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 SAINT CHARLES	State MO		Zip Code 63303-1752	-	Transaction ID : PR2617922847039									
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period										
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) a/Res Anlyst Cnslt	Memo Item										
	Boosint For:			ir-to-Date ▼ 238.68	P/										
B.	Full Name of Individual (Last, First, Middle Initial) MILLER, JUMELIE, , ,	or Full O	Organ	nization Name		Date o	of Re	ece	eipt						
	Mailing Address 19018 CANYON RIVER LN		™ 08	/	′	D D 31	/ Y	2017	Y						
	City HOUSTON	State TX		Zip Code 77084-4468							9252470 his Peric				
	FEC ID number of contributing federal political committee.		_		,		- 41-	2	8.08						
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) r Case Mgmt	Memo Item										
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) BAUBLIT, MICHAEL, , ,	or Full O	Orgai	nization Name		Date d	of Re	ece	eipt						
	Mailing Address 2201 RIDGEWIND WAY					™ 08	/	1	D D D 31	/ Y	2017	Ŷ			
	City WINDERMERE	State FL		Zip Code 34786-5823	Δ						79271470 his Peric				
	FEC ID number of contributing federal political committee.	С				inou		,		, second the		8.08			
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt	Memo Item										
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 238.68	P/	'R De	ducti	tion	ı (\$14.0	04 Bi-W	'eekly)				
s	UBTOTAL of Receipts This Page (optional)							,			8,	4.24			
т	DTAL This Period (last page this line number only	y)						,		-					

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 216 OF

			or each category of the Detailed Summary Page	×	11a 13		-	11b 14		11c 15	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		Irp	ose c		oliciting	contrib	utions		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) PUTTERMAN, JAY DOUGLAS, , ,	or Full O	rgar	nization Name		Date	of R	lec	ceipt						
	Mailing Address 7 SUNNY REACH DRIVE														
		State CT		Zip Code 06117-1531		Transaction ID : PR2617931347039 Amount of Each Receipt this Period									
	WEST HARTFORD	01		00117-1551	_ A	mou	nt o	fE	Each	Re	ceipt th	is Perio	d		
	FEC ID number of contributing federal political committee.	С				28.08									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Clnt Dev		I	Mem	10	Item						
	Receipt For:	Aaareaate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼		-	238.68	P/	R De	duct	tio	n (\$1	4.04	4 Bi-We	eekly)			
B.	Full Name of Individual (Last, First, Middle Initial) JOHNSON, MARK OWEN, , ,	nization Name		Date	of R	lec	ceipt								
	Mailing Address 8687 RILEY CURVE			-		08 / D D / Y Y Y Y Y 2017									
	City	State		Zip Code		Tran	sac	tic	on ID	: P	R26179	339470	39		
	CHANHASSEN	MN		55317-4822	A	mou	nt of	fE	Each	Re	ceipt th	is Perio	d		
	FEC ID number of contributing federal political committee.	С				_		-	,		-9	92	2.30		
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Mgmt		Memo Item									
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 784.55	P/	P/R Deduction (\$46.15 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) MISKELL-CLOUTIER, DOMINIQUE		rgar	nization Name		Date	of R	lec	ceipt						
	Mailing Address 12101 STRETFORD FOREST Co					[™] 08		/	D 3		/ Y	2017 [°]	Y		
	City	State		Zip Code		Trar	nsac	tic	on ID	: P	R2618	9849470	39		
	BRISTOW	VA		20136-2078	A	mou	nt o	fE	Each	Re	ceipt th	is Perio	d		
	FEC ID number of contributing federal political committee.	С				_		,	,		y	34	4.76		
	Name of Employer (for Individual)	Осси	upat	ion (for Individual)			Mem	10	Item						
	United HealthCare Services Inc	Dir F	Pres	ervice Review											
		Aggregate	Yea	r-to-Date 🔻											
	Other (specify)	-	208.56	P/	'R De	educ	tio	on (\$1	7.3	8 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•	[,		9	155	5.14		
т	OTAL This Period (last page this line number only	/)		••••••					,		-		-		

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 217 OF

	IMIZED RECEIPTS	for each catego	
		Detailed Summa	13 14 15 16 1
			used by any person for the purpose of soliciting contributions tical committee to solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)		
	UnitedHealth Group Incorporate	d PAC (UnitedHealth	Group PAC)
١.	Full Name of Individual (Last, First, Middle Initia BROWN, ROGER ALAN, , ,	al) or Full Organization Name	Date of Receipt
	Mailing Address 512 EAST STATE AVE		08 31 2017
	City	State Zip Code	Transaction ID : PR2622557947039
	PHOENIX	AZ 85020-4940	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	658.24
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individu VP Mktg Bus Dev	lual) Memo Item
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		P/R Deduction (\$329.12 Bi-Weekly)
	Other (specify) v	1 1 apr 1 1 apr 1	2037.84
	Full Name of Individual (Last, First, Middle Initia GARELLI, JOLENE A, , ,	al) or Full Organization Name	Date of Receipt
	Mailing Address 9 PROSPECT VIEW DRIVE	08 31 2017	
	City	State Zip Code	Transaction ID : PR2622559247039
	DUMMERSTON	VT 05301-8875	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	28.08
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individe Dir IT Proj Mgmt	lual) Memo Item
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		P/R Deduction (\$14.04 Bi-Weekly)
	Full Name of Individual (Last, First, Middle Initia CAMPBELL, THERESA, , ,	al) or Full Organization Name	Date of Receipt
	Mailing Address 1117 XERXES AVENUE SOUT	08 31 2017	
	City	State Zip Code	Transaction ID : PR2622562147039
	MINNEAPOLIS	MN 55405-2128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.08
	Name of Employer (for Individual)	Occupation (for Individu	lual) Memo Item
	UHC International Services Inc	VP Human Capital Part	,
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify)	· · · · · · · ·	P/R Deduction (\$14.04 Bi-Weekly)
			714.40

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 218 OF

		Use separate schedule(s)	(check only one)					
ILEIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	× 11a		11b	11c	12	
Any information copied from such Reports ar								
or for commercial purposes, other than using	the name and a	ddress of any political committe	e to solicit o	contril	outions f	rom such	n committe	эе.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle MILLER, JOHN SCOTT, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 3107 ECTOR			M 08		31	/ Y	y y 2017	Y
City HOUSTON	State TX	Zip Code 77056-4037					70474703 is Period	•
FEC ID number of contributing federal political committee.	С					-	38.4	16
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops		Mem	o Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 326.91	P/R D	educt	ion (\$19.	23 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle B. MULES, REBECCA HUMBERT,		rganization Name	Date	of Re	eceipt			
Mailing Address 660 DOVER STREET		08 / D D / Y Y Y Y Y 2017					Y	
City BALTIMORE	State MD	Zip Code 21230-2228					4264703)
	_	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C				-11- I		126.9	92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Mem	o Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 928.82	P/R De	educti	ion (\$63.	46 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle C. SINGH, KANWAR U, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt			
Mailing Address 5321 TOWN BROOKE			M 08	3	31		2017 [°]	
City MIDDLETOWN	State CT	Zip Code 06457-6615					44594703 is Period	3
FEC ID number of contributing federal political committee.	С		, ,		30.4	10		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) roj Mgr		Mem	o Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 228.00	P/R D	educt	ion (\$15.	.20 Bi-We	eekly)	
SUBTOTAL of Receipts This Page (optional)				, .		195.7	'8
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:

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PAGE 219 OF

	LIVIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	110	: F	1	2	
			Detailed Suthinary Faye		13		14	15		_	6	17
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson fo e to solid	or the cit cor	purp ntrib	ose o utions	f solicit from s	ing o uch	conti com	ributi mitte	ons e.
	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Initi COLLETTE, CHRISTOPHER LOUIS, , ,	al) or Full O	rganization Name	Di	ate of	Re	ceipt					
	Mailing Address 786 CAMBERWELL DRIVE				08	1	D 31	D /	Y	ү 201	Y 7	Y
	City	State	Zip Code		Trans	acti	on ID :	PR26	2549	954	7039)
	EAGAN	MN	55123-3939	Ar	mount	of	Each F	Receipt	this	Per	riod	
	FEC ID number of contributing federal political committee.	С					,			4	40.5	6
	Name of Employer (for Individual) United HealthCare Services Inc	Occi		Me	emo	Item						
	Receipt For:	Anareaate	Year-to-Date V									
	Primary General Other (specify) ▼		3017.48	P/F	R Dedi	uctio	on (\$22	0.28 B	i-We	ekly)	
	Full Name of Individual (Last, First, Middle Initi RELLER, TAMI, , ,	al) or Full O	rganization Name	Di	ate of	Re	ceipt					
	Mailing Address 5120 MIRROR LAKES DRIVE			ПГ	08 31 2017					Y		
	City	State	Zip Code		Trans	acti	on ID :	PR262	2550	1947	7039)
	EDINA	MN	55436-1342	A	mount	of	Each F	Receipt	this	Per	riod	
	FEC ID number of contributing federal political committee.	С			_		7			3	84.6	0
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R	R Dedu	uctic	on (\$19	2.30 B	-We	ekly))		
	Full Name of Individual (Last, First, Middle Initi SMITH, LISA MARIE, , ,	al) or Full O	Di	ate of	Re	ceipt						
	Mailing Address 5040 INTERLACHEN BLUFF				08 ^M	1	D 31			y 201	7 7	Y
	City	State	Zip Code		Trans	acti	on ID	: PR26	2550	374	7039	•
	EDINA	MN	55436-1360	Ar	mount	of	Each F	Receipt	this	Per	riod	
	FEC ID number of contributing federal political committee.	С			_	_	y .	,			86.9	6
	Name of Employer (for Individual)	Occi	upation (for Individual)	-	Me	emo	Item					
	Optum Services, Inc	VP Gen Mgmt										
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify)		P/F	R Ded	uctio	on (\$43	8.48 Bi-	Wee	kly)			
	UBTOTAL of Receipts This Page (optional)		· ·		-	_	,		-	9	12.1	2

FOR LINE NUMBER:

PAGE 220 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					
or for commercial purposes, other than using			berson for the purpose of soliciting contributions be to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. LAWTON, MICHAEL S, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1720 CROSS PINES DR			08 31 2017					
City FLEMING ISLAND	State FL	Zip Code 32003-4915	Transaction ID : PR2625505447039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.40					
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 ▼ 228.00	P/R Deduction (\$15.20 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. HOMER, WILLIAM EDWARD, ,		rganization Name	Date of Receipt					
Mailing Address 3120 LAKE CENTER DR			08 / D D / Y Y Y Y 08 31 2017					
City SANTA ANA	State CA	Zip Code 92704-6917	Transaction ID : PR2625507747039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.40					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) IT Proj Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.00	P/R Deduction (\$15.20 Bi-Weekly)					
Full Name of Individual (Last, First, Middle COWEN, WESLEY RYAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 825 VIRGINIA PARK CIR	1	Zin Oode	08 / D D / Y Y Y Y 08 / 31 / 2017					
City ATLANTA	State GA	Zip Code 30306-4081	Transaction ID : PR2625532347039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona)		137.72					
TOTAL This Period (last page this line num	ber only)							

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

PAGE 221 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle I A. LIVERS, JEFFREY BRENT, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 402 DERBY COURT			08 31 2017					
City	State	Zip Code	Transaction ID : PR2626346047039					
MEBANE	NC	27302-9452	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I B. CULHANE, DEBORAH ANNE, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 100 COVE WAY UNIT 301			08 / D D / Y Y Y Y Y 2017					
City QUINCY	State MA	Zip Code 02169-5857	Transaction ID : PR2626356047039					
FEC ID number of contributing	_	02103-3037	Amount of Each Receipt this Period					
federal political committee.	C		446.42					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						
Primary General Other (specify) ▼		2991.03	P/R Deduction (\$223.21 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I C. TERRAL, RECCA V, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6828 SIMMONS RD	1		08 / D D / Y Y Y Y Y 08 31 2017					
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-4259	Transaction ID : PR2626359647039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		34.76					
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 ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			509.26					
TOTAL This Period (last page this line numbe	r only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 222 OF

		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Middle Ir A. HINES, GREGORY M, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 3660 SILVERWOOD RD			08 31 2017				
City WEST SACRAMENTO	State CA	Zip Code 95691-5403	Transaction ID : PR2626886547039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		176.92				
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 ▼ 1203.82	P/R Deduction (\$88.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir B. BONAR, BRUCE A, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1362 DOS HERMANOS GLE			08 31 / Y Y Y Y Y 08 31 2017				
City ESCONDIDO	State CA	Zip Code 92027-1270	Transaction ID : PR2626906847039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		34.76				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) tware Engineer Cnslt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir C. STOCKSTAD, LYNNE DEANNE		rganization Name	Date of Receipt				
Mailing Address 55 GIDEONS POINT RD			08 / D D / Y Y Y Y 2017				
City EXCELSIOR	State MN	Zip Code 55331-9526	Transaction ID : PR2626915547039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		28.08				
Optum Services, Inc M		upation (for Individual) Grp Chief Mktg Off	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			239.76				
TOTAL This Period (last page this line number	r only)						

FOR LINE NUMBER:

PAGE 223 OF

ITEMIZED RECEIPTS			(check only one)
I LIVILLED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Midd A. SCHENCK, ERIK C, , ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1 FLORENCE CT			08 31 2017
City PALM COAST	State FL	Zip Code 32137-8305	Transaction ID : PR2627730447039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		34.76
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Clin Cnslt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)
Full Name of Individual (Last, First, Midd B. SCOTT, NICOLE E, , ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 29039 HOBBLEBUSH	08 / D D / Y Y Y Y 2017		
City SAN ANTONIO	State TX	Zip Code 78260-2249	Transaction ID : PR2627731947039
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) Dir SIs Acct Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Midd C. MORRIS, BARBARA, , ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1045 SWEET GUM WA	1		08 / D / Y Y Y Y 2017
City MEBANE	State NC	Zip Code 27302-6511	Transaction ID : PR2627735547039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	al)		90.92
TOTAL This Period (last page this line nur	mber 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 224 OF

			Detailed Summary Page	X 11a 11b 11c 12			
			Detailed Summary Page				
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
/	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)			
۱.	Full Name of Individual (Last, First, Middle Initi LINDLEY, SHEILA G, , ,	al) or Full C	rganization Name	Date of Receipt			
	Mailing Address 102 NORMANDY CT			08 / D D / Y Y Y Y Y 08 31 2017			
	City	State MS	Zip Code	Transaction ID : PR2627739847039			
	MADISON	IVIO	39110-6711	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		34.76			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		208.56	P/R Deduction (\$17.38 Bi-Weekly)			
	Full Name of Individual (Last, First, Middle Initi SENDEN, SCOTT THOMAS, , ,	al) or Full C	rganization Name	Date of Receipt			
	Mailing Address 6285 BUTTERWORTH LANE						
	City	State	Zip Code	08 / D D / Y Y Y Y 2017			
	CORCORAN	MN	55340-9406	Transaction ID : PR2627743447039 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		28.08			
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item			
Receipt For:			Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)			
	Full Name of Individual (Last, First, Middle Initi NAKAJIMA, KENICHI, , ,	al) or Full C	rganization Name	Date of Receipt			
	Mailing Address 15822 BELFAST LANE			08 31 2017			
	City	State	Zip Code	Transaction ID : PR2628319047039			
	HUNTINGTON BEACH	CA	92647-3104	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		34.76			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	United HealthCare Services Inc		ct Cnslt	_			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify)		208.56	P/R Deduction (\$17.38 Bi-Weekly)			
	JBTOTAL of Receipts This Page (optional)			97.60			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 225 OF

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 an 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 RANHEIM, CRAIG, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 5228 ABBOTT AVENUE S	SOUTH		08 / D D / Y Y Y Y Y 08 31 2017				
City	State	Zip Code	Transaction ID : PR2628329347039				
MINNEAPOLIS	MN	55410-2125	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For:	Aggregate	Year-to-Date V					
Primary General Other (specify) ▼		653.82	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. MANNING, KIM BARNES, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 12703 DEER CREEK DRI	VE		M M / 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	State	Zip Code	Transaction ID : PR2628331447039				
ОМАНА	NE	68142-1762	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		28.08				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Mktg	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. VAN DER WALDE, LAMBERT,		rganization Name	Date of Receipt				
Mailing Address 45 AUDUBON CAUSEWA	·		08 / D D / Y Y Y Y Y 08 31 2017				
City	State	Zip Code	Transaction ID : PR2628332347039				
LANTANA	FL	33462-4756	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
United HealthCare Services Inc		PHIth Reform/Modernizatn					
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify)		3269.10	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional))		489.60				
TOTAL This Period (last page this line numb	per only)	•					

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 226 OF

			Use separate schedule(s)	(check only one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
<u>.</u>	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)					
A.	Full Name of Individual (Last, First, Middle Initia BROERSE, DEBRA L, , ,	ll) or Full O	rganization Name	Date of Receipt					
	Mailing Address 443 FARLEY DR			08 / D D / Y Y Y Y 08 31 2017					
	City INDIANAPOLIS	State IN	Zip Code 46214-3572	Transaction ID : PR2628791347039 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		28.08					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Underwriting	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia MALIK, SHKEELA M, , ,	l) or Full O	organization Name	Date of Receipt					
	Mailing Address 4410 APPLE VALLEY LN			08 / D / Y Y Y Y 2017					
	City W BLOOMFIELD	State MI	Zip Code 48323-2804	Transaction ID : PR2628798147039					
	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) c Dir Clin Qlty	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)					
С.	Full Name of Individual (Last, First, Middle Initia ERICKSON, ALYSSA ANNE MALI		organization Name	Date of Receipt					
	Mailing Address 6430 POLARIS LANE N			08 / D D / Y Y Y Y 08 31 2017					
	City MAPLE GROVE	State MN	Zip Code 55311-4320	Transaction ID : PR2628798947039 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		33.10					
United HealthCare Services Inc			upation (for Individual) Found/Social Resp	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 215.15	P/R Deduction (\$16.55 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••	95.94					
т	OTAL This Period (last page this line number or	וy)	•						

FOR LINE NUMBER:

PAGE 227 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 1				
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 Incorporat	ted PAC (I	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Middle Ir A. HANSEN, YVETTE, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 10524 MUIRFIELD DRIVE			M M / 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 NAPERVILLE	State IL	Zip Code 60564-8086	Transaction ID : PR2628807147039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		28.08				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Recruit	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir B. SHAPIRO, VICTORIA L, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 3106 FABER DRIVE			08 / D D / Y Y Y Y 2017				
City FALLS CHURCH	State VA	Zip Code 22044-1711	Transaction ID : PR2628826147039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		416.02				
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 ▼ 3127.87	P/R Deduction (\$208.01 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir c. JARVIE, BRUCE MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt				
Mailing Address 18750 KIPHEART DRIVE			08 / D D / Y Y Y Y 08 31 2017				
City LEESBURG	State VA	Zip Code 20176-8220	Transaction ID : PR2629554547039 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) Fin	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			521.02				
TOTAL This Period (last page this line number	r only)						

FOR LINE NUMBER:

PAGE 228 OF

		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle I WONG, MING TED, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 21066 ASHLEY LANE			08 / D D / Y Y Y Y 2017					
City LAKE FOREST	State CA	Zip Code 92630-5867	Transaction ID : PR2629556847039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I B. TITA, MARYBETH ALEXIS, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 16 BEACH WOOD ROAD			08 31 / Y Y Y Y					
City	State	Zip Code	Transaction ID : PR2632077847039					
FERNANDINA BEACH	FL	32034-6504	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00					
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Primary General Other (specify) ▼		550.00	P/R Deduction (\$50.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I OTTESON, WILLIAM JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4545 OXFORD AVE			08 / D D / Y Y Y Y 2017					
City EDINA	State MN	Zip Code 55436-1405	Transaction ID : PR2632082547039 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc	ited HealthCare Services Inc Deput		Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			369.22					
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 229 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page				11		11c	12				
	y information copied from such Reports and Stateme for commercial purposes, other than using the name							se of :						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA													
A.	Full Name of Individual (Last, First, Middle Initial) or HIBBERT, LINDA F, , ,	Full Org	ganization Name		Date of Receipt									
	Mailing Address 924 BENTLEY COURT		-	M M / 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										
		ate	Zip Code	Transaction ID : PR2632085347039										
	CHALFONT PA FEC ID number of contributing federal political committee.		18914-3762	Amount of Each Receipt this Period										
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) en Mgmt	Memo Item										
	Receipt For: Agg Primary General Other (specify) ▼	regate Y	′ear-to-Date ▼ 583.24	P/R Deduction (\$41.66 Bi-Weekly)										
В.	Full Name of Individual (Last, First, Middle Initial) or NAPOLITANO, DIANE, , ,	Full Org	ganization Name	C	Date o	f Re	ecei	ipt						
	Mailing Address 9 CHESTNUT COURT				08 / D D / Y Y Y Y 08 31 2017									
	City Sta BASKING RIDGE N	ate J	Zip Code 07920-3100				-			08774703 nis Perioc				
	FEC ID number of contributing federal political committee.				28.08 Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ⁻ Proj Mgmt											
	Receipt For: Agg Primary General Other (specify) ▼	regate Y	′ear-to-Date ▼ 238.68	P/	P/R Deduction (\$14.04 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) or GORSUCH, KIRSTEN, , ,	Full Orç	ganization Name		Date o	f Re	ecei	ipt						
	Mailing Address 2780 COUNTRYSIDE DRIVE WEST	-			08	/		^D 31	/ Y	2017	Y			
	5	ate 1N	Zip Code							0878470	-			
	FEC ID number of contributing		55356-9676	A	Amoun	t of	Ea	ach Re	eceipt th	nis Perioc 430	_			
	federal political committee.	Ocour	pation (for Individual)	- 1	N	lemo	۳ o Ite	em	y					
	United HealthCare Services Inc	VP Co	omm	_ '										
	Primary General Other (specify)	regate Y	'ear-to-Date ▼ 3063.15	P/R Deduction (\$215.20 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)						1			541.	80			
т	OTAL This Period (last page this line number only)		•••••				-		-					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 230 OF

	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			ch category of the [x] 11a 11b 11c 12 ad Summary Page [x] 11a 11b 11c 12 sold or used by any person for the purpose of soliciting contributions any political committee to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
VinitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Midd TUFFIN, MICHAEL J, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5904 ASHBY MANOR P	1		08 31 2017 Transaction ID : PR2632087947039										
City ALEXANDRIA	State VA	Zip Code 22310-2267											
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Public Affairs	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Midd B. KEANEY, CRAIG J, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 6233 CRESCENT DRIVE													
City EDINA	State MN	Zip Code 55436-2572											
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1999.92	P/R Deduction (\$333.33 Bi-Weekly)										
Full Name of Individual (Last, First, Midd CWALTER, JEFFREY D, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 1490 SETTLER ST	State	Zin Oode	08 31 2017										
City ELBURN	IL	60119-7841											
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Architecture	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional	al)		1128.18										
TOTAL This Period (last page this line nur	mber only)												

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 231 OF

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 Incorpo	orated PAC (I	JnitedHealth Group PA	۹C)										
Full Name of Individual (Last, First, Midd ORRICK, VERONICA L, , , Mailing Address 10403 SANTA RITA ST	lle Initial) or Full C	rganization Name	Date of Receipt										
City	State	Zip Code	08 31 2017 Transaction ID : PR2632858547039										
CYPRESS	CA	90630-4221	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		28.08										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Itwk Prgm Mgr	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Midd B. TEMPLE, MARTHA R, , ,	lle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 194 LITTLE LANE			08 / D D / Y Y Y Y 2017										
City DURHAM	State CT	Zip Code 06422-1303	Transaction ID : PR2632873647039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		430.40										
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 ▼ 3063.15	P/R Deduction (\$215.20 Bi-Weekly)										
Full Name of Individual (Last, First, Midd C. WALTHOUR, JOHN ALAN, ,	lle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5049 COLFAX AVE S			08 / D D / Y Y Y Y Y 2017										
City MINNEAPOLIS	State MN	Zip Code 55419-1145	Transaction ID : PR2632877047039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		28.08										
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 ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional	al)		486.56										
TOTAL This Period (last page this line nur													

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 232 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 us			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Mic KRUPNICK, BRUCE S, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5616 GATE PARK RD	State	Zip Code											
EDINA	MN	55436-2208	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		30.40										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) roj Mgr	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.00	P/R Deduction (\$15.20 Bi-Weekly)										
Full Name of Individual (Last, First, Mic PLATT, LAWRENCE DAVID, ,		rganization Name	Date of Receipt										
Mailing Address 3830 KING STREET			08 / D D / Y Y Y Y 2017										
City ALEXANDRIA	State VA	Zip Code 22302-1906	Transaction ID : PR2632880747039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Mic C. HOWARD, PATRICIA A, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 12 STAYMAN COURT			08 / D D / Y Y Y Y Y 2017										
City MANALAPAN	State NJ	Zip Code 07726-7928	Transaction ID : PR2632882747039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	nal)		799.60										
TOTAL This Period (last page this line nu	umber only)	•••••											

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PAGE 233 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										
			person for the purpose of soliciting contributions be 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. PARR, MICHAEL J, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 2625 LEROY LANE			08 / D D / Y Y Y Y 08 31 2017										
City WEST BLOOMFIELD	State MI	Zip Code 48324-2237	Transaction ID : PR2632883547039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		34.76										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Compli	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. SARGENT, GLORIA MARGARE		rganization Name	Date of Receipt										
Mailing Address 3659 HEMPSTEAD			08 31 / Y Y Y Y 08 31 2017										
City SAINT CHARLES	State MO	Zip Code 63301	Transaction ID : PR2634119347039 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 SIs Acct Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Middle . HAYES, TREVOR, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3108 SONIA DRIVE	State		M M / D D / Y Y Y Y 08 / 31 / 2017										
City LAS VEGAS	NV	Zip Code 89107-3246	Transaction ID : PR2634166847039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		36.50										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 200.75	P/R Deduction (\$18.25 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)		99.34										
TOTAL This Period (last page this line num	ber only)												

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PAGE 234 OF

		Use separate schedule(s)	(check o	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12						
Any information copied from such Reports and or for commercial purposes, other than using t													
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle HAPGOOD, WADE, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 330 NW 82ND			08 31 2017 Transaction ID : PR2634167047039 Amount of Each Receipt this Period										
City TOPEKA	State KS	Zip Code 66617-2223											
FEC ID number of contributing federal political committee.	C												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Vemo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 928.82	P/R De	ducti	on (\$63.	46 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle B. ARIAN, LEE S, , ,	Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 14077 ROBLAR ROAD				08 / 31 / 2017 Transaction ID : PR2634167547039									
City SHERMAN OAKS	State CA	Zip Code 91423-4615)					
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) Adv/Tech Cnslt Sr Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 224.64	P/R De	ducti	on (\$0.0	0 Bi-Wee	kly)						
Full Name of Individual (Last, First, Middle CASTILLO, FLORA M, , ,	Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 202 N ROSBOROUGH AV			M 08	;	31		2017						
City VENTNOR CITY	State NJ	Zip Code 08406-2022					17794703 is Period	9					
FEC ID number of contributing federal political committee.	С				9	9	192.3	30					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).					,	,	333.2	26					
TOTAL This Period (last page this line number	er only)					-							

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PAGE 235 OF

	•	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Fu		JnitedHealth Group PA	4C)									
Full Name of Individual (Last, I A. PRIBLE, JOHN M, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1923 SHIVER	DR		08 31 / Y Y Y Y 08 31									
City ALEXANDRIA	State VA	Zip Code 22307-1629	Transaction ID : PR2634656647039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individu United HealthCare Services Inc	,	upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, I B. SCHEID, ADREAN ELIS		rganization Name	Date of Receipt									
Mailing Address 2915 CATHED			08 / D D / Y Y Y Y 2017									
City WASHINGTON	State DC	Zip Code 20008-3406	Transaction ID : PR2634880447039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.			384.60									
Name of Employer (for Individu United HealthCare Services Inc	,	upation (for Individual) External Affs	Memo Item									
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, I C. LARAMEE, CHRISTIN		rganization Name	Date of Receipt									
Mailing Address 2902 S ESPE	RANZA AVENUE		08 / D D / Y Y Y Y 08 31 2017									
City TAMPA	State FL	Zip Code 33629-7119	Transaction ID : PR2634881547039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		126.30									
Name of Employer (for Individu United HealthCare Services Inc		upation (for Individual) Dir	Memo Item									
Receipt For: Primary Genera Other (specify)		Year-to-Date ▼ 631.50	P/R Deduction (\$63.15 Bi-Weekly)									
SUBTOTAL of Receipts This Pag	ge (optional)		895.50									
TOTAL This Period (last page th	is line number only)											

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PAGE 236 OF

177			Use separate schedule(s)	(check only one)									
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11		11c 15	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the n			rson for the	purpos	se of so		contribut	ions				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)									
	Full Name of Individual (Last, First, Middle Initia PESCATELLO, SARA M, , ,	l) or Full O	rganization Name	Date o	of Rece	eipt							
	Mailing Address 2149 CALIFORNIA STREET NV APT #D	V		M = M / D = D / Y = Y = Y = Y 08 31 2017 Transaction ID : PR2634888547039 Amount of Each Receipt this Period									
	City WASHINGTON	State DC	Zip Code 20008-1834										
	FEC ID number of contributing federal political committee.	С					-	470.0)8				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		1emo It	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.56	P/R Dec	Juction	(\$235.04	4 Bi-W	eekly)					
	Full Name of Individual (Last, First, Middle Initia POWER, ROBERT B, , ,	l) or Full O	rganization Name	Date o	of Rece	eipt							
	Mailing Address 20 SMITH LANE	Otata	7: 0.4	08		31	/ Y	y y 2017	Y				
	City SAINT JAMES	State NY	Zip Code 11780-3810					9284703 9 s Period)				
	FEC ID number of contributing federal political committee.	С						100.0)0				
	Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt		lemo It	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	P/R Deduction (\$50.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia REED, PAM S, , ,	l) or Full O	rganization Name	Date o	of Rece	eipt							
	Mailing Address 2983 BLACKSTONE			08		D D D 31	/ Y	2017 [°]	Ŷ				
	City FRISCO	State TX	Zip Code 75033-7389					2634703 s Period	9				
	FEC ID number of contributing federal political committee.	С			. y		y	40.0	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ngr Acct Mgmt		lemo It	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 320.00	P/R Deduction (\$20.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•	Γ.	. ,		,	610.0	8				
т	OTAL This Period (last page this line number or	lly)	••••••		1.45		-						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 237 OF

	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													
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
<u>/</u>	Full Name of Individual (Last, First, Middle Initial) ROOS, THOMAS EDWARD, , ,	or Full O	rganization Name	Date of Receipt										
r 	Mailing Address 3199 KAGEN AVE NE			08 31 2017										
	City	State	Zip Code	Transaction ID : PR2635451247039										
	SAINT MICHAEL	MN	55376-3416	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Chief Acctng Off	Memo Item										
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) NELSON, MICHAEL, , ,	or Full O	rganization Name	Date of Receipt										
	Mailing Address 3253 MARSCHALL RD			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										
	City SHAKOPEE	State MN	Zip Code 55379-3337	Transaction ID : PR2636719347039 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		28.08										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Recruit Global	Memo Item										
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) FAGERSTROM, BRADLEY J, , ,	or Full O	rganization Name	Date of Receipt										
	Mailing Address 3736 ZENITH AVENUE SOUTH			08 / D D / Y Y Y Y 08 31 2017										
	City MINNEAPOLIS	State MN	Zip Code 55410-1166	Transaction ID : PR2636728047039										
		C		Amount of Each Receipt this Period 30.76										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comp	Memo Item										
	Pagaint For:		Year-to-Date ▼ 261.46	P/R Deduction (\$15.38 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			443.44										
Т	OTAL This Period (last page this line number only	·)	·····											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 238 OF

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An	y information copied from such Reports and St	atements m	ements may not be sold or used by any per					14 14		15 Soliciting		16 ntribut	17 ions					
	for commercial purposes, other than using the																	
$\overline{)}$	NAME OF COMMITTEE (In Full)																	
\rangle	UnitedHealth Group Incorporate	d PAC (Un	itedHealth Group PA	AC)													
۹.	Full Name of Individual (Last, First, Middle Initi GRIMES, MATT, , ,	al) or Full C	Drga	nization Name	Date of Receipt													
	Mailing Address 136 SOUTH PERKINS ROAD				_													
									08 31 2017									
	City	State		Zip Code		Transaction ID : PR2636733347039												
	MEMPHIS	TN		38117-3233	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С			28.08													
	Name of Employer (for Individual)	Occ	Memo Item															
	United HealthCare Services Inc	Dir	Med	d Clin Ops														
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻														
	Primary General Other (specify) ▼		-9-	238.68		P/R Ded	ucti	on ((\$14.0	94 Bi-W	eekly	/)						
	Full Name of Individual (Last, First, Middle Initi SMITH, KENNETH JOHN, , ,	al) or Full C	Drga	nization Name	Date of Receipt													
	Mailing Address 1200 WASHINGTON ST #202			м м 08	/	ľ	31	/ Y	20)17	Y							
	City	State		Zip Code		Trans	acti	ion	ID : P	R2636	7345	47039						
	BOSTON	MA		02118-2132		Amount	of	Ea	ch Re	eceipt th	nis F	Period						
	FEC ID number of contributing federal political committee.	С				76.92												
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP		Memo Item														
	Receipt For:	Aggregate		1														
	Other (specify) ▼		P	P/R Deduction (\$38.46 Bi-Weekly)														
	Full Name of Individual (Last, First, Middle Initi LAUTSCH, KENNETH RUDOLPH		Drga	nization Name		Date of	Re	ecei	ipt									
	Mailing Address 8933 ASHCROFT AVENUE					08	/	1	31	/ Y)17	Y					
	City	State		Zip Code		Trans	act	ion	ID : F	PR2637	6834	44703	•					
	WEST HOLLYWOOD	CA		90048-2403		Amount	of	Ea	ch Re	eceipt th	nis P	Period						
	FEC ID number of contributing federal political committee.	С						,		9		17.3	8					
	Name of Employer (for Individual)	Occ	cupa	tion (for Individual)	_	М	emo	o Ite	em									
	United HealthCare Services Inc	UH	C SI	s RVP KA														
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻														
	Primary General Other (specify)	P/R Deduction (\$17.38 Bi-We							eekl	y)								
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 239 OF

171			(ch	(check only one)										
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 13		11b 14	11c	12	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the n				for the		pose of	soliciting	contribu	tions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initial PEDERSEN, NICHOLAS MARK, , ,) or Full Or	ganization Name	Date of Receipt										
	Mailing Address 1862 CLOVER MEADOW DR													
	City CHASKA	State MN	Zip Code 55318-5400	Transaction ID : PR2637684747039 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С												
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir C	pation (for Individual) omp		Me	emo) Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 238.68	1	P/R Ded	ucti	on (\$14	.04 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initial LARSON, CHRISTINE M, , ,) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 3360 VISTA COURT		Zip Code		08	/	31		ү ү 2017	Y				
	City HASTINGS	State MN						8874703 is Period	9					
	FEC ID number of contributing federal political committee.	С	55033-3347			01			28.	08				
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) us Anlys Cnslt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initial) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 4833 TOWNES ROAD				08 ^M	1	31		2017 ^Y					
	City EDINA	State MN	Zip Code 55424-1239						59324703 is Period	9				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1	. ,	28.	08				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) nslt Data/Res Anlyst		Me	emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
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PAGE 240 OF

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116	EMIZED RECEIPTS		for each category of the Detailed Summary Page				11b	11c	12				
	y information copied from such Reports and Stat			erson fo		ourp							
<u> </u>	for commercial purposes, other than using the na	ame and ad	ddress of any political committee	e to solic	sit con	tridu	utions tr	om suci		tee.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	AC)									
	Full Name of Individual (Last, First, Middle Initial LIST, CHRISTINE, , ,) or Full Or	rganization Name	Da	ate of	Rec	ceipt						
	Mailing Address 340 DAVIS ST			Mom / 2017 08 31 2017 Transaction ID : PR2637694647039 Amount of Each Receipt this Period									
-	City NORTHBOROUGH	State MA	Zip Code 01532-2420										
	FEC ID number of contributing federal political committee.	С					y	-	95	.22			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 571.32	P/F	t Dedu	uctio	n (\$47.6	61 Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initial SMITH, STEPHANIE MARIE, , ,) or Full Or	rganization Name	Da	ate of	Red	ceipt						
	Mailing Address 14 GATE HILL DRIVE				08	/	D D D 31	/ Y	2017	Y			
	City THE WOODLANDS	State TX	Zip Code 77381-3278						10724703 iis Perioc				
	FEC ID number of contributing federal political committee.	С			31.24								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir		Me	emo	Item						
		Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		218.68	P/R	. Dedu	ictio	n (\$15.6	62 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initial LOGAN, BRETT, , ,) or Full Or	rganization Name	Da	ate of	Red	ceipt						
	Mailing Address 121 3RD STREET NE				08	/	D D D 31	L	2017 [°]	_			
	City WASHINGTON	State DC	Zip Code 20002-7313				-		1127470: iis Perioc				
	FEC ID number of contributing federal political committee.	С					,	9	95	.22			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Regl Affs		Me	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 523.71	P/R Deduction (\$47.61 Bi-Weekly)									
รเ	JBTOTAL of Receipts This Page (optional)						, .	9	221.	.68			
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SCHEDULE A (FEC Form 3X) _ _____

Use separate schedule(s)

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PAGE 241 OF

171			Use separate schedule(s)	(check only one)									
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a 13	\square	11b 14	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for	the		oose of	solicitiną	g contrib	utions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia HAUSCHILDT, TODD CURTIS, , ,	ll) or Full O	rganization Name	Da	Date of Receipt								
	Mailing Address 111 4TH AVE N UNIT 703			08 / D D / Y Y Y Y Y 2017									
	City MINNEAPOLIS	State MN	Zip Code 55401-1538		Transaction ID : PR2638114747039 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					7	а 1 - Арт	76	6.92			
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R	Dedu	uctio	on (\$38.4	46 Bi-W	eekly)				
B.	Full Name of Individual (Last, First, Middle Initia FRY, BENJAMIN HOWARD, , ,	l) or Full O	rganization Name	Da	ate of	Re	ceipt						
	Mailing Address 3115 BRIARCLIFF GABLES CI			08 / D D / Y Y Y Y 2017									
	City ATLANTA	State GA	Zip Code 30329-2456						1149470 nis Perio				
	FEC ID number of contributing federal political committee.	С		126.92									
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir (Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 928.82	P/R Deduction (\$63.46 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia ZEGLINSKI, MICHAEL G, , ,	ll) or Full O	rganization Name	Da	ate of	Re	ceipt						
	Mailing Address 1 TRIMONT LANE #610A City	State	Zip Code		08)	31	L	2017				
	PITTSBURGH	PA	15211-1206						7018470 nis Perio				
	FEC ID number of contributing federal political committee.	С					9	, y	384	1.60			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops		Me	əmo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R	Ded	uctio	on (\$192	2.30 Bi-V	Veekly)				
s	UBTOTAL of Receipts This Page (optional)						9		588	8.44			
т	OTAL This Period (last page this line number or	וy)	•••••	Ē			, .						

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PAGE 242 OF

	-	Use separate schedule(s)	(check o	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a]11b	11c	12						
Any information copied from such Reports ar or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full)	the name and a			onunc		TOTT SUCI	T COMMIN	ee.					
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle EDWARDS, MICHAEL F, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 379 DURHAM ROAD				08 / D D / Y Y Y Y 2017									
City WYCKOFF	State NJ	Zip Code 07481-1018		Transaction ID : PR2639702047039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С				-	-	500.0	00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2750.00	P/R De	educti	on (\$250	0.00 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle B. SKOMO, DAVID A, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 4002 PHILLIPS COURT				08 / 0 0 / 2017 Transaction ID : PR2639702747039									
City MARS	State PA	Zip Code 16046-2140						9					
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 76.92 Memo Item									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. CALABRESE, DAVID CHRIST		rganization Name	Date	of Re	eceipt								
Mailing Address 85 LITTLE POND RD			M 08		31	/ Y	2017	Y					
City NORTHBOROUGH	State MA	Zip Code 01532-1686					70834703 is Period	9					
FEC ID number of contributing federal political committee.	С				y	,	95.2	22					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Aed Clin Ops		Memo	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)				, .		672.1	4					
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:

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PAGE 243 OF

				Detailed Summary Page	×	11a 13		11 14	- H		11c	12	1 47		
	y information copied from such Reports and Stat for commercial purposes, other than using the na					or the		oos	se of						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
A.	Full Name of Individual (Last, First, Middle Initial KAHL, ROBERT A, , ,) or Full O	rgar	nization Name	C	Date of Receipt									
	Mailing Address 218 MANCHESTER LANE				08 / D / Y Y Y Y 2017										
	City PORT BARRINGTON	State IL		Zip Code 60010-7054	Transaction ID : PR2639726147039 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			28.08										
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Svc Acct Mgt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 238.68	P/	R Dedi	uctic	on ((\$14.0	04	Bi-We	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial MESSING, KEITH R, , ,	rgar	nization Name		ate of	Re	cei	ipt							
	Mailing Address 9 BUTTERFIELD DR					м м 08	1	ſ	31]	/ Y	2017	Y		
	City GREENLAWN	State NY		Zip Code 11740-2001		Transaction ID : PR2639734947039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			ļ	28.08 Memo Item)8		
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) os Dev											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial SURRELL, CHRISTOPHER P, , ,) or Full O	rgar	nization Name	C	ate of	Re	cei	ipt						
	Mailing Address 620 DARTINGTON WAY	1				^M 08	1	Ľ	31]	/ Y	y y 2017	Y		
	City JOHNS CREEK	State GA		Zip Code 30022-8045	A							5814703 s Period	9		
	FEC ID number of contributing federal political committee.	С				_		y			y	76.9	92		
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir N	Vktg	ion (for Individual) Bus Dev		Me	emo) Ite	em						
	Primary General Other (specify)	Aggregate	rea	r-to-Date ▼ 653.82	P/	R Ded	uctio	on	(\$38.4	46	Bi-We	ekly)			
S	UBTOTAL of Receipts This Page (optional)			•	[y		l	y	133.()8		
т	OTAL This Period (last page this line number on	ly)		•				7			-g				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 244 OF

		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				outions							
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	NC)								
Full Name of Individual (Last, First, Middle A. HEPLER, CAREY W, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 2936 RIVERSIDE AVENUE APT 3											
City	State	Zip Code	Transaction ID : PR2639760747039								
JACKSONVILLE	FL	32205-8133	Amount of Each Receipt this Period	bd							
FEC ID number of contributing federal political committee.	С		3	4.76							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	Ass	c Dir Bus Process									
Receipt For:	Aggregate	Year-to-Date ▼	D/D Doduction (\$47.20 Di Maakhu)								
Other (specify) ▼		208.56	P/R Deduction (\$17.38 Bi-Weekly)								
		7									
Full Name of Individual (Last, First, Middle JENSEN MOORE, KIMBERLY, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 230 ROSE AVENUE			08 / D D / Y Y Y Y 08 31 2017	Y							
City MILL VALLEY	State CA	Zip Code 94941-1728	Transaction ID : PR2639770347(
FEC ID number of contributing		34341 1720	Amount of Each Receipt this Period	Ju							
federal political committee.	C		61.90								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		371.40	P/R Deduction (\$30.95 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. BIGHAM, ANNE ELIZABETH, ,		Prganization Name	Date of Receipt								
Mailing Address 2610 HOLLY LANE NORTH			08 31 2017	Y							
City	State	Zip Code	Transaction ID : PR2639771447	039							
PLYMOUTH	MN	55447-1727	Amount of Each Receipt this Period	bd							
FEC ID number of contributing federal political committee.	С		47	6.18							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		2857.08	P/R Deduction (\$238.09 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			57	2.84							
TOTAL This Period (last page this line number											

SCHEDULE A (FEC Form 3X) _ _____

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 245 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle A	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 11 EAST WALTON UNIT 4701			08 / D D / Y Y Y Y Y 08 31 2017								
City CHICAGO	State IL	Zip Code 60611-5441	Transaction ID : PR2639773647039 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) Segment CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. DUTTA, SUMIT, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1112 W WRIGHTWOOD A			08 31 / Y Y Y Y 08 31								
City CHICAGO	State IL	Zip Code 60614-1315	Transaction ID : PR2639773847039 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) Seg Chief Med Off	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. HINES, KIRSTEN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 27 E BIRCHWOOD AVE	State	Zin Code	08 / D D / Y Y Y Y Y 08 31 2017								
City HINSDALE	IL	Zip Code 60521-2802	Transaction ID : PR2639786947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			797.28								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 246 OF

ITEMIZED RECEIPTS		ach category of the iled Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incol	porated PAC (United	Health Group PA	AC)								
Full Name of Individual (Last, First, I A. KOUZIOS, CHRISTOPHER J, ,		ion Name	Date of Receipt								
Mailing Address 2650 CONNOLLY L											
		Code	Transaction ID : PR2639790047039								
WEST DUNDEE		0118-1756	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		133.32								
Name of Employer (for Individual) Optum Services, Inc	Occupation Dir IT	(for Individual)	Memo Item								
Receipt For:	Aggregate Year-to-	Date V	-								
Primary General Other (specify) ▼		399.96	P/R Deduction (\$66.66 Bi-Weekly)								
Full Name of Individual (Last, First, I B. NELSON, ELLEN RUTH, , ,	liddle Initial) or Full Organizat	ion Name	Date of Receipt								
Mailing Address 11882 TILDEN PLAC	E		08 31 2017								
City	· · · ·	Code	Transaction ID : PR2639795347039								
WELLINGTON	FL 33	3414-6056	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) Optum Services, Inc	Occupation VP Clnt Svc	(for Individual) Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, I C. SMITH, DELYLE ANDREV		ion Name	Date of Receipt								
Mailing Address PO BOX 447			08 31 2017								
City		Code	Transaction ID : PR2639801547039								
MT PROSPECT	IL 60	0056-0447	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		133.32								
Name of Employer (for Individual) Optum Services, Inc	Occupation Dir IT	(for Individual)	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate Year-to-	Date ▼ 333.30	P/R Deduction (\$66.66 Bi-Weekly)								
SUBTOTAL of Receipts This Page (op	ional)		343.56								
TOTAL This Period (last page this line	number only)	••••••									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 247 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×]11a			11b		11c	12		
A :	information applied from such Department 101					13			14		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	Uni	tedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) BARRAGREE, SHERI ANN, , ,	or Full O	rgar	ization Name	[Date of Receipt								
	Mailing Address 812 BARNES STREET				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									
	5	State		Zip Code										
	MCKINNEY	ТХ		75069-5549	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C			40.00									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Acct Mgmt			Men	no	Iten	n				
	Receipt For: A	ggregate	Yea	r-to-Date ▼										
	Primary General Other (specify) ▼		-	320.00	P/R Deduction (\$20.00 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initial) GALLOWAY, MERCEDEIS PRESTINA		rgar	ization Name		Date	of F	Rec	ceipt	t				
	Mailing Address 630 E 10TH STREET					08 / D D / Y Y Y Y Y 08 31 2017								
	,	State		Trar	nsac	ctic	on II) : P	R2640	4520470	39			
	CHARLOTTE	NC		28202-3130	A	Amou	int c	of E	Each	ו Re	ceipt th	nis Perio	d	
	FEC ID number of contributing federal political committee.	0				_	_	_	7	_	- 15-	30	.40	
	Name of Employer (for Individual) Optum Services, Inc	Occi Dir (Memo Item										
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 228.00	P/R Deduction (\$15.20 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) MOHORIC, MARGARET ELIZABETH		rgar	ization Name		Date	of F	Rec	ceipt	t				
	Mailing Address 6000 REDONDO SIERRA VISTA	NE				M 08		/		31	/ Y	2017	Y	
	5	State		Zip Code		Tra	nsa	cti	on l	D : F	PR2640	4600470	39	
	RIO RANCHO	NM		87144-0606		Amou	int c	of E	Each	ו Re	ceipt th	nis Perio	d	
	FEC ID number of contributing federal political committee.	0				_	_		y		<u> </u>	28	8.08	
	Name of Employer (for Individual)	Осси	upati	ion (for Individual)			Men	no	Iten	n				
	United HealthCare Services Inc	Asso	c Dir	Clin Qlty										
		ggregate	Yea	r-to-Date ▼										
	Other (specify)		P/R Deduction (\$14.04 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)			•					y			98	.48	
т	OTAL This Period (last page this line number only))		•					,					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 248 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
	y information copied from such Reports and Stater for commercial purposes, other than using the nan												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (I	UnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) WU, LAMBERT ANTHONY, , ,	or Full C	Drganization Name	Date of Receipt									
	Mailing Address 11008 CHERWELL COURT	<u></u>		08 / D D / Y Y Y Y 08 / 31 / 2017									
	5	State NV	Zip Code 89144-4526	Transaction ID : PR2640461647039									
				Amount of Each Receipt this Period									
	Name of Employer (for Individual) Health Plan of Nevada		cupation (for Individual) d Dir	Memo Item									
	Receipt For: Ag Primary General Other (specify) ▼	gregate	e Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drganization Name	Date of Receipt									
	Mailing Address 4709 ALTON PL NW			08 / D D / Y Y Y Y 2017									
	City Standard Stand	State DC	Zip Code 20016-2041	Transaction ID : PR2640466447039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	0		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) External Affs	Memo Item									
	Receipt For: Ag Primary General Other (specify) ▼	gregate	e Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drganization Name	Date of Receipt									
	Mailing Address 8607 ELLISTON 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 19038-7957	Transaction ID : PR2640845447039									
		0		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Dir SIs Acct Mgmt	Memo Item									
	Receipt For: Ag Primary General Other (specify)	ggregate	e Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•••••	489.60									
т	OTAL This Period (last page this line number only)		•										

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 249 OF

		Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I SCHUTT, ERIC A, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2359 US HWY 51			08 31 2017									
City MC FARLAND	State WI	Zip Code 53558-9142	Transaction ID : PR2640846247039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I B. BRISSON, SAMUEL M, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3408 YUKON AVENUE			08 / D / Y Y Y Y 2017									
City ST LOUIS PARK	State MN	Zip Code 55426-3840	Transaction ID : PR2640854547039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.04									
Name of Employer (for Individual) Optum Services, Inc	Occ Mgr	upation (for Individual) · IT	P/R Deduction (\$15.02 Bi-Weekly)									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.28										
Full Name of Individual (Last, First, Middle I C. PIERCE-HARRIS, PHELISHA L		rganization Name	Date of Receipt									
Mailing Address 3041 DEE ANN DRIVE			08 / D D / Y Y Y Y Y 2017									
City MEMPHIS	State TN	Zip Code 38119-9132	Transaction ID : PR2640866347039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		34.76									
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:		upation (for Individual) oc Dir Clin Pract Perf	Memo Item									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			449.40									
TOTAL This Period (last page this line number	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 250 OF

			Use separate schedule(s)	(check only one)									
116	MIZED RECEIPTS		for each category of the Detailed Summary Page				11b	11c	12				
	v information copied from such Reports and Stat or commercial purposes, other than using the n												
	VAME OF COMMITTEE (In Full)			10 50					Commu	ee.			
\ \	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
	Full Name of Individual (Last, First, Middle Initial WAGNER, JOSEPH F, , ,) or Full Oi	rganization Name	Date of Receipt									
-	Mailing Address 3405 MEREDITH RIDGE ROAD			08 / D D / Y Y Y Y Y 2017									
	City PHOENIX	State MD	Zip Code 21131-1456	Transaction ID : PR2640875847039 Amount of Each Receipt this Period									
	FEC ID number of contributing rederal political committee.	С							38.4	46			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	upation (for Individual) Fin		Me	emo	Item						
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 326.91	F	P/R Dedu	uctio	on (\$19.	.23 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initial WITT, JULIE, , ,) or Full O	rganization Name		Date of	Re	ceipt						
-	Mailing Address 14273 WATERFORD SQUARE	DRIVE		08 / D D / Y Y Y Y Y Y 2017									
		State	_			-		7604703	9				
-		WI	53151-9509	_	Amount	of	Each R	leceipt th	is Period				
	FEC ID number of contributing ederal political committee.	С		28.08									
	Name of Employer (for Individual) Dptum Services, Inc	Occu Dir A		Me	emo	Item							
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238,68	P/R Deduction (\$14.04 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial WONG, PAMELA LYNN, , ,) or Full Oi	rganization Name		Date of	Re	ceipt						
	Mailing Address 5200 SUMMIT RIDGE DRIVE #1621	Otata	The Octo		08 M	1	31		2017 ^Y				
	City RENO	State NV	Zip Code 89523-9033				-		37694703 is Period	9			
	FEC ID number of contributing ederal political committee.	С			<u> </u>	_	y 1	, ,	28.0	08			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P CInt Relationship		Me	emc	ltem						
l	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 224.64	P/R Deduction (\$14.04 Bi-Weekly)									
รเ	JBTOTAL of Receipts This Page (optional)						, ,		94.6	62			
тс	TAL This Period (last page this line number on	ly)	•••••	-			_						

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FOR LINE NUMBER:

PAGE 251 OF

		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using t			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle STEGMAN, PAM, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 401 2ND STREET NORTH #110			08 / D D / Y Y Y Y 2017								
City MINNEAPOLIS	State MN	Zip Code 55401-1578	Transaction ID : PR2640878447039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		34.76								
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 ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. MINTO, RYAN J, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1505 HERITAGE CLUB AV		Zin Oode	M M / 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 WAKE FOREST	State NC	Zip Code 27587-7698	Transaction ID : PR2640882447039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		101.92								
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 ▼ 791.32	P/R Deduction (\$50.96 Bi-Weekly)								
Full Name of Individual (Last, First, Middle ADVANI, PROTIMA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7618 BRITTANY PARC CT			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								
City FALLS CHURCH	State VA	Zip Code 22043-2907	Transaction ID : PR2642024147039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		200.00								
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 ▼ 1215.38	P/R Deduction (\$100.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			336.68								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 252 OF

	-	Use separate schedule(s)	(check only	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11c	12	_					
Any information copied from such Reports or for commercial purposes, other than usin				ourpose of so								
NAME OF COMMITTEE (In Full)												
> UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Mide A. LIMBAGO, DANIEL FRANCISCO,		rganization Name	Date of Receipt									
Mailing Address 9100 PIXIE COURT			08 / D D / Y Y Y Y 2017									
City FAIRFAX	State VA	Zip Code 22031-3119		Transaction ID : PR2642027447039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С			-	-	28.08	3					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Me	mo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Dedu	uction (\$14.04	Bi-Weekly	')						
Full Name of Individual (Last, First, Mide B. FISHMAN, EINA GAIL, , ,	lle Initial) or Full O	rganization Name	Date of	Beceint								
Mailing Address 27708 WATER ASH DR	IVE			/ D D 31	/ Y Y 20	۲ 17						
City WESLEY CHAPEL	State FL	Zip Code 33544-8752		of Each Rece								
FEC ID number of contributing federal political committee.	С					517.44	4					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Dir	Memo Item									
Receipt For: Primary General	Aggregate	Year-to-Date ▼										
Other (specify)		2685.48	P/R Dedu	iction (\$258.72	2 Bi-Weekl	у)						
Full Name of Individual (Last, First, Mide DASTVAR, DEAN, , ,	,	rganization Name	Date of	Receipt								
Mailing Address 11540 QUAILWOOD M	ANOR DR		08	/ D D D 31	/ Y Y 20	17 17						
City FAIRFAX STATION	State VA	Zip Code 22039-2034		action ID : PR								
FEC ID number of contributing federal political committee.	С			of Each Rece		28.08	8					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Me	emo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)					573.60)					
TOTAL This Period (last page this line nu	mber only)					- 485						

FOR LINE NUMBER:

PAGE 253 OF

	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
			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 BRUECKMAN, BRIAN D, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 4601 PARK COMMONS E #417	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										
City SAINT LOUIS PARK	State MN	Zip Code 55416-4993	Transaction ID : PR2642029447039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		666.66										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UHC Operations	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1999.98	P/R Deduction (\$333.33 Bi-Weekly)										
Full Name of Individual (Last, First, Middle BRANNEN, RAYMOND CLIFTO		rganization Name	Date of Receipt										
Mailing Address 6258 FORT PIERCE WAY	, 		08 / Y Y Y Y 2017										
City HERRIMAN	State	Zip Code 84096-3977	Transaction ID : PR2642030747039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		61.90										
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Training	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		371.40	P/R Deduction (\$30.95 Bi-Weekly)										
Full Name of Individual (Last, First, Middle ALLEN, BRIAN R, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2217 EAST COTTONWO	1		08 / D D / Y Y Y Y 08 31 2017										
City COTTONWOOD HEIGHTS	State UT	Zip Code 84121-5018	Transaction ID : PR2642034847039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		30.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Govt Affs	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)		758.56										
TOTAL This Period (last page this line num	ber only)												

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 254 OF

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 to solicit contributions from such committee.										
NAME OF COMMITTEE (In Fu		JnitedHealth Group PA											
Full Name of Individual (Last, I A. YOUNG, ALLISON, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 15222 ALMA	MATER CT		08 / D / Y Y Y Y 08 2017										
City	State LA	Zip Code	Transaction ID : PR2642830347039										
BATON ROUGE		70810-8389	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		95.22										
Name of Employer (for Individu United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼	-										
Other (specify) ▼		571.32	P/R Deduction (\$47.61 Bi-Weekly)										
Full Name of Individual (Last, I B. LONG, RICHARD JOSE	Date of Receipt												
Mailing Address 618 WASHING UNIT 504	STON AVE N		08 31 2017										
City	State	Zip Code	Transaction ID : PR2642831247039										
MINNEAPOLIS	MN	55401-4111	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		117.64										
Name of Employer (for Individu United HealthCare Services Inc	,	upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 470.56	P/R Deduction (\$58.82 Bi-Weekly)										
Full Name of Individual (Last, I C. FOX, ELIZABETH NIC		rganization Name	Date of Receipt										
Mailing Address 1021 NORTH	GARFIELD STREET #30		08 / D D / Y Y Y Y 08 31 2017										
City	State	Zip Code	Transaction ID : PR2642832047039										
ARLINGTON	VA	22201-2548	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		192.30										
Name of Employer (for Individu United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item										
Receipt For: Primary Genera Other (specify)		Year-to-Date ▼ 1634.55	P/R Deduction (\$96.15 Bi-Weekly)										
SUBTOTAL of Receipts This Pag	ge (optional)	•••••	405.16										
TOTAL This Period (last page th	is line number only)												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 255 OF

			Use separate schedule(s)	(check d	only o	ne)	L							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	a 🗌	11b	11c	12	17					
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson for th		rpose of	soliciting	contribu	tions					
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia BUECHLER, JESSICA, , ,) or Full Oi	rganization Name	Date	of R	eceipt								
	Mailing Address 1233 E STREET NE			08 31 2017 Transaction ID : PR2642833947039 Amount of Each Receipt this Period										
	City WASHINGTON	State DC	Zip Code 20002-6337											
	FEC ID number of contributing federal political committee.	С												
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm		Mem	o Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R D	educt	ion (\$14.	04 Bi-We	eekly)						
в.	Full Name of Individual (Last, First, Middle Initial KEISER-JENKINS, KAREN, , ,	Date	of R	eceipt										
	Mailing Address 9325 MARTINS LAKE DRIVE	01-1-	М	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										
	City ROSWELL	State GA	Zip Code 30076-2865					33444703 is Period						
	FEC ID number of contributing federal political committee.	С		31.72										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir M	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 206.18	P/R Deduction (\$15.86 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initial CRESTA, BRIAN M, , ,) or Full Oi	rganization Name	Date	of R	eceipt								
	Mailing Address 5 OGDEN LANE			м 0		D D D 31	/ Y	2017	Y					
	City MIDDLETON	State MA	Zip Code 01949-1669					83754703 is Period						
	FEC ID number of contributing federal political committee.	С				y .	J	95.	22					
United HealthCare Services Inc Dir			upation (for Individual) /Iktg Bus Dev		Mem	o Item								
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 571.32	P/R D	educt	ion (\$47.	61 Bi-We	eekly)							
s	UBTOTAL of Receipts This Page (optional)					, .	. ,	155.	02					
т	OTAL 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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PAGE 256 OF

			Detailed Summary Page	×	11a 13		11	- H	_	11c 15	12 16	17				
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pos	se of	sol	iciting	contribut	ions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	NC)												
A.	Full Name of Individual (Last, First, Middle Initial) SOCZYNSKI, PAUL F, , ,) or Full O	rganization Name	[Date of	Re	ecei	pt								
	Mailing Address 915 SOUTH 91ST STREET	1			08 31 2017											
	City WEST ALLIS	State WI	Zip Code 53214-2848	A	Transaction ID : PR2643197747039 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			125.00											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir		Me	emo	o Ite	əm								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 437.50	P/R Deduction (\$62.50 Bi-Weekly)												
B.	Full Name of Individual (Last, First, Middle Initial) CRAGLE, STEVE LAURENCE, , ,) or Full O	rganization Name	Date of Receipt												
	Mailing Address 6604 MOHAWK TRAIL	State	4	08 31 2017 Transaction ID : PR2643200647039												
	EDINA	MN	Zip Code 55439-1030	A			-				0064703 s Period)				
	FEC ID number of contributing federal political committee.	С			95.22											
	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 ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)												
	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	[Date of	Re	ecei	pt								
	Mailing Address 1159 BUFFALO RIDGE RD	1			M M 08	/	L	31	1		2017					
	City CASTLE PINES	State CO	Zip Code 80108-8190	A							0314703 s Period	9				
	FEC ID number of contributing federal political committee.	С					y			9	95.2	22				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt		Me	emo	o Ite	em								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)							ekly)					
s	UBTOTAL of Receipts This Page (optional)		····· •				,			,	315.4	4				
т	OTAL This Period (last page this line number onl	y)	•													

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 257 OF

		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Midd HAMMOND, MICHAEL JOSEPH, ,	le Initial) or Full C ,	organization Name	Date of Receipt										
Mailing Address 244 NE 59TH TERR	State	Zip Code	08 31 2017 Transaction ID : PR2644644847039										
ТОРЕКА	KS	66617-1661	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		Memo Item										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 653.82	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middl WINNEROSKI, KEVIN W, , ,													
Mailing Address 4624 WASHBURN AVE			08 31 Y Y Y Y Y 2017										
City MINNEAPOLIS	State MN	Zip Code 55410-1846	Transaction ID : PR2644647147039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		30.40										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.00	P/R Deduction (\$15.20 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. MCKOY, PHILIP GREGORY		organization Name	Date of Receipt										
Mailing Address 927 LINCOLN AVE			08 31 / Y Y Y Y Y 2017										
City SAINT PAUL	State MN	Zip Code 55105-3149	Transaction ID : PR2644651647039										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp CIO	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	al)		491.92										
TOTAL This Period (last page this line nun	nber only)	·····											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 258 OF

	ž	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, M ZIRKELBACH, ANGELA J, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1615 Q ST NW APT #1110			08 31 2017									
City WASHINGTON	State DC	Zip Code 20009-6349	Transaction ID : PR2644660247039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, M SCHACHER, ELIZABETH AL		rganization Name	Date of Receipt									
Mailing Address 3579 13TH ST NW APT 6	0	Zin Oode	08 / D D / Y Y Y Y Y Y 2017									
City WASHINGTON	State DC	Zip Code 20010-2001	Transaction ID : PR2644918347039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3076.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, M MISTRY, RASHMITA, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 404 RAVENSCLIFF		Zin Code										
City MEDIA	State PA	Zip Code 19063-1457	Transaction ID : PR2645169147039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		476.18									
Name of Employer (for Individual) United HealthCare Services Inc	VP (upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2857.08	P/R Deduction (\$238.09 Bi-Weekly)									
SUBTOTAL of Receipts This Page (opti	' onal)		696.56									
TOTAL This Period (last page this line	number only)											

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 259 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 berson for the purpose of soliciting contributions e 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, Mido A. NEALE, MATTHEW, , ,	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 11380 WILD HERON P	Г 		08 31 2017									
City EDEN PRAIRIE	State MN	Zip Code 55347-4729	Transaction ID : PR2645175247039									
FEC ID number of contributing			Amount of Each Receipt this Period									
federal political committee.	C		95.22									
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		571.32	P/R Deduction (\$47.61 Bi-Weekly)									
Full Name of Individual (Last, First, Mido	lle Initial) or Full C	rganization Name										
B. HOFFMAN, SHERRI LINKOFF												
Mailing Address 3409 DEEP WILLOW AV	/ENUE		08 31 2017									
City	State	Zip Code	Transaction ID : PR2646294647039									
PIKESVILLE	MD	21208-3116	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		95.22									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) V		571.32	P/R Deduction (\$47.61 Bi-Weekly)									
Full Name of Individual (Last, First, Mido C. MEBANE, JEREMY J, , ,	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1808 PICADILLY PL			08 31 2017									
City	State TX	Zip Code	Transaction ID : PR2646298047039									
TYLER		75703-2400	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		80.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item									
Receipt For:	I	Ntwk Prgms Year-to-Date ▼	—									
Primary General Other (specify)	P/R Deduction (\$40.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (option	al)		270.44									
TOTAL This Period (last page this line nu	mber only)											

SCHEDULE A (FEC Form 3X) DEOEIDTO

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PAGE 260 OF

171	EMIZED RECEIPTS		Use separate schedule(s)	(che	eck only	or or	ne)	L							
			for each category of the Detailed Summary Page	×	11a 13		11b	11c		12 16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the na				for the		oose of	soliciting	g cont	tributi	ons				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	NC)											
A.	Full Name of Individual (Last, First, Middle Initial ALEXANDER, BRADLEY JAMES, , ,) or Full Or	rganization Name		Date of	Re	ceipt								
	Mailing Address 2600 E CARY ST APT 4104				08 31 2017										
	City RICHMOND	State VA	Zip Code 23223-7895		Transaction ID : PR2646298647039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.					Amount of Each Receipt this Period 36.50										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 200.75	P	/R Dedi	uctio	on (\$18.)	25 Bi-We	eekly))					
в.	Full Name of Individual (Last, First, Middle Initial STANKIEWICZ, DENNIS ANDREW, ,		rganization Name		Date of	Re	ceipt								
	Mailing Address 17761 WEAVER LAKE DRIVE	1	Zip Code		08 / D D / Y Y Y Y Y Y 2017										
	City MAPLE GROVE	State MN					PR26463 eceipt th								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)											
C.	Full Name of Individual (Last, First, Middle Initial LANIER, MICHAEL, , ,) or Full Or	rganization Name		Date of	Re	ceipt								
	Mailing Address 10006 FOX SPRING COURT				08 ^M	/	D D D 31	/ Y	201	17 [°]	Y				
	City OAKTON	State VA	Zip Code 22124-2657					PR2698)				
	FEC ID number of contributing federal political committee.	С					,	, y		36.5	0				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dvlp Sr Cons		Me	emo	Item								
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 200.75						uctio	on (\$18.	25 Bi-We	eekly))					
s	UBTOTAL of Receipts This Page (optional)		••••••	.			,	,		73.0	0				
т	OTAL This Period (last page this line number on	ly)	••••••												

Use separate schedule(s)

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PAGE 261 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle ROSENHAUS, MORGANNE, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 3801 GEORGIA AVE NW APT 506			08 31 2017									
City WASHINGTON	State DC	Zip Code 20011-5938	Transaction ID : PR2698409847039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.40									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Assc Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 212.80	P/R Deduction (\$15.20 Bi-Weekly)									
Full Name of Individual (Last, First, Middle GROSSMAN, BEVERLY, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GROSSMAN, BEVERLY, , ,											
Mailing Address 5 BROOKSIDE AVE			08 / D D / Y Y Y Y 2017									
City MENANDS	State NY	Zip Code 12204-2301	Transaction ID : PR2699179847039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		47.60									
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 ▼ 285.60	P/R Deduction (\$23.80 Bi-Weekly)									
Full Name of Individual (Last, First, Middle AHLSTROM, ALEXIS K, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 3421 OAKWOOD TERRAC		7. 0.1	M M / D D / Y Y Y Y 08 31 2017									
City WASHINGTON	State DC	Zip Code 20010-1819	Transaction ID : PR2699187147039 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.72									
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 ▼ 652.12	P/R Deduction (\$38.36 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			154.72									
TOTAL This Period (last page this line numb	er only)											

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

FOR LINE NUMBER:

PAGE 262 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 th			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)		7 F. C. S. C. C. M. C.											
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle In 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 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y 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 MINNETONKA	State MN	Zip Code 55343-4516	Transaction ID : PR2699187847039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		95.22										
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 ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)										
Full Name of Individual (Last, First, Middle II B. BETCHLEY, ROBERT, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3371 EMERALD VALLEY D			08 / D D / Y Y Y Y 2017										
City ONALASKA	State WI	Zip Code 54650-8746	Transaction ID : PR2699189647039										
FEC ID number of contributing		34030-0740	Amount of Each Receipt this Period										
federal political committee.	С		100.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General	Aggregate	Year-to-Date ▼											
Other (specify) ▼		1215.86	P/R Deduction (\$100.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle In FARRELL, ELIZABETH ANN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 18777 THE PINES	Otata		08 / D D / Y Y Y Y 08 31 2017										
City EDEN PRAIRIE	State MN	Zip Code 55347	Transaction ID : PR2699980047039 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) Ops	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3269.10	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			579.82										
TOTAL This Period (last page this line number	r only)												

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 263 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 usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpc	orated PAC (I	JnitedHealth Group PA	SC)										
Full Name of Individual (Last, First, Midd HECK, DARRYL A, , ,	lle Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 9801 DORSET LANE													
City	State MN	Zip Code	Transaction ID : PR2700831947039										
EDEN PRAIRIE		55347-3139	_ Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		34.76										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgr	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		208.56	P/R Deduction (\$17.38 Bi-Weekly)										
Full Name of Individual (Last, First, Midd B. BOOGERD, MICHAEL T, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BOOGERD, MICHAEL T, , ,												
Mailing Address 1595 SUMMIT SHORES	CIRCLE		08 31 2017										
City BURNSVILLE	State MN	Zip Code 55306-5817	Transaction ID : PR2700842347039 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		34.76 Memo Item										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Sys Anlys Cnslt											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)										
Full Name of Individual (Last, First, Midd C. TERRANOVA, THOMAS S, ,		Prganization Name	Date of Receipt										
Mailing Address 18 DANEMAR DRIVE			08 31 2017										
City	State	Zip Code	Transaction ID : PR2700843647039										
MIDDLETOWN	NJ	07748-3625	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		34.76										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Agnt Mgr	Memo Item										
Receipt For:		Year-to-Date ▼											
Primary General Other (specify)		208.56	P/R Deduction (\$17.38 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	al)		104.28										
TOTAL This Period (last page this line nur	,												

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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FOR LINE NUMBER:

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PAGE 264 OF

			for each category of the Detailed Summary Page	×	-	ı [111		11c		12		_				
	y information copied from such Reports and Statemer for commercial purposes, other than using the name								e of :				ibutio					
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA	C (Un	itedHealth Group PA	C)														
Α.	Full Name of Individual (Last, First, Middle Initial) or I TAGGART, ELIZABETH A, , ,	Full Orga	nization Name		Date of Receipt 08 / 31 / 2017 Transaction ID : PR2700846547039													
	Mailing Address 8530 BELNOR DRIVE																	
	City Sta CICERO NY		Zip Code 13039-8845	_														
	FEC ID number of contributing federal political committee.		13039-8043		Amount of Each Receipt this Period													
	Name of Employer (for Individual) United HealthCare Services Inc	Occupa M&R A	tion (for Individual) gnt Mgr	Memo Item														
	Receipt For: Aggre Primary General Other (specify) ▼	egate Yea	ar-to-Date ▼ 222.04		/R D	edu	ctic	on ((\$15.8	36 Bi-\	Vee	kly)						
	Full Name of Individual (Last, First, Middle Initial) or I OFFIELD, MIRANDA LYNNE, , ,	Date of Receipt																
	Mailing Address 2240 N COUNTRY VISTA BLVD						08 / D D / Y Y Y Y 2017											
	5	StateZip CodeWA99019-5071							Transaction ID : PR2700857547039 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.				38.08													
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Assc Dir Bus Anlys						Memo Item										
	Receipt For: Aggreen and a structure Primary General Other (specify) ▼	egate Yea	ar-to-Date ▼ 228.48	P/	P/R Deduction (\$19.04 Bi-Weekly)													
	Full Name of Individual (Last, First, Middle Initial) or I STEARNS, SALLIE LUANN, , ,) or Full Organization Name					Red	ceij	pt									
	Mailing Address 211 COLONIAL HOMES DRIVE NW #1505				M 08		/		31	1		2017		Ŷ				
	City Sta ATLANTA GA		Zip Code 30309-1293							PR27(
	FEC ID number of contributing federal political committee.				Amoi	unt	of I	Ead	ch Re	eceipt	this		iod 34.76	6				
	Name of Employer (for Individual) Optum Services, Inc	· ·	tion (for Individual) xecutive II	_		Me	mo	lte	em									
	Paggint For:	1	ar-to-Date ▼ 208.56		P/R Deduction (\$17.38 Bi-Weekly)													
S	JBTOTAL of Receipts This Page (optional)		•••••					,		. ,		10	04.56	6				
т	OTAL This Period (last page this line number only)		•					,					-					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 265 OF

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									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	UnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle WARNER, JONATHAN, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 258 CAMBRIDGE DRIVE			M / 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						
City RAMSEY	State NJ	Zip Code 07446-1260	Transaction ID : PR2700873547039						
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) t Mgt Cons CInt Svc	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. PERRY, KIMBERLY GRACE, , ,	Date of Receipt								
Mailing Address 5045 LINDELL BLVD	08 / D D / Y Y Y Y 2017								
City SAINT LOUIS	State MO	Zip Code 63108-1219	Transaction ID : PR2700918047039 Amount of Each Receipt this Period 34.76						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.56	P/R Deduction (\$17.38 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCCAIN, KELLY LYNN, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 531 T STREET NW APT 204			08 / D D / Y Y Y Y Y 2017						
City WASHINGTON	State DC	Zip Code 20001-2087	Transaction ID : PR2700923547039 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) ernal Affs Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 960.00	P/R Deduction (\$60.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			189.52						
TOTAL This Period (last page this line number	er only)	••••••							

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FOR LINE NUMBER:

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PAGE 266 OF

		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			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	4C)								
Full Name of Individual (Last, First, Midd FRINGER, TRICIA LYNN, , , Mailing Address 2809 STANFORD AVE	Date of Receipt										
City											
DALLAS	State TX	Zip Code 75225-7917	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		476.18								
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item								
Receipt For: Primary General Other (specify) ▼	Primary General Agglegate real-to-bate										
Full Name of Individual (Last, First, Midd B. O'CONNELL, DANIEL T, , ,	lle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 3325 W 18TH AVENUE	M M / 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 DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819647039 Amount of Each Receipt this Period 204.16								
FEC ID number of contributing federal political committee.	C										
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 ▼ 1431.20	P/R Deduction (\$102.08 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. SPARKS, KEVIN P, , ,	lle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 10681 S CEDAR NILES	08 / D D / Y Y Y Y 2017										
City OLATHE	State KS	Zip Code 66061-7415	Transaction ID : PR2701825547039								
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) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 624.99	P/R Deduction (\$208.33 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	al)		1097.00								
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Use separate schedule(s)

FOR LINE NUMBER:

PAGE 267 OF

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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. ROTH, TROY D, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7982 WOOD COURT			08 31 2017								
City FRISCO	State TX	Zip Code 75034-8203	Transaction ID : PR2701828947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		95.22								
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 571.32	P/R Deduction (\$47.61 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. UNGAR, ELIZABETH B, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 10115 48TH AV N			08 / D D / Y Y Y Y Y 2017								
City PLYMOUTH	State MN	Zip Code 55442-2521	Transaction ID : PR2702474947039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		34.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir HRIS	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$17.38 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I PEDRONCELLI, ANTONIO VING		rganization Name	Date of Receipt								
Mailing Address 2824 KATHRYN SE			08 / D D / Y Y Y Y 2017								
City ALBUQUERQUE	State NM	Zip Code 87106-3106	Transaction ID : PR2702482147039 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		34.76								
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Ass	upation (for Individual) c Dir Gen Mgmt	Memo Item								
Primary General Other (specify)	Aggregate	P/R Deduction (\$17.38 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			164.74								
TOTAL This Period (last page this line numbe	er only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 268 OF

				each category of the ailed Summary Page		1 1a 13		11b 14	F	11c 15	12 16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the n					for the				soliciting	contribu	itions	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Jnite	edHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Initia KRAMER, NANCY J, , ,	l) or Full O	rganiz	ation Name		Date of	f Re	ceip	t				
	Mailing Address 5701 STONE TRACE DRIVE					08 / D D / Y Y Y Y Y 2017							
	City MASON	State Zip Code OH 45040-8315					Transaction ID : PR2702501447039						
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
	Name of Employer (for Individual) Optum Services, Inc	Occi Dir I		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-t	o-Date ▼ 571.32]	P/R Deduction (\$47.61 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia CHURCHES, KATHRYN M, , ,	l) or Full O	rganiz	ation Name		Date of	f Re	ceip	t				
	Mailing Address 705 CORK CROSSING			08 31 / Y Y Y Y 08 31									
	Cottage grove	State WI		ip Code 53527-8111		Transaction ID : PR270250674 Amount of Each Receipt this Per							
	FEC ID number of contributing federal political committee.	C					34.76						
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Bus Process						Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-t	o-Date ▼ 208.56] F	P/R Ded	uctio	on (\$	17.3	8 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initia MORRIS, MITCHELL, , ,	l) or Full O	rganiz	ation Name		Date of	f Re	ceip	t				
	Mailing Address 200 CONGRESS AVE 47Y	1				08 ^M	1		31	/ Y	үүү 2017	Y	
	City AUSTIN	State TX		ip Code 78701-4507	_						5084470		
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period							
	Name of Employer (for Individual) Optum Services, Inc	Occi SVP		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-t	o-Date ▼ 4999.90]	P/R Ded	luctio	on (\$	\$0.00) Bi-Wee	ekly)		
s	UBTOTAL of Receipts This Page (optional)			••••••	▶ _		_	y	-	5	129	98	
Т	OTAL This Period (last page this line number on	ıly)		••••••	•	L		_					

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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PAGE 269 OF

	EWIZED RECEIPTS			Detailed Summary Page	×	11a		11b		11c		12			
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	y information copied from such Reports and Sta for commercial purposes, other than using the r														
\backslash	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated				AC)										
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BENSON-SCEARCE, DENA L, , ,						Date of Receipt								
Mailing Address 406B RUDOLPH AVE				Zip Code		08 31 2017						Y			
	City	State TN		Transaction ID : PR2703224647039											
	NASHVILLE			37206-1811	A	mount	t of	Each	n Red	ceipt th	is P	eriod			
	FEC ID number of contributing federal political committee.	C		105.26											
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Affs		M	emo	lten	n						
	Receipt For:	Aggregate													
	Primary General Other (specify) ▼ 526.30					P/R Deduction (\$52.63 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia SAMMY, VANESSA VILLAVERDE, ,		rgar	nization Name		Date of	f Re	ceipt	t						
	Mailing Address 3344 BRANTLY RD				M / 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										
	City	State		Zip Code		Trans	acti	ion II) : P	R27041	1907	47039)		
	GLENWOOD	MD		21738-9523	A	mount	t of	Each	n Ree	ceipt th	is P	eriod			
	FEC ID number of contributing federal political committee.	C						312.50							
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Gov		Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 937.50	P/	R Ded	uctic	on (\$	156.2	25 Bi-W	/eek	ly)			
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rgar	ization Name		Date of	f Re	ceipt	t						
	Mailing Address														
	City	State		Zip Code	A	mount	t of	Each	n Red	ceipt th	nis P	eriod			
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	Name of Employer (for Individual)	Occupation (for Individual)							Memo Item						
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SCHEDUL	E B (FEC Form 3X)				0		NUMBER:	PAGE 270 OF 271					
	DISBURSEMENTS		arate schedule(s) category of the			k only	one)						
			Summary Page		$\left - \right $	21b 28a	22 X 23 28b 28c	26 27 29 30b					
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│ / UnitedH	lealth Group Incorporated	I PAC (Ur	nitedHealth (Grou	ip F	AC)						
	(Last, First, Middle Initial) Sinema for Congress	Date of Disbursement											
Mailing Add	ress PO Box 25879												
City		State AZ	Zip Code				FEC Identification Number						
Tempe Purpose of Contributio	Disbursement n	AL	85285	C	011		C C00508804						
Candidate N				Cat	egor	v/	Transaction ID Amount of Each Dis	: 41178319 sbursement this Period					
	, Kyrsten, , Rep.,	ement For:			ype			5000.00					
Office Soug	ht: X House Disburs Senate President	Primary Other (spe	X General				Contribution						
State: AZ							Memo Item						
_	(Last, First, Middle Initial) Of Elizabeth Esty						Date of Disbursement						
	ress PO Box 61												
City Cheshire		State CT	Zip Code 06410				FEC Identification Number						
Contributio	Purpose of Disbursement Contribution 011							C C00494203 Transaction ID : 41178320					
Candidate N	izabeth, , Rep.,				egor ype	y/	Amount of Each Disbursement this Perio						
Office Soug		ement For:	2018		урс		1000.00						
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City Gastonia		State NC	Zip Code 28053				FEC Identification N	lumber					
Contributio	Purpose of Disbursement Contribution 011							: 41178321					
McHen	Candidate Name McHenry, Patrick, Timothy, Rep., Office Sought: X House Senate Disbursement For: 2018 Category/ Type Category/						Amount of Each Disbursement this Period						
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State: NC	Senate President District: 10		Contribution Memo Item										
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	f Disbursements This Page (optional	-				_		8500.00					
TOTAL This F	Period (last page this line number on	ly)											

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER PAGE 271 OF 271				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a	0 one) 22 ¥ 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar	ments may not be sold or us me and address of any polition	ed by any personal committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (UnitedHealth (Group PAC	;)				
Full Name (Last, First, Middle Initial) A. Walker 4 NC Mailing Address PO Box 99247			Date of Disbursement				
5	State Zip Code		FEC Identification Number				
Raleigh Purpose of Disbursement Contribution	NC 27624	011	C C00543231				
Candidate Name Walker, Bradley, , Rep.,		Category/ Type	Transaction ID : 41178322 Amount of Each Disbursement this Period				
Office Sought: House Disburser Senate President Disburser	ment For: 2018 Primary General Other (specify) ▼		Contribution Memo Item				
State: NC District: 06 Full Name (Last, First, Middle Initial) B. George Holding For Congress Inc.			Date of Disbursement				
Mailing Address PO Box 97187	Mailing Address PO Box 97187						
Raleigh	Raleigh NC 27624						
Purpose of Disbursement Void - George Holding For Congress Inc.; check da Candidate Name Holding, George, , Rep.,		011 Category/ Type	C C00499236 Transaction ID : 41220931 Amount of Each Disbursement this Period				
Office Sought: Image: Weight and the second secon	ment For: 2018 Primary General Other (specify)		- 5000.00 Void - George Holding For Congress Inc.; check dated 7/10/1				
Full Name (Last, First, Middle Initial) C. Conservative Roundtable			Date of Disbursement				
Mailing Address PO Box 97275	Mailing Address PO Box 97275						
City Raleigh Purpose of Disbursement Contribution	State Zip Code NC 27624	011	FEC Identification Number				
Candidate Name Conservative Roundtable	Category/ Type	Transaction ID : 41221433 Amount of Each Disbursement this Period					
Office Sought: House Disburser Senate President District:	ment For: Primary General Other (specify) ▼		Contribution Memo Item				
SUBTOTAL of Disbursements This Page (optional)			1000.00				
TOTAL This Period (last page this line number only)			9500.00				