Image# 13963153893			_		PAGE 1 / 105
	EPORT OF F ND DISBURS Other Than An Author	SEMENT	s	Office	Use Only
	e or print V	Example: If typi	ng, type	2FE4M5	
COMMITTEE (in full)		over the lines.			
UnitedHealth Group Incor	porated PAC (Unite	d for Health)			
ADDRESS (number and street)	900 Bren Road East				
Check if different					
than previously reported. (ACC)	∕linnetonka		<b>N</b>	MN 553	43
2. FEC IDENTIFICATION NUMB	ER V CITY	<b>A</b>	STA		ZIP CODE
C C00274431	3. IS RE	$\sim$	NEW N) <b>OR</b>	AMENDEI (A)	)
<ul> <li>4. TYPE OF REPORT (Choose One)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Report (Q1)</li> </ul>	(b) Monthly Report Due On: Apr 20	D (M3) × .	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) ) Jan 31 (YE)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	(C) 12-Day <b>PRE</b> -Election Report for the:	Primary (12F		General (12G) Special (12S)	Runoff (12R)
January 31 Year-End Report (YE)	Election	on /	D D / Y	Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day <b>POST</b> -Election Report for the:	General (300	G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on/	D D / Y	Y Y Y	in the State of
5. Covering Period	01 / Y Y Y Y Y 01 2013	through	M M / 05		013
I certify that I have examined this R Type or Print Name of Treasurer	eport and to the best of m Susan Sherwood	y knowledge and	belief it is true,	correct and comp	lete.
Signature of Treasurer	rwood	[Electronicall	y Filed] Date		20 / 2013
NOTE: Submission of false, erroneous	, or incomplete information	nay subject the per	son signing this I	Report to the pena	lties of 2 U.S.C. §437g.
Office Use Only				FE	C FORM 3X Rev. 12/2004

#### 06/20/2013 19:35

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page **2** 

FEC	Form	3X	(Rev.	02/2003)
 _	-			

Write or Type Committee Name

#### UnitedHealth Group Incorporated PAC (United for Health)

R	eport Covering the Period: From: 05	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	05 / D D / Y Y Y Y 05 31 2013
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		220131.42
	(b) Cash on Hand at Beginning of Reporting Period	279906.63	
	(c) Total Receipts (from Line 19)	45620.24	257895.45
	<ul><li>(d) Subtotal (add Lines 6(b) and</li><li>6(c) for Column A and Lines</li><li>6(a) and 6(c) for Column B)</li></ul>	325526.87	478026.87
7.	Total Disbursements (from Line 31)	70500.00	223000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	255026.87	255026.87
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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

X

Image# '	13963153895
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#### **DETAILED SUMMARY PAGE**

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

# UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: 05	01 / 2013 To:	05 31 2013
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	· ·	
(a) Individuals/Persons Other		
Than Political Committees	07570.00	470004.00
(i) Itemized (use Schedule A)	37570.32	170061.06
		07004.00
(ii) Unitemized	8049.92	87834.39
(iii) TOTAL (add	15000.04	257805.45
Lines 11(a)(i) and (ii)▶	45620.24	257895.45
(b) Delitical Darty Committees	0.00	0.00
(b) Political Party Committees	7 7 7	17 17 17
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines	/7	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	45620.24	257895.45
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	7 7	7 7
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7 7 7	7 7 7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	7 7	7 7
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	7	
(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
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	45620.24	257895.45
Total Fodoral Descipto		
). Total Federal Receipts	45620.24	2E700E 44
(subtract Line 18(c) from Line 19)▶	45620.24	257895.45

#### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(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))► Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	70500.00	, 223000.00
Independent Expenditures (use Schedule E) Coordinated Party Expenditures	0.00	0.00
Coordinated Party Expenditures (2 U.S.C. §441a(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		0.00
Than Political Committees	0.00	
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))►		
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(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))	70500.00	223000.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	70500.00	223000.00

L

#### DETAILED SUMMARY PAGE

of Disbursements

I. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Total Contributions (other than loans) (from Line 11(d), page 3)	45620.24	257895.45
. Total Contribution Refunds (from Line 28(d))	0.00	0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	45620.24	257895.45
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

	Use separate schedu		(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13     14     15     16       erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	ig the name and a		
UnitedHealth Group Incorpo	orated PAC (I	Jnited for Health)	
Full Name (Last, First, Middle Initial) <b>A.</b> CARLA M MUGGIO			Date of Receipt
Mailing Address 3533 FAIR OAKS LANE			05 31 2013
City LONGBOAT KEY	State FL	Zip Code 34228-4121	Transaction ID : PR1159798230141 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		38.46
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Ntwk Contr Aggregate		
Other (specify)		211.53	P/R Deduction (\$19.23 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. KEITH W NOBLITT			Date of Receipt
Mailing Address 122 SOUTH OAK POINT			05 / D D / Y Y Y Y 05 31 2013
City SENECA	State SC	Zip Code 29672-6764	Transaction ID : PR1159805530141 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
Name of Employer United HealthCare Services Inc	Occupation SCE 3 NAs		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. JAMES S WATSON III	I		Date of Receipt
Mailing Address 6520 SHENANDOAH DI	R		05 31 2013
City LINCOLN	State NE	Zip Code 68510-5159	Transaction ID : PR1159806030141
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation	1	_
United HealthCare Services Inc	Assc Gen C		_
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00	P/R Deduction (\$25.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional	al)		128.46
TOTAL This Period (last page this line nur	mber only)		· · · · · · · · · · · · · · · · · · ·

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only			
		for each category of the Detailed Summary Page	<b>X</b> 11a	11b 11c	12	
Any information copied from such Reports an						
or for commercial purposes, other than using	the name and a	address of any political committe	e to solicit cont	ributions from su	ch committe	<del>)</del> e.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (	United for Health)				
Full Name (Last, First, Middle Initial) WAYNE F COOK			Date of	Receipt		
Mailing Address 1200 PEBBLE HILL ROAD	)		м м 05	/ D D / 31	2013	Y
City DOYLESTOWN	State PA	Zip Code 18901-3007		ction ID : PR115 of Each Receipt		I
FEC ID number of contributing federal political committee.	С			3 3	120.	00
Name of Employer United HealthCare Services Inc	Occupation VP Ops	1				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 660.00	P/R Dedu	ction (\$60.00 Bi-\	Veekly)	
Full Name (Last, First, Middle Initial) B. DAVID S WICHMANN			Date of	Receipt		
Mailing Address 7000 ANTRIM ROAD			05	/ D D / 31	2013	Y
City EDINA	State MN	Zip Code 55439-1708		ction ID : PR115		
FEC ID number of contributing federal political committee.	С		Amount	of Each Receipt	384.	60
Name of Employer United HealthCare Services Inc	Occupation EVP Pres U			, ,		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2115.30	P/R Deduc	ction (\$192.30 Bi-	Weekly)	
Full Name (Last, First, Middle Initial) C. PATRICK J ERLANDSON			Date of	Receipt		
Mailing Address 1000 OLD LONG LAKE R			05	/ D D / 31	2013	Y
City WAYZATA	State MN	Zip Code 55391-9690		ction ID : PR115 of Each Receipt		1
FEC ID number of contributing federal political committee.	C			3 3	384.	60
Name of Employer United HealthCare Services Inc	Occupation SVP Bus C					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Dedu	ction (\$192.30 Bi	Weekly)	
SUBTOTAL of Receipts This Page (optional)					889.2	20
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:

(check only one)

PAGE 8 OF

Armation copied from such Reports and commercial purposes, other than using the E OF COMMITTEE (In Full) itedHealth Group Incorporation Name (Last, First, Middle Initial) TRICIA R SAURO Ing Address 8943 HIDDEN MEADOW R DDBURY ID number of contributing al political committee. The of Employer and HealthCare Services Inc ipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) LIAM A MUNSELL	State MN Occupation SVP United	Jnited for Health) Zip Code 55125-9138		Date of 05 Trans	Rec 7	utions fro	om such	y 2013 316430 is Per	ibutio mittee 3 0141		
E OF COMMITTEE (In Full) itedHealth Group Incorporation Name (Last, First, Middle Initial) TRICIA R SAURO Ing Address 8943 HIDDEN MEADOW R DDBURY ID number of contributing al political committee. e of Employer ID HealthCare Services Inc ipt For: Primary General Other (specify) Name (Last, First, Middle Initial)	State MN C Occupation SVP United	Jnited for Health) Zip Code 55125-9138 Hlthcare Year-to-Date ▼		Date of M = M 05 Trans	Rec /	ceipt 31 on ID : F	/ ¥ PR11598	2013 316430 is Per	3 0141 iod	]	
Name (Last, First, Middle Initial) TRICIA R SAURO ng Address 8943 HIDDEN MEADOW R DDBURY ID number of contributing al political committee. e of Employer d HealthCare Services Inc ipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	State MN C Occupation SVP United	Zip Code 55125-9138 Hlthcare Year-to-Date ▼	A	M M M 05 Trans	/ actio	31 on ID : F		2013 3 <b>16430</b> is Per	3 <b>)141</b> iod	]	
TRICIA R SAURO         ng Address 8943 HIDDEN MEADOW R         DDBURY         ID number of contributing al political committee.         e of Employer         rd HealthCare Services Inc         ipt For:         Primary       General         Other (specify) ▼         Name (Last, First, Middle Initial)	MN Occupation SVP United	55125-9138 Hithcare Year-to-Date ▼	A	M M M 05 Trans	/ actio	31 on ID : F		2013 3 <b>16430</b> is Per	3 <b>)141</b> iod	]	
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e of Employer	Occupation										
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	Aggregate	Year-to-Date ▼									
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C     e of Employer   Other (specify) ▼     Name (Last, First, Middle Initial)   HN S PENSHORN   ng Address 120 BLACK OAKS LANE     YZATA   ID number of contributing   al political committee.   e of Employer   occupation   State   YZATA   ID number of contributing   al political committee.   e of Employer   od HealthCare Services Inc   stype   Other (specify) ▼   Other (specify) ▼   Other (specify) ▼ Other (specify) ▼ Other (specify) ▼	Address 2119 WINDSONG CIRCLE   ZATA   State   Zip Code   MN   55391-2259   ID number of contributing al political committee. e of Employer d HealthCare Services Inc inpt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ (C) 1100.00 Name (Last, First, Middle Initial) HN S PENSHORN Ing Address 120 BLACK OAKS LANE (ZATA State Zip Code MN 55391-1363 ID number of contributing al political committee. e of Employer Occupation SvP UnitedHith Group Aggregate Year-to-Date ▼ (C) 2115.30	Address 2119 WINDSONG CIRCLE   State Zip Code   /ZATA MN   D number of contributing al political committee.   e of Employer d HealthCare Services Inc   Primary General Other (specify) ▼   Name (Last, First, Middle Initial) HN S PENSHORN   HN 55391-1363   ID number of contributing al political committee.   Qddress 120 BLACK OAKS LANE   VZATA State   Zip Code MN   YZATA State   Do number of contributing al political committee.   e of Employer Cocupation site Committee.   P/   YZATA   State   Zip Code MN   YZATA   State   Zip Code MN   YZATA   State   Zip Code MN   YZATA   State   Zip Code MN   YZATA   D number of contributing al political committee.   e of Employer Primary   Occupation SVP UnitedHith Group   Aggregate Year-to-Date   Primary   General   Primary   General	ng Address 2119 WINDSONG CIRCLE	ng Address 2119 WINDSONG CIRCLE   ZATA   Xarta   ZATA   MN   55391-2259   ID number of contributing al political committee.   c of Employer d HealthCare Services Inc   ipt For: Primary Other (specify) ▼   Name (Last, First, Middle Initial) HN S PENSHORN ng Address 120 BLACK OAKS LANE   MN   55391-1363   ID number of contributing al political committee.   e of Employer Primary Cherrent Other (specify) ▼   Other (specify) Transaction   Aggregate Year-to-Date Transaction   Name (Last, First, Middle Initial) HN S PENSHORN ng Address 120 BLACK OAKS LANE   MN   55391-1363   Date of Remain Of Of Transaction   ZATA   MN   State   Zip Code MN   Transacti Of Of Transaction   P/R Deduction   SVP UnitedHith Group   Aggregate Year-to-Date ▼   Primary   General Other (specify) ▼	In a ddress 2119 WINDSONG CIRCLE     ZATA     State   Zip Code     MN     55391-2259     ID number of contributing   al political committee.   e of Employer   d HealthCare Services Inc   ipt For:   Primary   General   Other (specify)     P/R Deduction (\$100.      P/R Deduction (\$100.   P/R Deduction (\$100.    P/R Deduction (\$100.   P/R Deduction (\$100.   P/R Deduction (\$100.   Name (Last, First, Middle Initial)   HN S PENSHORN   ng Address 120 BLACK OAKS LANE   vZATA   State   Zip Code   MN   55391-1363   Date of Receipt   Aggregate Year-to-Date ▼   P/R Deduction (\$10.   P/R Deduction (\$10.   P/R Deduction (\$10.   P/R Deduction (\$10. P/R Deduction (\$10. P/R Deduction (\$10. P/R Deduction (\$10. P/R Deduction (\$10. P/R Deduction (\$10. P/R Deduction (\$192. <td>In a Address 2119 WINDSONG CIRCLE     ZATA     ID number of contributing   al political committee.   e of Employer   d HealthCare Services Inc   ipt For:   Primary   General   Other (specify) ▼     Aggregate Year-to-Date ▼   P/R Deduction (\$100.00 Bi-W)     P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$192.30 Bi-W) P/R Deduction (\$192.30 Bi-W)</td> <td>ng Address 2119 WINDSONG CIRCLE     ZATA     MN     55391-2259     ID number of contributing al political committee.     c     a of Employer   d HealthCare Services Inc   EVP UnitedHith Group   ipt For:   Primary   General   Other (specify) ▼     Name (Last, First, Middle Initial)   HN S PENSHORN   ng Address 120 BLACK OAKS LANE     Di number of contributing al political committee.   e of Employer   Other (specify) ▼     Date of Receipt   MN   55391-1363         Date of Receipt this Perilipseifegging   Aggregate Year-to-Date ▼   Occupation   EVP UnitedHith Group   MN   55391-1363                                      P/R Deduction (\$100.00 Bi-Weekly)     Transaction ID : PR1159816933    Aggregate Year-to-Date ▼    ID number of contributing al political committee.   e of Employer   Occupation   State   ZIP Code   MN   55391-1363      ID number of contributing al political committee.   e of Employer</td> <td>ng Address 2119 WINDSONG CIRCLE  ZATA  State Zip Code MN 55391-2259  C ZATA MN 55391-2259  C Amount of Each Receipt this Period  Amount of Each Receipt this Period  P/R Deduction (\$100.00 Bi-Weekly)  P/R Deduction (\$100.00 Bi-Weekly)  P/R Deduction (\$100.00 Bi-Weekly)  Date of Receipt  Aggregate Year-to-Date ▼ Primary General C State Zip Code MN 55391-1363  Date of Receipt  State State C State Stat</td>	In a Address 2119 WINDSONG CIRCLE     ZATA     ID number of contributing   al political committee.   e of Employer   d HealthCare Services Inc   ipt For:   Primary   General   Other (specify) ▼     Aggregate Year-to-Date ▼   P/R Deduction (\$100.00 Bi-W)     P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$100.00 Bi-W)   P/R Deduction (\$192.30 Bi-W) P/R Deduction (\$192.30 Bi-W)	ng Address 2119 WINDSONG CIRCLE     ZATA     MN     55391-2259     ID number of contributing al political committee.     c     a of Employer   d HealthCare Services Inc   EVP UnitedHith Group   ipt For:   Primary   General   Other (specify) ▼     Name (Last, First, Middle Initial)   HN S PENSHORN   ng Address 120 BLACK OAKS LANE     Di number of contributing al political committee.   e of Employer   Other (specify) ▼     Date of Receipt   MN   55391-1363         Date of Receipt this Perilipseifegging   Aggregate Year-to-Date ▼   Occupation   EVP UnitedHith Group   MN   55391-1363                                      P/R Deduction (\$100.00 Bi-Weekly)     Transaction ID : PR1159816933    Aggregate Year-to-Date ▼    ID number of contributing al political committee.   e of Employer   Occupation   State   ZIP Code   MN   55391-1363      ID number of contributing al political committee.   e of Employer	ng Address 2119 WINDSONG CIRCLE  ZATA  State Zip Code MN 55391-2259  C ZATA MN 55391-2259  C Amount of Each Receipt this Period  Amount of Each Receipt this Period  P/R Deduction (\$100.00 Bi-Weekly)  P/R Deduction (\$100.00 Bi-Weekly)  P/R Deduction (\$100.00 Bi-Weekly)  Date of Receipt  Aggregate Year-to-Date ▼ Primary General C State Zip Code MN 55391-1363  Date of Receipt  State State C State Stat	

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		-	Use separate schedule(s)			(check only one)					
			for each category of the Detailed Summary Page		11a 13		11b 14	11c	12	17	
			l ay not be sold or used by any p ddress of any political committed		or the		pose of				
	OMMITTEE (In Full) ealth Group Incorpor	ated PAC (l	Jnited for Health)								
	ast, First, Middle Initial) ALLMEYER			D	ate of	f Re	eceipt				
Mailing Addre	ess 468 HERALD DR				м м 05	/	31	) / Y	2013	Y	
City AMBLER		State PA	Zip Code 19002-1530				ion ID :		8174301 nis Period		
FEC ID numb federal politic	per of contributing al committee.	С					,		10	0.00	
Receipt For:	Care Services Inc		n Counsel Mgr Year-to-Date ▼ 550.00		R Ded	luctio	on (\$50.	.00 Bi-We	∋ekly)		
B. TIMOTHY	ast, First, Middle Initial) <b>FRYAN</b> PSS 4913 BRUCE AVE				ate of		eceipt		Y Y	Y	
City		State	Zip Code	46	05		31		2013 <b>8179301</b> 4	_	
EDINA		MN	55424-1113	A	moun	t of	Each R	Receipt th	nis Period	t	
FEC ID numb federal politic	per of contributing al committee.	С					7		194	4.00	
Receipt For:	Care Services Inc	<b>_</b>	nt Gen Counsel Year-to-Date ▼ 1067.00	P/F	R Ded	uctic	on (\$97.	00 Bi-We	∋ekly)		
Full Name (L C. THOMAS	ast, First, Middle Initial) S J QUIRK	•		D	ate of	f Re	eceipt				
	4307 BEECHWOOD LAN				м м 05	/	31	) / Y	ү ү 2013	Y	
City DALLAS		State TX	Zip Code 75220-1909						8191301 nis Perioc		
FEC ID numb federal politic	per of contributing al committee.	С					7		10	0.00	
Name of Emp United Health Receipt For:	Care Services Inc	Occupation Hith Plan C Aggregate			R Ded	luctio	on (\$50	.00 Bi-We	eeklv)		
Other (	specify) ▼	L	550.00	Ц,							
SUBTOTAL of	Receipts This Page (optional	)			_	_	,		394	1.00	
TOTAL This Pe	eriod (last page this line num	ber only)					,				

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

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ITEMIZED RECEIPTS	Use separate schedule(s)		(check only one)
II EIVIIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 1
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
> UnitedHealth Group Incor	porated PAC (	United for Health)	
Full Name (Last, First, Middle Initial) A. WILLIAM C TRACY			Date of Receipt
Mailing Address 13016 CANTERBUR	Y		
City	State	Zip Code	05312013 Transaction ID : PR1159821530141
LEAWOOD	KS	66209-1768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.40
Name of Employer	Occupation	1	
United HealthCare Services Inc	Hith Plan C	EO	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.70	P/R Deduction (\$57.70 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. RICHARD J MIGLIORI			Date of Receipt
Mailing Address PO BOX 72			05 31 2013
City	State	Zip Code	Transaction ID : PR1159827430141
WAYZATA	MN	55391-0072	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer United HealthCare Services Inc	Occupation		
Receipt For:	SVP Bus In		
Primary General	Aggregate	Year-to-Date ▼	
Other (specify) ▼		, 1100.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. JEANNINE M RIVET			Date of Receipt
Mailing Address 4305 TRILLIUM WAY	/		
			05 31 2013
City	State MN	Zip Code	Transaction ID : PR1159830030141
MINNETRISTA	IVIIN	55364-7708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer	Occupation		
United HealthCare Services Inc	EVP United	dHlth Grp	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (opt	ional)		700.00
TOTAL This Period (last page this line	number only)		

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

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		Use separate schedule(s)	(check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c	12
Any information copied from such Reports and s or for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full)				in committee.
UnitedHealth Group Incorporat	ed PAC (l	United for Health)		
Full Name (Last, First, Middle Initial) A. JACK E SHUFF			Date of Receipt	
Mailing Address 360 ASPEN LANE			05 31	2013
City	State	Zip Code	Transaction ID : PR1159	830530141
COVINGTON	LA	70433-5736	Amount of Each Receipt t	nis Period
FEC ID number of contributing federal political committee.	С			78.00
Name of Employer	Occupation	1		
United HealthCare Services Inc	SB RVP			
Receipt For:	Aggregate	Year-to-Date ▼		
Other (specify)		429.00	P/R Deduction (\$39.00 Bi-W	eekly)
		1		
Full Name (Last, First, Middle Initial) B. JILL WINTERS	I		Date of Receipt	
Mailing Address 16 SPOEDE LN			05 31 / Y	2013
City	State MO	Zip Code	Transaction ID : PR1159	
SAINT LOUIS	MO	63141-7708	Amount of Each Receipt t	nis Period
FEC ID number of contributing federal political committee.	С			108.00
Name of Employer United HealthCare Services Inc	Occupation	l		
	Regn Pres			
Receipt For: Primary General	Aggregate	Year-to-Date ▼		
Other (specify) ▼		, 594.00	P/R Deduction (\$54.00 Bi-W	eekly)
Full Name (Last, First, Middle Initial) C. Mr. ANTHONY WELTERS	I		Date of Receipt	
Mailing Address 919 SAIGON ROAD			05 31	2013
City	State	Zip Code	Transaction ID : PR1332	013230141
MCLEAN	VA	22102-2116	Amount of Each Receipt t	nis Period
FEC ID number of contributing federal political committee.	С			384.60
Name of Employer	Occupation	l	_	
United HealthCare Services Inc	EVP United	Hith Group		
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-	Veekly)
SUBTOTAL of Receipts This Page (optional)	l			570.60
TOTAL This Period (last page this line number	only)	······		

# SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		]11b	11c	12	
Any information copied from such Reports		ay not be sold or used by any p						
or for commercial purposes, other than us	sing the name and a	address of any political committee	e to solicit c	ontri	butions t	rom sucr		ee.
UnitedHealth Group Incorp	oorated PAC (	United for Health)						
Full Name (Last, First, Middle Initial) <b>A.</b> ROBERT J BOHNENKAMP			Date	of Re	eceipt			
Mailing Address 4925 WOODS COUR	r		05		31	) / Y	2013	Y
City GREENWOOD	State MN	Zip Code 55331-9291					<b>00563014</b> nis Period	1
FEC ID number of contributing federal political committee.	C				7		78.	00
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Bus Segme	ent CIO	_					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R De	educti	ion (\$39.	.00 Bi-We	∍ekly)	
Full Name (Last, First, Middle Initial) B. MICHAEL J BRESOLIN			Date	of Re	eceipt			
Mailing Address 121 W VIEW STREET		Zin Oada	05		31		2013	
City LOMBARD	State IL	Zip Code 60148-1659					005730141 nis Period	
FEC ID number of contributing federal political committee.	С				,	,	40.	00
Name of Employer United HealthCare Services Inc	Occupation Dir Care Ac							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R De	ducti	on (\$20.	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. JEFFREY W KAGAN			Date	of Re	eceipt			
Mailing Address 52 CRESTWOOD LA	NE		05		31	) / Y	2013	Y
City FARMINGVILLE	State NY	Zip Code 11738-1000					13233014 nis Period	1
FEC ID number of contributing federal political committee.	C				7		40	.00
Name of Employer	Occupation	1						
United HealthCare Services Inc Receipt For:	VP Prod							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R De	educt	ion (\$20	.00 Bi-We	ekly)	
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	EMIZED RECEIPTS		Detailed Summary Page		<b>(</b> 11a		11	b	11c	12	2	
			, , ,		13		14		15	16		17
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p address of any political committee	erson e to so	for the plicit co	purı ntrib	rpos outic	se of sons fro	soliciting om sucl	i contri 1 comr	ibutio nittee	ns e.
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	United for Health)									
A.	Full Name (Last, First, Middle Initial) MICHAEL C MATTEO				Date o	f Re	ecei	ipt				
	Mailing Address 25 JEREMIAHS WAY				м м 05	1		31	/ Y	y 2013		
	City	State CT	Zip Code		Trans	sacti	ion	ID : F	PR1551	133430	0141	
	SOUTH GLASTONBURY		06073-3621		Amoun	t of	Ea	ch Re	ceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С					7		7		38.4	6
	Name of Employer United HealthCare Services Inc	Occupation Chief Grow										
	Receipt For:											
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	]   F	P/R Dec	luctio	ion (	(\$19.2	3 Bi-We	∍ekly)		
В.	Full Name (Last, First, Middle Initial) THOMAS J VALERIUS				Date o	f Re	ecei	ipt				
	Mailing Address 2820 DEER RUN TRAIL				M M 05			31	/ Y	2013		1
	City	State	Zip Code			acti	ion		R15511	-		
	LONG LAKE	MN	55356-9690		Amoun	t of	Ea	ch Re	ceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С					J		7	1	53.8 <sup>,</sup>	4
	Name of Employer United HealthCare Services Inc	Occupation VP Recruiti										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	] P	P/R Ded	uctio	on (	(\$76.9	2 Bi-We	ekly)		
с.	Full Name (Last, First, Middle Initial) LOIS T WEIHRAUCH				Date o	f Re	ecei	ipt				
	Mailing Address 10392 SHERMAN DRIVE				м м 05	/		31	/ Y	y 2013		1
	City	State	Zip Code		Trans	sact	tion	ID : F	PR1551	161430	0141	
	EDEN PRAIRIE	MN	55347-4452		Amoun	t of	Ea	ch Re	ceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С					7		,	1	120.0	0
	Name of Employer	Occupation	1	$\neg$								
	United HealthCare Services Inc	VP Gen Mg	ymt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		660.00	]   '	P/R Dec	ductio	ion	(\$60.0	00 Bi-We	∋ekly)		
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			for each category of the Detailed Summary Page		11a 13		11k	р —	11c 15	12 16	17
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$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) JOHN O ENDERLE				Date o	f Re	eceip	ot			
	Mailing Address 31 ANDREIS TRAIL	0			м м 05		L	31		2013	
	City SOUTH WINDSOR	State CT	Zip Code 06074-2142							32353014	
	FEC ID number of contributing federal political committee.	C			ιποαη		⊨a0	л ке	ceipt th	is Perioc	).00
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation Regn Exec Aggregate		P/	/R Ded	luctio	ion (	\$55.0	0 Bi-We	ekly)	
в.	Full Name (Last, First, Middle Initial)			1	Date o	f Re	eceip	ot			
	Mailing Address 42820 VIOLA CT				м м 05	/	D	31	/ Y	2013	Y
	City LEESBURG	State VA	Zip Code 20176-6847		Trans			ID : P		32453014 is Period	
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	Name of Employer United HealthCare Services Inc	Occupation COO Collat	porative Care								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 594.00	P/	/R Ded	luctio	on (	\$54.0	0 Bi-We	ekly)	
с.	Full Name (Last, First, Middle Initial) CATHERINE E SPILLANE				Date o	f Re	eceip	ot			
	Mailing Address 3807 PLEASANT VALLEY DRI				м м 05	/	D	31	/ Y	2013	Y
	City MISSOURI CITY	State TX	Zip Code 77459-4111							3246301	
	FEC ID number of contributing federal political committee.	С			hioun		1	u rie	,	is Perioo 3	a 8.46
	Name of Employer	Occupation	I								
	United HealthCare Services Inc	Dir Bus Pro	cess								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P	/R Dec	ducti	ion (	\$19.2	3 Bi-We	ekly)	
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			Detailed Summary Page		11a		11b	11c		12	<u> </u>
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	for commercial purposes, other than using th										
$\backslash$	NAME OF COMMITTEE (In Full)										
/	UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) KAREN L ERICKSON			1	Date of	Re	eceipt				
	Mailing Address 15348 RED OAKS ROAD SE				м м 05	1	31	/ Y		13	Y
	City	State	Zip Code		Trans	acti	ion ID : P	R15759	9576	30141	
	PRIOR LAKE	MN	55372-1834	/	Amount	of	Each Re	ceipt th	is Pe	eriod	
	FEC ID number of contributing federal political committee.	С					,	7	_	384.	60
	Name of Employer	Occupation									
	United HealthCare Services Inc	Optum Exe	C								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		2115.30	P/	/R Ded	uctio	on (\$192.	30 Bi-W	/eekl	y)	
	Full Name (Last, First, Middle Initial) ERNEST MONFILETTO	1			Date of	Re	eceipt				
	Mailing Address 3062 COMFORT ROAD				м м 05	/	31	/ Y	20 <sup>2</sup>	ү 13	Y
	City	State	Zip Code		Trans	acti	ion ID : P	R15759	)581	30141	
	NEW HOPE	PA	18938-5622	#	Amount	of	Each Re	ceipt th	is Po	eriod	
	FEC ID number of contributing federal political committee.	С					,	7	_	153.8	34
	Name of Employer United HealthCare Services Inc	Occupation Plan Pres									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	P/	′R Dedi	uctio	on (\$76.9	2 Bi-We	ekly	)	
	Full Name (Last, First, Middle Initial) LEE D VALENTA	I			Date of	Re	eceipt				
	Mailing Address 4701 GOLF TERRACE				м м 05	/	D D D 31	/ Y	ې 20	ү 13	Y
	City	State	Zip Code		Trans	act	ion ID : F	R1575	9585	30141	
	EDINA	MN	55424-1514	/	Amount	of	Each Re	ceipt th	is Pe	eriod	
	FEC ID number of contributing federal political committee.	С						3	_	384.	60
	Name of Employer	Occupation		_							
	United HealthCare Services Inc	Pres Lif Sci	s								
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	Primary General			P.	/R Ded	ucti	on (\$192.	30 Bi-W	√eek	ly)	
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			Detailed Summary Page		11a 13	-	11b 14	11c	12	17
	y information copied from such Reports and for commercial purposes, other than using the				or the		pose of	soliciting	contribu	tions
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat									
<u> </u>	Full Name (Last, First, Middle Initial) THOMAS S PAUL				Date of	Re	ceipt			
	Mailing Address 2006 QUEEN AVENUE SOL	JTH			м м	/	. 31	/ Y	2013	Y
	City MINNEAPOLIS	State MN	Zip Code 55405-2350	A			-	PR15808 eceipt th		
	FEC ID number of contributing federal political committee.	С					7	7	200	0.00
	Name of Employer United HealthCare Services Inc	Occupation UHC Chief								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P/	R Dedi	uctio	on (\$10	0.00 Bi-W	(eekly)	
в.	Full Name (Last, First, Middle Initial) ROBERT THOMAS WEBB			C	Date of	Re	ceipt			
	Mailing Address 4516 DREXEL AVENUE				м м 05	/	31	/ Y	ү ү 2013	Y
	City EDINA	State MN	Zip Code 55424-1130					PR15808 eceipt th		
	FEC ID number of contributing federal political committee.	С					7		384	.60
	Name of Employer United HealthCare Services Inc	Occupation SVP United								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/	R Dedu	uctio	on (\$192	2.30 Bi-W	eekly)	
с.	Full Name (Last, First, Middle Initial) RICHARD J HUGHES				Date of	Re	ceipt			
	Mailing Address 735 SAINT MORITZ				м м 05	/	31	/ Y	ү 2013	Y
	City VICTORIA	State MN	Zip Code 55386-3706	A				PR1596: eceipt th		
	FEC ID number of contributing federal political committee.	С					7	7	200	0.00
	Name of Employer	Occupation								
	United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		n Capital Dev Year-to-Date ▼ 1100.00	P/	R Ded	ucti	on (\$10	0.00 Bi-W	/eekly)	
s	UBTOTAL of Receipts This Page (optional)						7	- 7	784	.60

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	MIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or fo	or commercial purposes, other than using the			rson for the purpose of soliciting contributions to solicit contributions from such committee.
	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporate	ed PAC (l	United for Health)	
	ull Name (Last, First, Middle Initial) THAD C JOHNSON			Date of Receipt
_	lailing Address 16848 STIRRUP LN			05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity EDEN PRAIRIE	State MN	Zip Code 55347-3339	Transaction ID : PR1596304330141           Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		200.00
U	ame of Employer Inited HealthCare Services Inc Receipt For:		Gen Counsel	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)
	ull Name (Last, First, Middle Initial)			Date of Receipt
N	lailing Address 3801 ABBOTT AVE S			05 31 2013
	iity /INNEAPOLIS	State MN	Zip Code 55410-1036	Transaction ID : PR1596304530141 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		230.76
	ame of Employer nited HealthCare Services Inc	Occupation Sr Deputy C	i Gen Counsel	_
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1269.18	P/R Deduction (\$115.38 Bi-Weekly)
	ull Name (Last, First, Middle Initial) JAY S MATUSHAK			Date of Receipt
_	lailing Address 9346 SHETLAND ROAD			05 31 Y Y Y Y Y
	ity EDEN PRAIRIE	State MN	Zip Code 55347-3749	Transaction ID : PR1596304630141 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		78.00
N	ame of Employer	Occupation	1	-
	Inited HealthCare Services Inc leceipt For:	VP Finance		_
Г	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)
SU	BTOTAL of Receipts This Page (optional)		•	508.76
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An	ny information copied from such Reports and St for commercial purposes, other than using the	tatements managed of	ay not be sold or used by any p ddress of any political committee	erson f	or the	purı ətrib	pose of	soliciting	contribu	tions ee
	NAME OF COMMITTEE (In Full)		pointou committe	0 30		. er Hu		0u0l		
$\rangle$	UnitedHealth Group Incorporate	d PAC (I	Jnited for Health)							
[				_	_	_				
A.	Full Name (Last, First, Middle Initial) CAROL B MORNESS				Date of	Re	ceipt			
	Mailing Address 401 N 2ND ST UNIT 512				M M	_		/ Y	YY	Y
					05	J.	31	JL	2013	
		State	Zip Code						80493014	1
	MINNEAPOLIS	MN	55401-1591	/	Amount	t of	Each R	eceipt thi	is Period	
	FEC ID number of contributing federal political committee.	С				_	3	- 7	76	.92
	Name of Employer	Occupation		_						
	United HealthCare Services Inc	Dir Underwi	riting							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General			<b>P</b> /	R Ded	uctio	on (\$38.	46 Bi-We	ekly)	
	Other (specify)		423.06	1						
	Full Name (Last, First, Middle Initial)									
B.	DANIEL J SCHUMACHER			[	Date of	Re	ceipt			
-	Mailing Address 11582 RASPBERRY HILL RO/	AD			M M	_		/ Y	Y Y	Y
					05	Ľ	31	J Ĺ	2013	
	City	State	Zip Code		Trans	acti	ion ID : I	PR15963	0543014	1
	EDEN PRAIRIE	MN	55344-3268	A	4mount	t of	Each R	eceipt thi	is Period	
	FEC ID number of contributing	С			-	-			230	00
	federal political committee.				_	-	7	7	230	
	Name of Employer	Occupation		$\neg$						
	United HealthCare Services Inc	Mkt Group (	CFO							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General	<u>.</u>		P/.	'R Dedu	uctio	on (\$115	5.00 Bi-W	eekly)	
	Other (specify) 🔻		, 1265.00	]   _						
	Full Name (Last, First, Middle Initial)			—						
C.				[	Date of	Re	ceipt			
	Mailing Address 1950 MEADOWWOODS TRAI				M M	/		/ Y	YY	Y
					05	J.	31	JL	2013	
	City	State	Zip Code		Trans	act	ion ID :	PR15963	80563014	1
	LONG LAKE	MN	55356-9312	#	\mount	t of	Each R	eceipt thi	is Period	
	FEC ID number of contributing	С							38	.46
	federal political committee.				_	-	7	7		
	Name of Employer	Occupation		_						
	United HealthCare Services Inc	Bus Segme	Int CFO	_						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General			P/	/R Ded	ucti	on (\$19.	23 Bi-We	ekly)	
	Other (specify)		211.53							
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	y information copied from such Reports and S for commercial purposes, other than using the									ibutio	
	NAME OF COMMITTEE (In Full)										
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) THOMAS D LEWIS				Date of	Re	ceipt				
	Mailing Address 306 CHIPPEWA AVENUE				м м 05	/	D D D	/ Y	2013		1
	City TAMPA	State FL	Zip Code 33606-3614					PR15963 eceipt th			-
	FEC ID number of contributing federal political committee.	С					7	5		76.9	2
	Name of Employer United HealthCare Services Inc	Occupation Hith Plan C									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	]	P/R Ded	uctio	on (\$38.	46 Bi-We	eekly)		
в.	Full Name (Last, First, Middle Initial) ROBERT W OBERRENDER				Date of	Re	ceipt				
	Mailing Address 4505 MOORLAND AVENUE	01.1	7.0.1		05	/	31	/ Y	2013		
	City EDINA	State MN	Zip Code 55424-1158					PR15963 eceipt th			
	FEC ID number of contributing federal political committee.	C				. 01	J	eceipt in		220.0	0
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation SVP Treasu Aggregate		 P	P/R Dedu	uctio	on (\$110	).00 Bi-W	/eekly)		
 C.	Full Name (Last, First, Middle Initial) DIANE BEDNAR FLYNN		<u></u>	+	Date of	Re	ceipt				
	Mailing Address 3318 FOXRIDGE CIRCLE				м м 05	1	31	/ Y	2013		1
	City TAMPA	State FL	Zip Code 33618-2149					PR1596: eceipt th			
	FEC ID number of contributing federal political committee.	С					7	5		78.0	0
	Name of Employer United HealthCare Services Inc Econoint Ecr:	Occupation Regn Exec	Dir								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	]   '	P/R Ded	ucti	on (\$39.	.00 Bi-We	eekly)		
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An	y information copied from such Reports and S	tatements ma	l ay not be sold or used by any po	erson f	13 or the	pur	14 pose	of s	15 oliciting	contrit	outio	17 ns
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate			e to sol	IICIT COP	ITID	oution	s fro	orn such		ittee	
A.	Full Name (Last, First, Middle Initial) STEVAN D GARCIA				Date of	Re	eceipt					
	Mailing Address 28115 BOULDER BRIDGE DF	RIVE			м м	/		D 31	/ Y	2013		1
	City	State	Zip Code		Trans	acti	ion IC	) : P	R15963	312930 <sup>-</sup>	141	
	EXCELSIOR	MN	55331-7959	/	Amount	of	Each	Re	ceipt th	is Perio	bc	
	FEC ID number of contributing federal political committee.	С					7		7		38.4	6
	Name of Employer	Occupation	l									
	United HealthCare Services Inc	SVP Ops										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/	/R Dedu	uctio	on (\$ <sup>-</sup>	19.23	3 Bi-We	ekly)		
В.	Full Name (Last, First, Middle Initial) KURT A HEUMANN				Date of	Re	eceipt					
	Mailing Address 9825 GERALD DR				м м 05	1		D 31	/ Y	ү ү 2013	Y	
	City	State	Zip Code							8137301		
	SAINT LOUIS	MO	63128-1767		Amount	of	Each	Re	ceipt th	is Perio	bd	_
	FEC ID number of contributing federal political committee.	С					7		7		40.00	)
	Name of Employer United HealthCare Services Inc	Occupation VP Finance										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/	R Dedu	uctio	on (\$2	20.00	0 Bi-We	ekly)		
C.	Full Name (Last, First, Middle Initial) JOHN H RENNICK JR			[	Date of	Re	eceipt					
	Mailing Address 3220 LAKEWOOD EDGE DR				м м 05	/		31	/ Y	2013	Y	
	City CHARLOTTE	State NC	Zip Code 28269-7705							316830		
	FEC ID number of contributing federal political committee.	С			Amount	OT	Each	Re	ceipt th	is Perio	38.4	6
	Name of Employer	Occupation	1	_								
	United HealthCare Services Inc	Med Dir										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		211.53	P	/R Ded	ucti	on (\$	19.2	3 Bi-We	ekly)		
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Any information copied from such Reports and Statements may not be sold or used by any per or for commercial purposes, other than using the name and address of any political committee to NAME OF COMMITTEE (In Full)         NAME OF COMMITTEE (In Full)         UnitedHealth Group Incorporated PAC (United for Health)         Full Name (Last, First, Middle Initial)         A.         DANIEL I ROSENTHAL         Mailing Address 109 SLEEPY HOLLOW LANE         City       State         ORINDA       CA         FEC ID number of contributing federal political committee.         Name of Employer       Occupation         United HealthCare Services Inc       Regn CEO         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       State         KEVIN J RUTH       Mailing Address 16621 ALEXANDER MANOR DRIVE         City       State       Zip Code         SILVER SPRING       MD       20905-5028         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         Name of Employer       Occupation         Number of contributing federal political committee.       MD         Name of Employer       Occupation         Name of Employer       Occupation <th></th>	
UnitedHealth Group Incorporated PAC (United for Health)         Full Name (Last, First, Middle Initial)         A. DANIEL I ROSENTHAL         Mailing Address 109 SLEEPY HOLLOW LANE         City       State       Zip Code         ORINDA       CA       94563-1340         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       Regn CEO         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name (Last, First, Middle Initial)       B.         KEVIN J RUTH       Mailing Address 16621 ALEXANDER MANOR DRIVE         City       State       Zip Code         SILVER SPRING       MD       20905-5028         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation	M         M         /         D         /         Y         Y         Y         Y           05         31         2013         2013         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1
A. DANIEL I ROSENTHAL         Mailing Address 109 SLEEPY HOLLOW LANE         City       State       Zip Code         ORINDA       CA       94563-1340         FEC ID number of contributing federal political committee.       C       Image: Committee Committe	M         M         /         D         /         Y         Y         Y         Y           05         31         2013         2013         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1
City     State     Zip Code       ORINDA     CA     94563-1340       FEC ID number of contributing federal political committee.     C       Name of Employer     Occupation       United HealthCare Services Inc     Regn CEO       Receipt For:     Aggregate Year-to-Date ▼       Primary     General       Other (specify) ▼     211.53       Full Name (Last, First, Middle Initial)       B.     KEVIN J RUTH       Mailing Address 16621 ALEXANDER MANOR DRIVE       City     State       SILVER SPRING     MD       FEC ID number of contributing federal political committee.       Name of Employer     Occupation       Name of Employer     Occupation	05 31 2013 Transaction ID : PR1596317330141
ORINDA       CA       94563-1340         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       Regn CEO         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       211.53         Full Name (Last, First, Middle Initial)         B.       KEVIN J RUTH         Mailing Address 16621 ALEXANDER MANOR DRIVE         City       State       Zip Code         SILVER SPRING       MD       20905-5028         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation	
FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       Regn CEO         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       211.53         Full Name (Last, First, Middle Initial)       C         S.       KEVIN J RUTH         Mailing Address 16621 ALEXANDER MANOR DRIVE       Zip Code         City       State       Zip Code         SILVER SPRING       MD       20905-5028         FEC ID number of contributing federal political committee.       Occupation         Name of Employer       Occupation	_ Amount of Each Receipt this Period
United HealthCare Services Inc       Regn CEO         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       211.53         Full Name (Last, First, Middle Initial)       211.53         B. KEVIN J RUTH       Mailing Address 16621 ALEXANDER MANOR DRIVE         City       State       Zip Code         SILVER SPRING       MD       20905-5028         FEC ID number of contributing federal political committee.       Occupation         Name of Employer       Occupation	38.46
Primary       General         Other (specify)       211.53         Full Name (Last, First, Middle Initial)       211.53         B. KEVIN J RUTH       Mailing Address 16621 ALEXANDER MANOR DRIVE         City       State       Zip Code         SILVER SPRING       MD       20905-5028         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation	-
B. KEVIN J RUTH Mailing Address 16621 ALEXANDER MANOR DRIVE City State Zip Code SILVER SPRING MD 20905-5028 FEC ID number of contributing federal political committee. Name of Employer United Unalth Care Services Inc.	P/R Deduction (\$19.23 Bi-Weekly)
City     State     Zip Code       SILVER SPRING     MD     20905-5028       FEC ID number of contributing federal political committee.     C       Name of Employer     Occupation	Date of Receipt
SILVER SPRING     MD     20905-5028       FEC ID number of contributing federal political committee.     C       Name of Employer     Occupation	05 31 2013
federal political committee.  Name of Employer United Health Care Services Inc.	Transaction ID : PR1596317430141 Amount of Each Receipt this Period
United Lealth Care Services Inc.	150.00
	-
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       825.00	P/R Deduction (\$75.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. DAVID C STURKEY	Date of Receipt
Mailing Address 1625 CONE FLOWER WAY	05 31 2013
CityStateZip CodeSUWANEEGA30024-8576	Transaction ID : PR1596318430141
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 78.00
Name of Employer Occupation	-
United HealthCare Services Inc KA VP SIs Acct Mgmt	
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       429.00	P/R Deduction (\$39.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	

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			Detailed Summary Page		11a		11b	11c		12	<u> </u>
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	for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
/	UnitedHealth Group Incorporate	ed PAC (l	United for Health)								
Α.	Full Name (Last, First, Middle Initial) JEFFREY ALAN TODD			[	Date of	Re	eceipt				
	Mailing Address 467 PRAIRIE WAY SOUTH				M M		D - D	/ Y	Y	Y	Y
				_	05		31		20	013	
	City	State MN	Zip Code		Trans	acti	ion ID :	PR1596	3190	<b>)3014</b> 1	
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	FEC ID number of contributing federal political committee.	С				_	,			50.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	VP Underw	riting								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		275.00	P/	'R Ded	uctio	on (\$25.	00 Bi-W	eekly	/)	
			1								
В.	Full Name (Last, First, Middle Initial) M LAURIE WASSERSTEIN				Date of	Re	eceipt				
	Mailing Address 92 GOODWIN CIRCLE				M M	/	DD	/ Y	Y	Y	Y
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	City	State CT	Zip Code				on ID : I				
	HARTFORD		06105-5205		Amount	: of	Each R	eceipt th	nis P	eriod	_
	FEC ID number of contributing federal political committee.	С					<u></u>			38.	46
	Name of Employer	Occupation									
	United HealthCare Services Inc	PS NA VP (	CInt Mgmt								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		211.53	P/	R Dedu	uctio	on (\$19.2	23 Bi-We	eekly	()	
				11.							
с.	Full Name (Last, First, Middle Initial) MYRON R WERLEY				Date of	Re	eceipt				
	Mailing Address 4260 FOXBERRY COURT				м м 05	1	31	/ Y		)13	Y
	City	State	Zip Code		Trans	act	ion ID :	PR1596	3196	6 <b>30</b> 141	
	MEDINA	MN	55340-9390	/	Amount	of	Each R	eceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					,	,		40.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Dir Underw	riting								
	Receipt For:	Aggregate	Year-to-Date ▼								
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#### SCHEDULE A (FEC Form 3X) \_ \_ \_ \_ \_

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)	
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			13     14     15     16       erson for the purpose of soliciting contributions       to solicit contributions from such committee.	17 s
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (I	United for Health)		
Full Name (Last, First, Middle Initial) <b>A.</b> JOHN P DODDY			Date of Receipt	
Mailing Address 1 ROXITICUS VIEW			05 31 2013	
City CHESTER	State NJ	Zip Code 07930-3020	Transaction ID : PR1600597330141           Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		78.00	
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation VP Info Tec Aggregate		P/R Deduction (\$39.00 Bi-Weekly)	
Full Name (Last, First, Middle Initial) MICHAEL D MICHAUX Mailing Address 742 GOODRICH AVE			Date of Receipt	
City SAINT PAUL	State MN	Zip Code 55105-3343	Transaction ID : PR1600598530141 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		200.00	
Name of Employer United HealthCare Services Inc	Occupation VP GM PCI			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)	
Full Name (Last, First, Middle Initial) C. LEWIS G SANDY			Date of Receipt	
Mailing Address 4800 SUNNYSLOPE RC	DAD E		05 31 2013	
City EDINA	State MN	Zip Code 55424-1163	Transaction ID : PR1600598730141 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		200.00	
Name of Employer United HealthCare Services Inc	Occupation SVP Clin A	dvancement		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)	
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check on	ly one)	L		
		for each category of the Detailed Summary Page	X 11a	11b	11c	12	47
Any information copied from such F or for commercial purposes, other t							
NAME OF COMMITTEE (In Full)							
> UnitedHealth Group In	corporated PAC (	United for Health)					
A. MATTHEW W PETERSON	1		Date o	of Receipt			
Mailing Address 20595 SPENCE	R LANE		05	31	У / Ү	2013	Y
City	State MN	Zip Code		saction ID :		66993014	1
EXCELSIOR	IVIIN	55331-4523	Amour	nt of Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	C					200	.00
Name of Employer	Occupatior	1					
United HealthCare Services Inc	Bus Segme	ent CAO					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P/R Dee	duction (\$10	0.00 Bi-W	/eekly)	
Full Name (Last, First, Middle In B. JEFFREY W MALONEY	tial)		Date o	of Receipt			
Mailing Address 18076 CLEAR S			05	31	) / Y	2013	Y
City	State MN	Zip Code		saction ID :			1
EDEN PRAIRIE	IVIIN	55347-1078	Amour	nt of Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	C					192.	30
Name of Employer United HealthCare Services Inc	Occupation						
Receipt For:	VP Gen Mg	·					
Primary General	Aggregate	Year-to-Date ▼	<b>D</b> ( <b>D D</b> )	L .: (\$\$			
Other (specify)		, 1057.65	P/R Dec	duction (\$96.	15 BI-VVe	екіу)	
Full Name (Last, First, Middle Ini C. WILLIAM F KENNEDY	tial)		Date o	of Receipt			
Mailing Address 14 MYRA LN			05	/ D C 31		2013	Y
City	State	Zip Code	Tran	saction ID :	PR16534	44313014	1
BURLINGTON	СТ	06013-1327	Amour	nt of Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	C					40	.00
Name of Employer	Occupatior	1					
United HealthCare Services Inc	Dir IT						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R De	duction (\$20	.00 Bi-We	eekly)	
SUBTOTAL of Receipts This Page	(optional)	)			- 7	432.	30
TOTAL This Period (last page this	line number only)						

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page		11a		11b	11c	12	<u> </u>
	y information copied from such Reports and s									
	for commercial purposes, other than using the									
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)							
 A.	Full Name (Last, First, Middle Initial) STEVE R KOOREN				Date of	Re	ceipt			
	Mailing Address 4444 ELLSWORTH DRIVE				м м 05	1	31	/ Y	у у 2013	Y
	City	State	Zip Code		Trans	acti	ion ID :	PR16534	4323014	1
	EDINA	MN	55435-4150	A	mount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					,	7	384	.60
	Name of Employer	Occupation								
	United HealthCare Services Inc	Bus Segme	nt CFO							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		2115.30	P/	R Ded	ucti	on (\$192	2.30 Bi-W	(eekly)	
В.	Full Name (Last, First, Middle Initial) THOMAS J BELLAMY	l			Date of	Re	ceipt			
	Mailing Address 2743 THOMAS AVENUE SO				м м 05	1	31	/ Y	y y 2013	Y
	City	State	Zip Code						4433014	
	MINNEAPOLIS	MN	55416-4346	A	mount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					,	7	115	.40
	Name of Employer United HealthCare Services Inc	Occupation SB RVP								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.70	P/	R Dedi	uctio	on (\$57.	70 Bi-We	ekly)	
с.	Full Name (Last, First, Middle Initial) ALISTAIR D JACQUES	I			Date of	Re	ceipt			
	Mailing Address 645 OLD LONG LAKE ROAD				м м 05	1	31	/ Y	ү ү 2013	Y
	City WAYZATA	State MN	Zip Code 55391-9684						4523014	
		IVIIN	55591-9004	A	mount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С				_			384	.60
	Name of Employer	Occupation								
	United HealthCare Services Inc	Bus Segme								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						(a al the)	
	Other (specify) ▼		2115.30		R Ded	ucti	on (\$192	2.30 Bi-W	(eekiy)	
s	UBTOTAL of Receipts This Page (optional)								884	.60

# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

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IT!	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)
111			for each category of the Detailed Summary Page	X 11a 11b 11c 12
				13     14     15     16     17       erson for the purpose of soliciting contributions
or		the name and a	ddress of any political committe	e to solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (l	Jnited for Health)	
Α.	Full Name (Last, First, Middle Initial) ELIZABETH DARCIE CORBIN			Date of Receipt
	Mailing Address 7985 LEA CIRCLE			M M / D D / Y Y Y Y Y 05 31 _ 2013 _
	City BLOOMINGTON	State MN	Zip Code 55438-1286	Transaction ID : PR1669432230141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer United HealthCare Services Inc	Occupation VP Hlth Ca		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00	P/R Deduction (\$100.00 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. MILES S SNOWDEN			Date of Receipt
	Mailing Address 3412 KNOLLWOOD DRIVE		7.0.1	05 / D D / Y Y Y Y Y 05 31 2013
	City ATLANTA	State GA	Zip Code 30305-1020	Transaction ID : PR1746717830141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation Chief Med 0 Aggregate		
	Primary General Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)
C.	Full Name (Last, First, Middle Initial) WILLIAM TALAMANTES			Date of Receipt
	Mailing Address 11618 ROLLING MEADOW	/ DR		05 31 2013
	City GREAT FALLS	State VA	Zip Code 22066-1342	Transaction ID : PR1806444730141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.00
	Name of Employer United HealthCare Services Inc	Occupation Six Sigma (		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	P/R Deduction (\$40.00 Bi-Weekly)
		1		

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	X	-		-	1b	_	11c	$\vdash$	12	<u> </u>	
	y information copied from such Reports and S for commercial purposes, other than using the							se of	so		con			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	United for Health)	_	_		_	_	_	_	_	_	_	
A.	Full Name (Last, First, Middle Initial) PAUL M EMERSON				Date o	f Re	ece	eipt						
	Mailing Address 18855 MEADOW VIEW BLVD	)			05 31 2013									
	City	State	Zip Code		Trans	sacti	ior	ו ID :	PR	18067	/503	3014	1	
	PRIOR LAKE	MN	55372-3133	_	Amoun	t of	Ea	ach F	Rece	eipt thi	is Pe	eriod		
	FEC ID number of contributing federal political committee.	С					7			7		76	.92	
	Name of Employer	Occupation		1										
	United HealthCare Services Inc	Bus Segme	nt CFO											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		423.06	P/	/R Dec	luctio	on	(\$38	.46	Bi-We	ekly	')		
	Full Name (Last, First, Middle Initial)				Date o	f Re	ece	eipt						
	Mailing Address 37 W 2000 S				м м 05	/	ľ	D 31		/ Y	۲ 202	ү 13	Y	
	City	State	Zip Code	Transaction ID : PR190355073								3014 <sup>-</sup>	1	
	DRIGGS	ID	83422-4874	A	Amoun	t of	Ea	ach F	Rece	eipt thi	is Pe	eriod		
	FEC ID number of contributing federal political committee.	С					,			7		115.	40	
	Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.70	P/	'R Ded	uctio	on	(\$57.	.70	Bi-We	ekly)	)		
с.	Full Name (Last, First, Middle Initial) KATHLEEN L BISHOP				Date o	f Re	ece	eipt						
	Mailing Address 145 COTTAGE RD				м м 05	/	l	D 1		/ Y	۲ 20	ү 13	Y	
	City	State	Zip Code							19035			1	
	ENFIELD	СТ	06082-2208	A	Amoun	t of	Ea	ach F	Rece	eipt thi	is Pe	eriod		
	FEC ID number of contributing federal political committee.	С					3			7		40	.00	
	Name of Employer	Occupation		$\neg$										
	United HealthCare Services Inc	Dir Gen Mg	mt											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		220.00	P	/R Dec	ductio	ion	(\$20	.00	Bi-We	ekly	()		
	UBTOTAL of Receipts This Page (optional)		· · ·				5	_	-	7		232.	32	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		<b>1</b> 1a		11b		11c		12	
					13		14		15		16	17
	y information copied from such Reports and Si for commercial purposes, other than using the											
$\backslash$	NAME OF COMMITTEE (In Full)											
$\sum$	UnitedHealth Group Incorporate	d PAC (l	United for Health)									
Α.	Full Name (Last, First, Middle Initial) ROBERT J DUFEK				Date of	f Re	eceipt					
	Mailing Address 816 PROMONTORY PLACE				м м 05	/		D 31	/ Y		013	Y
	City	State	Zip Code		Trans	acti	ion IE	) : Pl	R19035			
	EAGAN	MN	55123-2297		Amount	t of	Each	Rec	ceipt th	is P	'eriod	
	FEC ID number of contributing federal political committee.	С					ŋ		3	_	50.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc Receipt For:	VP IT		_								
	Primary General	Aggregate	Year-to-Date ▼				on (¢(		-יאי וס ר			
	Other (specify) ▼		275.00		P/R Ded	ucti	UII (\$2	23.00	ים י-vve	:eki)	()	
в.	Full Name (Last, First, Middle Initial) SUSAN B EDBERG				Date of	f Re	eceipt					
	Mailing Address 9727 WELLINGTON RIDGE				05	/		31	/ Y		)13	Y
	City	State	Zip Code			acti			R19035			
	WOODBURY	MN	55125-9592	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					7		7	_	200.	00
	Name of Employer United HealthCare Services Inc	Occupation Bus Segme										
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1100.00	P	/R Ded	uctio	on (\$1	100.0	00 Bi-W	'eek	ly)	
С.	Full Name (Last, First, Middle Initial) CHRISTOPHER T JOHNSON				Date of	f Re	eceipt					
	Mailing Address 12880 53RD STREET NORTH	1			м м 05	/		D 31	/ Y		)13	Y
	City STILLWATER	State MN	Zip Code 55082-1063		<b>Trans</b> Amount				R1903			1
	FEC ID number of contributing federal political committee.	С					Lacii		יין ארוייגען אין אין אין אין אין אין אין אין אין אי	13 P	78.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	VP Gen Mo										
	Receipt For:		Year-to-Date ▼	_								
	Primary General	, iggi ogulo		F P	P/R Ded	luctio	on (\$:	39.00	) Bi-We	ekly	y)	
	Other (specify)	L	429.00				•					
s	UBTOTAL of Receipts This Page (optional)		•••••	•			7		7		328.0	00
т	OTAL This Period (last page this line number of	only)		•								

Use separate schedule(s)

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	for commercial purposes, other than using th			erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (L	Inited for Health)	
Α.	Full Name (Last, First, Middle Initial) JOHN C SANTELLI			Date of Receipt
	Mailing Address 20030 EXCELSIOR BLVD			M = M         /         D = D         /         Y = Y = Y = Y           05         31         _         2013
	City EXCELSIOR	State MN	Zip Code 55331-8727	Transaction ID : PR1903622030141
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation SVP CIO		
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) PAUL D WEYMOUTH	l		Date of Receipt
	Mailing Address 317 WRIGHTS MILL RD			05 31 2013
	City COVENTRY	State CT	Zip Code 06238-1559	Transaction ID : PR1903636930141
	FEC ID number of contributing federal political committee.	C	00230-1559	Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc	Occupation VP Finance		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)
с.	Full Name (Last, First, Middle Initial) RUSSELL A BENNETT			Date of Receipt
	Mailing Address 4 HALSEY AVE			05 31 2013
	City LAGUNA NIGUEL	State CA	Zip Code 92677-5327	Transaction ID : PR2119468030141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer	Occupation		
	United HealthCare Services Inc	Dir Mktg Bu	s Dev	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number		<b>r</b>	278.46

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	•	Use separate schedule(s)	(check on	ly one)	L		
		for each category of the Detailed Summary Page	X 11a	11b	11c	12	<b></b>
Any information copied from such Rep or for commercial purposes, other that							
NAME OF COMMITTEE (In Full) UnitedHealth Group Inco	prporated PAC (	United for Health)					
Full Name (Last, First, Middle Initia SUSAN LYNN BERKEL	l)		Date o	f Receipt			
Mailing Address 10 SHADOW GLE	N		M M	/ D D 31	/ Y	2013	Y
City IRVINE	State CA	Zip Code 92620-0204		saction ID : I it of Each Re			1
FEC ID number of contributing federal political committee.	C					384.	.00
Name of Employer United HealthCare Services Inc	Occupation SVP Ops	1	_				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2112.00	P/R Dec	duction (\$192	2.00 Bi-W	'eekly)	
Full Name (Last, First, Middle Initia KATHIE L BRYAN	l)		Date o	f Receipt			
Mailing Address 912 JOSHUA PLA		7. 0.1	05	/ D D 31	/ Y	2013	Y
City SAN DIEGO	State CA	Zip Code 92154-2537		saction ID : I			l
FEC ID number of contributing federal political committee.	С	32134-2337	Amour	t of Each Re	eceipt th	50.	00
Name of Employer         United HealthCare Services Inc         Receipt For:         Primary       General         Other (specify) ▼	I	rkting Comm Year-to-Date ▼ 275.00	P/R Dec	luction (\$25.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initia C. DAVID S CARLSON	l)		Date o	f Receipt			
Mailing Address 13130 WESTPOR			05	/ D D 31	/ Y	2013	Y
City MOORPARK	State CA	Zip Code 93021-2958		saction ID : It of Each Re			1
FEC ID number of contributing federal political committee.	C				7	40	.00
Name of Employer United HealthCare Services Inc Receipt For:	Occupatior Dir Mktg R	sch					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Dec	duction (\$20.	00 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (	ptional)					474.	00
TOTAL This Period (last page this lir	e number only)						

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page		11a		11b		11c		12			
			Detailed Summary Page		13		14		15		16	17		
or	y information copied from such Reports and S for commercial purposes, other than using the													
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Jnited for Health)											
A.	Full Name (Last, First, Middle Initial) LESLIE J CARTER				Date of	Re	ceipt							
	Mailing Address 19021 POPPY HILL CIRCLE			05 31 2013										
	City	State	Zip Code		Trans	acti	ion II	) : P	R2119	4703	33014 <sup>-</sup>			
	HUNTINGTON BEACH	CA	92648-6710	_ 4	Amount	of	Each	Re	ceipt th	nis F	Period			
	FEC ID number of contributing federal political committee.	С					7		,		192.	00		
	Name of Employer	Occupation	l	-										
	United HealthCare Services Inc	Dir Ntwk Co	ontrctng											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		1056.00	P	/R Ded	uctio	on (\$9	96.0	0 Bi-We	eekl	y)			
	Full Name (Last, First, Middle Initial) RICHARD A CROSS				Date of	Re	eceipt							
	Mailing Address 11361 DONOVAN ROAD				м м 05	1		D 31	/ Y		)13	Y		
	City	State	Zip Code		Trans	acti	on ID	) : P	R21194	4718	<b>3014</b> 1			
	ROSSMOOR	CA	90720-2931	_	Amount	of	Each	Re	ceipt th	nis F	Period			
	FEC ID number of contributing federal political committee.	С					7		7		50.	00		
	Name of Employer United HealthCare Services Inc	Occupation Deputy Ger	n Counsel Mgr											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	P	/R Dedu	uctic	on (\$2	25.0	0 Bi-We	eekly	()			
с.	Full Name (Last, First, Middle Initial) KENNETH R DAVIS				Date of	Re	eceipt							
	Mailing Address 315 N 71ST ST				м м 05	/		D 31	/ Y		)13	Y		
	City SEATTLE	State WA	Zip Code 98103-5019		Trans Amount				PR2119 ceipt th			1		
	FEC ID number of contributing federal political committee.	С					7		,		40	00		
	Name of Employer	Occupation	1	-										
	United HealthCare Services Inc	Med Dir												
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		220.00	P	P/R Ded	uctio	on (\$	20.0	00 Bi-W	eekl	y)			
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			- -			7				282.	00		

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

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check on	ly one)			
		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	
Any information copied from such Reports and	Statements ma	av not be sold or used by any n	erson for the	Durpose o	15 f soliciting	16 L contribu	17 tions
or for commercial purposes, other than using th							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)					
Full Name (Last, First, Middle Initial) A. LINDA M DAYAN			Date c	of Receipt			
Mailing Address 5364 E ABBEYFIELD ST			05	/ D 31		ү ү 2013	Y
City LONG BEACH	State CA	Zip Code 90815-3023		saction ID			1
FEC ID number of contributing federal political committee.	С					38	.00
Name of Employer United HealthCare Services Inc	Occupation Chief of Sta						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 209.00	P/R Dec	duction (\$1	9.00 Bi-We	eekly)	
Full Name (Last, First, Middle Initial) <b>B.</b> AMY J GILDERNICK			Date c	of Receipt			
Mailing Address 2709 WILLIAMS GRANT			05	3		y y 2013	Y
City DE PERE	State WI	Zip Code 54115-9456		saction ID It of Each			1
FEC ID number of contributing federal political committee.	С						.00
Name of Employer United HealthCare Services Inc	Occupation Assc Dir Clr						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Dec	duction (\$20	).00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. DAVID M HANSEN	1		Date c	of Receipt			
Mailing Address 33 VIA CONOCIDO			M N 05	/ D		ү 2013	Y
City SAN CLEMENTE	State CA	Zip Code 92673-7044		saction ID			1
FEC ID number of contributing federal political committee.	С				7	270	.00
Name of Employer	Occupation		_				
United HealthCare Services Inc Receipt For:	Hith Plan C		_				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1485.00	P/R Dec	duction (\$1	35.00 Bi-V	/eekly)	
SUBTOTAL of Receipts This Page (optional)					1 J	348.	00

# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 33 OF

TEMIZED 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         1
Any information copied from such Repror for commercial purposes, other than	orts and Statements ma using the name and a	ay not be sold or used by any p ddress of any political committe	13     14     15     16     1       person for the purpose of soliciting contributions       e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	rporated PAC (I	Jnited for Health)	
Full Name (Last, First, Middle Initial SAMUEL W HO	)		Date of Receipt
Mailing Address 4220 OCEAN DR			05 31 2013
City MANHATTAN BEACH	State CA	Zip Code 90266-3059	Transaction ID : PR2119477930141           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		307.60
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Mkt Grp Ch Aggregate		P/R Deduction (\$153.80 Bi-Weekly)
Full Name (Last, First, Middle Initial <b>KEVIN D HOST</b>	)		Date of Receipt
Mailing Address 14617 GRANT ST	State	Zip Code	05 31 2013 Transaction ID : PR2119478230141
OVERLAND PARK	KS	66221-2283	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer         United HealthCare Services Inc         Receipt For:         Primary       General         Other (specify) ▼	Occupation VP Pharm C Aggregate		P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial BRIAN JEFFREY	)		Date of Receipt
Mailing Address 9 RIMROCK			M M / D D / Y Y Y Y Y 05 31 2013
City IRVINE	State CA	Zip Code 92603-3604	Transaction ID : PR2119479130141 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Regn Pres Aggregate		
Other (specify) ▼		275.00	P/R Deduction (\$25.00 Bi-Weekly)
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## SCHEDULE A (FEC Form 3X) \_ \_ \_ \_

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check	only o	one)			
		for each category of the Detailed Summary Page	X 11		11b 14	11c 15	12	17
Any information copied from such Reports and or for commercial purposes, other than using			erson for t	he pu	rpose of	soliciting	g contribu	tions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	United for Health)						
Full Name (Last, First, Middle Initial) <b>A.</b> JOHN D JONES			Date	e of R	eceipt			
Mailing Address 3562 REDWOOD				M 5	31	/ Y	2013	Y
City IRVINE	State CA	Zip Code 92606-2124					<b>47923014</b> iis Period	
FEC ID number of contributing federal political committee.	С				7		192	2.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation VP Govt Re Aggregate				. (000	00 D: 144		
Other (specify)		1056.00	P/R L	Peduct	:ion (\$96.	00 Bi-We	ekiy)	
Full Name (Last, First, Middle Initial) B. HEATHER M MACE-MEADOR			Date	e of R	eceipt			
Mailing Address 13531 CARLTON OAKS	Charles	Zin Oode	C	)5	31		y y 2013	
City SAN ANTONIO	State TX	Zip Code 78232-4902				-	18253014 his Period	
FEC ID number of contributing federal political committee.	С				7	,		.00
Name of Employer United HealthCare Services Inc	Occupation Dir Med Cli							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R D	educt	ion (\$20.	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. KEITH E NYGARD			Date	e of R	eceipt			
Mailing Address 1139 E OCEAN BOULEVA #106	ARD			)5	/ D D 31	/ Y	y y 2013	Y
City LONG BEACH	State CA	Zip Code 90802-6521					48503014 iis Period	
FEC ID number of contributing federal political committee.	С				7	7	40	).00
Name of Employer	Occupation	1						
United HealthCare Services Inc Receipt For:	Compli Cns		_					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R [	)educt	tion (\$20.	.00 Bi-W€	∍ekly)	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb					7	· · ·	272	.00

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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PAGE 35 OF

			Detailed Summary Page		11a 13		11    14	b	11c		12 16	17				
	y information copied from such Reports and for commercial purposes, other than using th				for the		pos				ntribut	ions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)													
Α.	Full Name (Last, First, Middle Initial) LYNDA A PAXSON						Date of Receipt									
	Mailing Address 3924 E GARNET PL						05 31 2013									
		StateZip CodeRANCHCO80126-5044						Transaction ID : PR2119485830141								
	HIGHLANDS RANCH FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period												
	Name of Employer United HealthCare Services Inc	Occupation Sr Field Acc		_												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	] <sup>F</sup>	P/R Deduction (\$25.00 Bi-Weekly)											
	Full Name (Last, First, Middle Initial) AUSTIN T PITTMAN					Date of Receipt										
	Mailing Address 14 LOCH RIDGE DRIVE						05 31 2013									
	City GREENSBORO	State NC	Zip Code 27408-3868		Trans Amount				R2119							
	FEC ID number of contributing federal political committee.	С			270.00							00				
	Name of Employer United HealthCare Services Inc	Occupation Pres Ntwks														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1485.00	P	P/R Deduction (\$135.00 Bi-Weekly)											
	Full Name (Last, First, Middle Initial) CYNTHIA L POLICH				Date of Receipt											
	Mailing Address 3401 E VIA PALOMITA City State Zip Code					05 31 2013										
	City TUCSON	State AZ		Transaction ID : PR2119486830141 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С			200.0						00					
	Name of Employer															
	United HealthCare Services Inc															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	] F	P/R Deduction (\$100.00 Bi-Weekly)											
6	<b>UBTOTAL</b> of Receipts This Page (optional)	<u> </u>			-	-	-			-	520.0	00				

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

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TEMIZED RECEIPTS		Use separate schedule(s)	(check only one)											
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Any information copied from such Reports and or for commercial purposes, other than using t									ibutio					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	Jnited for Health)												
Full Name (Last, First, Middle Initial)						Date of Receipt								
Mailing Address 55 PERENNIAL		M M / D D / Y Y Y Y Y 05 31 2013												
City IRVINE	Zip Code 92603-0621	Transaction ID : PR2119487930141           Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С					7			40.0	0				
Name of Employer United HealthCare Services Inc Receipt For:														
Primary General Other (specify) ▼		Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Week											
Full Name (Last, First, Middle Initial) MARILYNN D STYERS					f Re	ceipt								
Mailing Address 6485 WAYFINDERS CT					05 31 Y Y Y Y 2013									
City CARLSBAD	State CA	Zip Code 92011-4076					PR21194 eceipt th							
FEC ID number of contributing federal political committee.	С								40.00	0				
Name of Employer United HealthCare Services Inc	n Ops													
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate					P/R Deduction (\$20.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial)				Date of	f Re	ceipt								
Mailing Address 5598 NAPLES CANAL					05 31 2013									
City LONG BEACH	State CA	Zip Code 90803-4018					PR2119 eceipt th			_				
FEC ID number of contributing federal political committee.	С					7			100.0	0				
Name of Employer	Occupation													
United HealthCare Services Inc Receipt For:	SVP Entrpr	_												
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	P/R Deduction (\$50.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number						3	5	1	80.00	)				

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

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PAGE 37 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
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Any information copied from such Reports and or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (	United for Health)									
Full Name (Last, First, Middle Initial) A. STEVEN M TUCKER			Date o	of Re	ceipt						
Mailing Address 12331 COUNTRY LANE			05	VI /	D D 31	/ Y	2013	Y			
City	State	Zip Code	Tran	sacti	on ID : I	PR21194	49203014	1			
SANTA ANA	CA	92705-3330	Amour	nt of	Each Re	eceipt th	is Period				
FEC ID number of contributing federal political committee.	С				9	7	192	.00			
Name of Employer	Occupation	1									
United HealthCare Services Inc	VP Regl Af	fs									
Receipt For:	Aggregate	Year-to-Date ▼									
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		7 7 7	1								
Full Name (Last, First, Middle Initial) B. SUSAN VANASTEN			Date o	of Re	ceipt						
Mailing Address W313 GOLDEN GLOW RD	)		05	/	31	/ Y	2013	Y			
City	State	Zip Code	Tran	sacti	on ID : F	PR21194	19263014 <sup>-</sup>				
KAUKAUNA	WI	54130-7809	Amour	nt of	Each Re	eceipt th	is Period				
FEC ID number of contributing federal political committee.	С				7	- 7	80.	00			
Name of Employer	Occupation	1									
United HealthCare Services Inc	Site Dir Me	dicr Ins Sls									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		, 440.00	P/R Dec	ductio	on (\$40.0	0 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) C. LINDA D DAUGHERTY			Date o	of Re	ceipt						
Mailing Address 15442 NORTH 19TH WAY			05	И /	31	/ Y	2013	Y			
City	State	Zip Code		sact		PR2119	49353014	1			
PHOENIX	AZ	85022-3329	Amour	nt of	Each Re	eceipt th	is Period				
FEC ID number of contributing federal political committee.	С				7	- 7	40	.00			
Name of Employer	Occupation	1									
United HealthCare Services Inc	Assc Gen (	Counsel									
Receipt For:	Aggregate	Year-to-Date <b>V</b>									
Other (specify)		220.00	P/R De	ducti	on (\$20.0	00 Bi-We	eekly)				
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### SCHEDULE A (FEC Form 3X) \_ \_ \_ \_

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PAGE 38 OF

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	OF COMMITTEE (In Full) edHealth Group Incorpora	ted PAC (l	Jnited for Health)												
	ame (Last, First, Middle Initial) EGORY WRIGHT			Dat	e of F	Receipt	t								
	g Address 13901 MAUVE DRIVE			M	м	/ D	D	/ Y	ΥΥ	Y					
City		State	Zip Code		)5 2062		31 D · DD	21104	2013 <b>941301</b> 4	11					
-	A ANA	CA	92705-2649						s Period						
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Name	of Employer	Occupation													
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	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	P/R I	Deduc	tion (\$	25.00	Bi-We	ekly)						
	ame (Last, First, Middle Initial) REST G BURKE			Dat	e of F	Receipt	t								
	g Address 380 LEAF STREET				) 5		31	/ Y	ү ү 2013	Y					
City		State	Zip Code						3243014						
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	of Employer HealthCare Services Inc	Occupation	_												
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	Other (specify)		, 1100.00		Jeuuc	αυπ (φ	100.00	0 01-00	eekiy)						
	ame (Last, First, Middle Initial) ARLES W HANSON			Dat	e of F	Receipt	t								
Mailino	g Address 4133 WHITE OAK LN				D5		D 31	/ Y	у у 2013	Ŷ					
City		State	Zip Code	Т	ansa	ction I	D : PR	21331	3313014	41					
	ELSIOR	MN	55331-5702	Am	ount c	of Each	h Rece	eipt thi	s Period	I					
federa	D number of contributing I political committee.	С				7		3	50	0.00					
Name	of Employer	Occupation													
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	Other (specify) ▼		275.00		Deduc	που (Φ	25.00	DI-VVE	eriy)						
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Mailing Address 408 22ND ST         City       State       Zip Code         GOLDEN       CO       80401-2452         FEC ID number of contributing federal political committee.       C       Image: Committee integration integratintegratintegration integration integration integratedi												
or for commercial purposes, other than using the name and address of any political committee to NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  A. BROR O HULTGREN Mailing Address 408 22ND ST  City GOLDEN CO 80401-2452  FEC ID number of contributing federal political committee. Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) General Other (specify)  Full Name (Last, First, Middle Initial) B. ALLEN D MILLER Mailing Address 6209 CRESCENT DRIVE  City EDINA FEC ID number of contributing FEC ID number of contributing Full Name (Last, First, Middle Initial) C  C  City City State Zip Code MN 55436-2530 FEC ID number of contributing FEC ID NEA FEC ID NEA FEC ID NEA FEC ID NEA FEC I	Date of Receipt 05 / 31 2013 Transaction ID : PR2133133230141 Amount of Each Receipt this Period											
UnitedHealth Group Incorporated PAC (United for Health)         Full Name (Last, First, Middle Initial)         A.       BROR O HULTGREN         Mailing Address 408 22ND ST         City       State       Zip Code         GOLDEN       CO       80401-2452         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       423.06         Full Name (Last, First, Middle Initial)         B.       ALLEN D MILLER         Mailing Address 6209 CRESCENT DRIVE         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       C	M         M         /         P         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											
Full Name (Last, First, Middle Initial)         A.       BROR O HULTGREN         Mailing Address 408 22ND ST         City       State       Zip Code         GOLDEN       CO       80401-2452         FEC ID number of contributing federal political committee.       C       Image: Committee Com	M         M         /         P         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											
A. BROR O HULTGREN         Mailing Address 408 22ND ST         City       State       Zip Code         GOLDEN       CO       80401-2452         FEC ID number of contributing federal political committee.       C       Image: Committee Co	M         M         /         P         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       State       Zip Code         GOLDEN       CO       80401-2452         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       423.06         Full Name (Last, First, Middle Initial)         ALLEN D MILLER         Mailing Address 6209 CRESCENT DRIVE         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       C	05312013Transaction ID : PR2133133230141Amount of Each Receipt this Period											
GOLDEN       CO       80401-2452         FEC ID number of contributing federal political committee.       C       C         Name of Employer       Occupation         United HealthCare Services Inc       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       423.06         Full Name (Last, First, Middle Initial)         ALLEN D MILLER         Mailing Address 6209 CRESCENT DRIVE         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       C	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       423.06         Full Name (Last, First, Middle Initial)         B.       ALLEN D MILLER         Mailing Address 6209 CRESCENT DRIVE         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       C												
federal political committee.       Occupation         Name of Employer       Occupation         United HealthCare Services Inc       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       423.06         Full Name (Last, First, Middle Initial)         B. ALLEN D MILLER         Mailing Address 6209 CRESCENT DRIVE         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       C	76.92											
United HealthCare Services Inc       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       423.06         Full Name (Last, First, Middle Initial)       423.06         ALLEN D MILLER       Mailing Address 6209 CRESCENT DRIVE         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       C												
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Primary       General         Other (specify)       ✓         Full Name (Last, First, Middle Initial)         ALLEN D MILLER         Mailing Address 6209 CRESCENT DRIVE         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       ✓												
Other (specify) ▼       423.06         Full Name (Last, First, Middle Initial)       ALLEN D MILLER         Mailing Address 6209 CRESCENT DRIVE       Zip Code         City       State       Zip Code         EDINA       MN       55436-2530         FEC ID number of contributing       C												
B. ALLEN D MILLER Mailing Address 6209 CRESCENT DRIVE City State Zip Code EDINA MN 55436-2530 FEC ID number of contributing	P/R Deduction (\$38.46 Bi-Weekly)											
City     State     Zip Code       EDINA     MN     55436-2530       FEC ID number of contributing     C	Date of Receipt											
EDINA MN 55436-2530 FEC ID number of contributing	05 31 2013											
FEC ID number of contributing	Transaction ID : PR2133133630141											
ů – Elektrik	Amount of Each Receipt this Period											
federal political committee.	70.00											
Name of Employer     Occupation       United HealthCare Services Inc     Regn Exec Dir												
Receipt For:     Aggregate Year-to-Date ▼       Primary     General       Other (specify) ▼     385.00	P/R Deduction (\$35.00 Bi-Weekly)											
Full Name (Last, First, Middle Initial) C. SUSAN C MORISATO	Date of Receipt											
Mailing Address 238 ARDMORE ROAD	05 31 2013											
City State Zip Code	Transaction ID : PR2133133830141											
DES PLAINES IL 60016-2119	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	386.00											
Name of Employer Occupation	4											
United HealthCare Services Inc Pres Insurance Sols												
Receipt For: Aggregate Year-to-Date ▼												
Primary     General       Other (specify) ▼     2123.00												
SUBTOTAL of Receipts This Page (optional)	P/R Deduction (\$193.00 Bi-Weekly)											

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b 14	11c	12	47
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate									
A.	Full Name (Last, First, Middle Initial) T JEFFREY PUTNAM				Date of	Re	eceipt			
	Mailing Address 303 ELMWOOD PLACE WES	Т			м м	/	D D D 31	/ Y	2013	Y
	City	State	Zip Code		Trans	acti	ion ID :	PR21331	3423014	1
	MINNEAPOLIS	MN	55419-1349	A	mount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С						- 7	384	1.60
	Name of Employer	Occupation		-						
	United HealthCare Services Inc	SVP Finance	tial PIng Anlys							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify)		2115.30	P/	R Dedi	uctio	on (\$192	2.30 Bi-W	eekly)	
B.	Full Name (Last, First, Middle Initial) DIANE M SCHIMMELBUSCH				Date of	Re	eceipt			
	Mailing Address 2203 RIVER FALLS DRIVE				м м 05	1	31	/ Y	y y 2013	Y
	City	State	Zip Code		Trans	acti	ion ID : I	PR21331	3463014	1
	KINGWOOD	ТХ	77339-3124	A	mount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С						- 7	50	.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Med Clin								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	P/I	R Dedu	uctio	on (\$25.0	00 Bi-We	ekly)	
С.	Full Name (Last, First, Middle Initial) ROBERT C FALKENBERG				Date of	Re	eceipt			
	Mailing Address 6069 WEATHERED OAK CT				м м 05	/	D D 31	/ Y	y y 2013	Y
	City	State	Zip Code		Trans	act	ion ID :	PR21457	2843014	¥1
	WESTERVILLE	OH	43082-8304	A	mount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					7	7	76	6.92
	Name of Employer	Occupation								
	United HealthCare Services Inc	Hith Plan C	EO							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/	R Ded	ucti	on (\$38.	46 Bi-We	ekly)	
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number		<u> </u>						511	.52

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>(</b> 11a		11	b	11c		12	
					13		14		15		16	17
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
۹.	Full Name (Last, First, Middle Initial) ROB FARAHANI				Date o	f Re	ecei	pt				
	Mailing Address PO BOX 704				м м 05	/		31	/ Y		) 13	Y
	City	State	Zip Code		Trans	sacti	ion	ID : I	PR2145	7285	5 <b>301</b> 4	1
	HUNTINGTON	NY	11743-0704		Amoun	t of	Ea	ch Re	eceipt t	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					,		,		76.	92
	Name of Employer	Occupation										
	United HealthCare Services Inc	Dir IT Proj N	/Igmt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		423.06	]  「	P/R Ded	luctio	on (	(\$38.4	16 Bi-W	eekly	/)	
	Full Name (Last, First, Middle Initial) WAYNE MILLER				Date o	f Re	ecei	pt				
	Mailing Address 19521 SIERRA SOTO RD				м м 05	/	ľ	31	/ Y		) 13	Y
	City	State	Zip Code		Trans	acti	ion	ID : F	R2145	7292	30141	
	IRVINE	E CA 92603-3840										
	FEC ID number of contributing federal political committee.	С					,		5		40.	00
	Name of Employer United HealthCare Services Inc	Occupation SVP CInt Re										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	] P	P/R Ded	uctio	on (	(\$20.0	0 Bi-W	eekly	/)	
	Full Name (Last, First, Middle Initial) MICHAEL P SCHWARZ				Date o	f Re	ecei	pt				
	Mailing Address 13935 WOODRIDGE PATH				м м 05	/		31	/ Y		)13	Y
	City	State	Zip Code						PR2145			1
	SAVAGE	MN	55378-3155		Amoun	t of	Ea	ch Re	eceipt t	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					,		7		70	.00
	Name of Employer	Occupation										
	United HealthCare Services Inc	VP Gen Mg	ımt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify)		385.00	]   「	P/R Dec	luctio	on	(\$35.0	00 Bi-W	eekly	y)	
s	UBTOTAL of Receipts This Page (optional)			•			5				186.	92

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page	X	11a		11b		11c		12			
			Setator outilitary rago		13		14		15		16	17		
or	/ information copied from such Reports and S for commercial purposes, other than using the													
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
٩.	Full Name (Last, First, Middle Initial) DANNETTE L SMITH			[	Date of	Re	eceip	ot						
	Mailing Address 5414 BYSCANE LANE				м м 05	/	D	31	/ Y	ү 20	13	Y		
	City MINNETONKA	State MN	Zip Code 55345-5601				-		R2145 ceipt th					
	FEC ID number of contributing federal political committee.	С					7		,		386.	00		
	Name of Employer United HealthCare Services Inc	Occupation Sr Deputy (	Gen Counsel											
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2123.00	Р/	/R Ded	uctio	on (S	\$193.	00 Bi-V	/eekl	y)			
	Full Name (Last, First, Middle Initial) MARGARET W WEAR				Date of	Re	eceip	ot						
	Mailing Address 44 TOPANGA				м м 05	/	D	31	/ Y	۲ 20	13	Y		
	City IRVINE	State CA	Zip Code 92602-2422	Transaction ID : PR2145730230141 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			10									
	Name of Employer Jnited HealthCare Services Inc	Occupation VP Actuary												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	P/	'R Dedi	uctio	on (\$	\$50.0	0 Bi-We	ekly)	)			
	Full Name (Last, First, Middle Initial) DAVID A SPIVACK				Date of	Re	eceip	ot						
	Mailing Address 37 HIDDEN TRAIL				м м 05	1	D	31	/ Y	20 <sup>-</sup>	ү 13	Y		
	City IRVINE	State CA	Zip Code 92603-0212						R2162 ceipt th					
	FEC ID number of contributing federal political committee.	C					,				384.	60		
	Name of Employer	Occupation		_										
	United HealthCare Services Inc	SVP Bus O	ps											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P	/R Ded	ucti	on (	\$192.	30 Bi-V	Veekl	y)			
SI	JBTOTAL of Receipts This Page (optional)						7		3		870.6	60		

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check on	ly one)	L		
ILIVILLED RECEIPIS		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	United for Health)					
Full Name (Last, First, Middle Initial) A. CHRISTINE W GIBSON			Date o	of Receipt			
Mailing Address 8516 29TH AVE N			05	/ D 31		2013	Y
City NEW HOPE	State MN	Zip Code 55427-2622	Trans	saction ID	: PR22251	16673014	1
FEC ID number of contributing federal political committee.	С			 		230	.76
Name of Employer United HealthCare Services Inc Receipt For:	Occupation VP Strat Ini Aggregate						
Primary General Other (specify) ▼		1269.18	P/R Dec	duction (\$11	15.38 Bi-W	/eekly)	
Full Name (Last, First, Middle Initial) <b>B.</b> ANDREW M SLAVITT			Date o	of Receipt			
Mailing Address 5125 MIRROR LAKES DRIV			05	/ D 31		2013	Y
City EDINA	State MN	Zip Code 55436-1341		saction ID : it of Each I			1
FEC ID number of contributing federal political committee.	С					500.	00
Name of Employer United HealthCare Services Inc	Occupation Optum Exe		_				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2750.00	P/R Ded	luction (\$25	i0.00 Bi-W	(eekly)	
Full Name (Last, First, Middle Initial) C. JEAN-FRANCOIS BEAULE			Date o	of Receipt			
Mailing Address 7 STRATFORD RD			м м 05	/ D 31		2013	Y
City FARMINGTON	State CT	Zip Code 06032-1444		saction ID It of Each I			1
FEC ID number of contributing federal political committee.	С					115	.40
Name of Employer	Occupation						
United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	VP Gen Mg Aggregate	Year-to-Date ▼ 634.70	P/R Dec	duction (\$57	7.70 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe						846.	16

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page		11a		11b		11c		12	
					13		14		15		16	17
	y information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) MICHAEL MCGUIRE				Date of	Re	eceipt					
	Mailing Address 437 DRURY LANE				м м 05	/		D 31	/ Y		013	Y
	City WYCKOFF	State NJ	Zip Code 07481-2204						R22258			1
	FEC ID number of contributing federal political committee.	С			Amount	: 01	Each	Red	ceipt th	IS P	'eriod 40	00
	Name of Employer United HealthCare Services Inc	Occupation HIth Plan C										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P.	/R Ded	uctio	on (\$2	20.00	0 Bi-We	∍ekly	y)	
В.	Full Name (Last, First, Middle Initial) ERIC S RANGEN				Date of	Re	eceipt					
	Mailing Address 15348 RED OAKS ROAD SE				м м 05	/	3	D 31	/ Y		)13	Y
	City PRIOR LAKE	State MN	Zip Code 55372-1834		Trans Amount				R22258 ceipt th			
	FEC ID number of contributing federal political committee.	С										60
	Name of Employer United HealthCare Services Inc	Occupation SVP Chief										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/	/R Dedu	uctic	on (\$1	92.3	30 Bi-W	/eek	ly)	
<u>с.</u>	Full Name (Last, First, Middle Initial) JOHN D RYAN				Date of	Re	eceipt					
	Mailing Address 45 WESTMORELAND LN				м м 05	/		D 31	/ Y		)13	Y
	City NAPERVILLE	State IL	Zip Code 60540-5817		Trans Amount				R2225			1
	FEC ID number of contributing federal political committee.	С					7			_	76	.92
	Name of Employer	Occupation										
	United HealthCare Services Inc Receipt For:	RVP CInt M		_								
	Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 423.06	P	/R Ded	uctio	on (\$:	38.40	6 Bi-We	ekly	y)	
s	UBTOTAL of Receipts This Page (optional)		•				7				501.	52
т	OTAL This Period (last page this line number	only)					,		-			

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	for commercial purposes, other than using the			to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	United for Health)	
Α.	Full Name (Last, First, Middle Initial) ROY THOMAS SAILOR			Date of Receipt
	Mailing Address 276 COYOTE WILLOW DRIV		Zin Onda	05 31 2013
	City COLORADO SPRINGS	State CO	Zip Code 80921-7631	Transaction ID : PR2225819730141           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation Dir Clnt Svo Aggregate		P/R Deduction (\$76.92 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) KAREN A DIPALMO			Date of Receipt
	Mailing Address 7533 PRAIRIE VIEW DR			05 31 _2013 _
	City INDIANAPOLIS	State IN	Zip Code 46256-8408	Transaction ID : PR2231347230141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer Golden Rule Financial Corp.	Occupation Dir Ntwk Pr		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00	P/R Deduction (\$30.00 Bi-Weekly)
С.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 10823 MOORS END CIRCLE			05 31 2013
	City FISHERS	State IN	Zip Code 46038-2612	Transaction ID : PR2231352330141
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	_
	Golden Rule Financial Corp.	Deputy Ge	n Counsel Mgr	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 880.00	P/R Deduction (\$80.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			373.84
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:

(check only one)

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			Detailed Summary Page		-		11b		11c	12				
Δn	y information copied from such Reports and S	Statements ma	av not be sold or used by any n	erson f	13 or the	Dur	14 1905e	ofe	15 oliciting		-	17 ons		
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to sol	licit cor	ntrib	oution	s fro	om such		mitte	e.		
$\overline{)}$	NAME OF COMMITTEE (In Full)													
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
A.	Full Name (Last, First, Middle Initial) MICHAEL R CONNLY				Date of	Re	eceipt							
	Mailing Address 570 MONTCALM PL				м м 05	/		D 31	/ Y	Y 201		Y		
	City	State	Zip Code		Trans	act	ion II	) : P	R22476	62583(	0141			
	SAINT PAUL	MN	55116-1730	/	Amount	of	Each	Re	ceipt th	is Per	iod			
	FEC ID number of contributing federal political committee.	С					7		3	:	200.0	00		
	Name of Employer	Occupation	1											
	United HealthCare Services Inc	Chief Tech	Off											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify)		1100.00	P/	/R Ded	ucti	ion (\$	100.	00 Bi-W	/eekly)	)			
в.	Full Name (Last, First, Middle Initial) JOSEPH R CARCIONE JR				Date of	Re	eceipt							
	Mailing Address 11 CARRIAGE WAY			05 31 2013										
	City	State	Zip Code		Trans	acti	ion IE	) : P	R22476	626830	0141			
	WHITE PLAINS	NY	10605-5424	A	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					7		7	1	15.4	10		
	Name of Employer United HealthCare Services Inc	Occupation Med Dir												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.70	P/	'R Dedi	uctio	on (\$	57.7	0 Bi-We	eekly)				
C.	Full Name (Last, First, Middle Initial) KEVIN DAVID KANTOLA				Date of	Re	eceipt							
	Mailing Address 7031 HALSTEAD DRIVE				м м 05	1		D 31	/ Y	y 2013		Y		
	City	State MN	Zip Code						R2247					
	MINNETRISTA		55364-3201	/	Amount	t of	Each	Re	ceipt th	is Per	iod			
	FEC ID number of contributing federal political committee.	С					7		,		78.0	00		
	Name of Employer	Occupation	1											
	United HealthCare Services Inc	VP IT												
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General		420.00	P/	/R Ded	ucti	ion (\$	39.0	0 Bi-We	eekly)				
	Other (specify)		429.00											
s	UBTOTAL of Receipts This Page (optional)						7		7	3	93.4	0		
т	OTAL This Period (last page this line number	only)					1							

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page		11a		11		11c		12	<u> </u>				
	information copied from such Reports and S							se of s								
	r commercial purposes, other than using the	e name and a	aaress of any political committee	to sol	ICIT COI	ntrib	outio	ons tro	om such	1 CO	mmitte	ee.				
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporate	ed PAC (l	Jnited for Health)													
	ull Name (Last, First, Middle Initial) DENNIS P O'BRIEN				Date of	f Re	ecei	ipt								
М	ailing Address 61 LOUGHLIN AVE				м м 05	/	Ε	31	/ Y	Y 20	) 13	Y				
Ci		State	Zip Code		Trans	acti	ion	n ID : F	PR2247	6273	83014 <sup>-</sup>	1				
C	OS COB	СТ	06807-2621	A	mount	t of	Ea	ach Re	ceipt th	is P	eriod					
	EC ID number of contributing deral political committee.	С		, 115.40												
Na	ame of Employer															
U	nited HealthCare Services Inc	Regn Pres	Ntwk Mgmt													
R	eceipt For:	Aggregate	Year-to-Date ▼													
	Primary General Other (specify)		634.70	P/	R Ded	uctio	on	(\$57.7	′0 Bi-We	ekly	/)					
	III Name (Last, First, Middle Initial) EFFERY RICHARD VERNEY				Date of	f Re	ecei	ipt								
M	ailing Address 266 WESTLEDGE ROAD				м м 05	/	Γ	D D D	/ Y		13	Y				
Ci	ty	State	Zip Code		Trans	acti	ion	ID : P	R22476	<u>5274</u>	30141					
N	/EST SIMSBURY	СТ	06092-2017	A	mount	t of	Ea	ach Re	ceipt th	is P	eriod					
	EC ID number of contributing deral political committee.	С					7		,	_	115.	40				
	ame of Employer hited HealthCare Services Inc	Occupation VP Gen Mg														
	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 634.70	P/	R Ded	uctio	on	(\$57.7	0 Bi-We	ekly	/)					
	III Name (Last, First, Middle Initial)				Date of	f Re	ecei	ipt								
М	ailing Address 282 MIDDAUGH				м м 05	/	l	D D 31	/ Y		)13	Y				
Ci		State	Zip Code		Trans	sact	ion	ו ID : F	PR2247	6278	33014	1				
	LARENDON HILLS	IL	60514-1067	A	mount	t of	Ea	ach Re	eceipt th	is P	eriod					
	EC ID number of contributing deral political committee.	С					7		- 7	_	76	.92				
Na	ame of Employer	Occupation		-												
U	nited HealthCare Services Inc	COO IBS														
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/	R Ded	lucti	on	(\$38.4	l6 Bi-We	ekly	y)					
	BTOTAL of Receipts This Page (optional)				-	-	- - 	-	- <del></del>	-	307.	72				

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

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FOR LINE NUMBER:

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		Use separate schedule(s)	(chec	(check only one)								
ILWIZED RECEIPIS		for each category of the Detailed Summary Page				11b	11c	12				
Any information copied from such Reports and	Statements ma	ay not be sold or used by any pe		13 the i	 puri	14 pose o	15 f solicitin	g contrib	17 utions			
or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)										
Full Name (Last, First, Middle Initial) <b>A.</b> DANIEL L OHMAN			Da	ate of	Re	ceipt						
Mailing Address 8970 MOOR PARK RUN				и м 05	/	D 31		2013	Y			
City DULUTH	State GA	Zip Code 30097-6621						<b>76280301</b> his Perio				
FEC ID number of contributing federal political committee.	С					,		5	3.84			
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Regn CEO											
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 296.12	P/R	Dedu	uctio	on (\$26	6.92 Bi-W	/eekly)				
Full Name (Last, First, Middle Initial) B. JOHN M PRINCE			Da	ate of	Re	ceipt						
Mailing Address 546 HARRINGTON ROAD	01-1-1-	7: 0-4		05	/	D 31		2013	Y			
City WAYZATA	State MN	Zip Code 55391-1550				-		7384301 his Perio				
FEC ID number of contributing federal political committee.	С					,			4.00			
Name of Employer United HealthCare Services Inc	Occupation Mkt Group (											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1067.00	P/R	Dedu	uctio	on (\$97	′.00 Bi-W	eekly)				
Full Name (Last, First, Middle Initial) C. CHRISTOPHER L CRONN			Da	ate of	Re	ceipt						
Mailing Address 1001 CONGRESS SUITE 300				05	1	D 31		2013	Y			
City AUSTIN	State TX	Zip Code 78701-5002						05229301 his Perio				
FEC ID number of contributing federal political committee.	С					7		7	6.92			
Name of Employer	Occupation											
United HealthCare Services Inc	Govt Rel Di											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/F	Ded	ucti	on (\$38	3.46 Bi-W	/eekly)				
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe						7	- 7	324	4.76			

Use separate schedule(s)

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
or	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	United for Health)											
Α.	Full Name (Last, First, Middle Initial) SIMON L STEVENS			Date of Receipt										
	Mailing Address 1716 EMERSON AVENUE SO			M = M         /         D = D         /         Y = Y = Y = Y         Y           05         31         2013										
	City MINNEAPOLIS	State MN	Zip Code 55403-2906	Transaction ID : PR2364863230141										
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
	Name of Employer United HealthCare Services Inc	Occupation EVP United		_										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1195.70	P/R Deduction (\$108.70 Bi-Weekly)										
В.	Full Name (Last, First, Middle Initial) JEANNE M DE SA			Date of Receipt										
	Mailing Address 3000 TILDEN STREET NW #2	04-1		05 / D D / Y Y Y Y Y 2013										
	City WASHINGTON	State DC	Zip Code 20008-3017	Transaction ID : PR2402315930141 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		100.00										
	Name of Employer United HealthCare Services Inc	Occupation VP Rsch												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	P/R Deduction (\$50.00 Bi-Weekly)										
	Full Name (Last, First, Middle Initial) ANGELA DAWN KEPLEY CARRII	ER		Date of Receipt										
	Mailing Address 3219 PENINSULA DRIVE			05 / Y Y Y Y 05 31 2013										
	City JAMESTOWN	State NC	Zip Code 27282-8717	Transaction ID : PR2402317730141 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		40.00										
	Name of Employer	Occupation	1	-										
	United HealthCare Services Inc	Dir Med Cli	n Ops											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)		••••••	357.40										
T	OTAL This Period (last page this line number of	only)	•											

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	_							
			erson for the purpose of soliciting contribution								
	sing the name and a	ddress of any political committe	e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	Jnited for Health)									
Full Name (Last, First, Middle Initial) <b>A.</b> MARILYN LEVI-BAUMGARTEN	1		Date of Receipt								
Mailing Address 4800 W 27TH ST			05 31 _ 2013 _	1							
City SAINT LOUIS PARK	State MN	Zip Code 55416-1933	Transaction ID : PR2402317930141 Amount of Each Receipt this Period	_							
FEC ID number of contributing federal political committee.	C		40.00	)							
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Gen Mg										
Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) B. JAKE LOGAN			Date of Receipt								
	Mailing Address 4826 EAST CALLE REDONDA										
City PHOENIX	State AZ	Zip Code 85018-2931	Transaction ID : PR2402318230141 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer United HealthCare Services Inc	Occupation Govt Rel Di										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	P/R Deduction (\$25.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. MARIA MCCAULEY			Date of Receipt								
Mailing Address 6321 MANATEE AVE	NUE WEST		05 31 2013	1							
City BRADENTON	State FL	Zip Code 34209-2372	Transaction ID : PR2402318430141 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		40.00	)							
Name of Employer	Occupation	I									
United HealthCare Services Inc Receipt For:	Sr Proj Mgr										
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)								
				_							

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

Use separate schedule(s)

FOR LINE NUMBER:

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	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Re	ports and Statements may not be sold or used by any	13     14     15     16     17								
	an using the name and address of any political commit									
NAME OF COMMITTEE (In Full)	orporated PAC (United for Health)									
Full Name (Last, First, Middle Init DIANE D SOUZA	al)	Date of Receipt								
Mailing Address 360 STANLEY D	RIVE	05 31 2013								
City GLASTONBURY	StateZip CodeCT06033-2624	Transaction ID : PR2402320030141           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	384.60								
Name of Employer United HealthCare Services Inc Receipt For:	Occupation CEO SpcIty Bens									
Primary General Other (specify)	Aggregate Year-to-Date ▼ 1923.00	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name (Last, First, Middle Init LORI SWEERE LILIENTH		Date of Receipt								
	Mailing Address 5701 S JOSH WYATT DR									
City SIOUX FALLS	State Zip Code SD 57108-5225	Transaction ID : PR2402320230141 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	386.00								
Name of Employer United HealthCare Services Inc	Occupation EVP Human Capital									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2123.00	P/R Deduction (\$193.00 Bi-Weekly)								
Full Name (Last, First, Middle Init C. SHELLEY WIKE CRANL		Date of Receipt								
Mailing Address 3801 MAURICE	COURT	05 31 2013								
City LAS VEGAS	StateZip CodeNV89108-5245	Transaction ID : PR2402444430141           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	200.00								
Name of Employer United HealthCare Services Inc	Occupation Dir Regl Affs									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)								
	1	970.60								

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

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
	for each category of the Detailed Summary Page			11b	11c	12					
Any information applied from such Departs and	Statamanta		13	14	15	16	17				
Any information copied from such Reports and or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporat	ea PAC (l	United for Health)									
Full Name (Last, First, Middle Initial)			_								
A. JAY M ANLIKER Mailing Address 4306 MOUNTAIN LANE				Receipt			Y				
Maining Address 4300 MOONTAIN LANE			м м 05	31		ing contributions uch committee. 2013 02445030141 this Period 40.00 Weekly) 2013 02445130141 this Period 307.70 i-Weekly)					
City	State	Zip Code		action ID : PF	R2402445	030141					
WAUSAU	WI	54401-8543	Amount	of Each Rec	eipt this	Period					
FEC ID number of contributing federal political committee.	С					40.	00				
Name of Employer	Occupation										
United HealthCare Services Inc	CEO TPA										
Receipt For:	_ L	Year-to-Date ▼									
Primary General		220.00	P/R Dedu	uction (\$20.00	Bi-Week	ly)					
Other (specify)		, , , , , , , , , , , , , , , , , , , ,	1								
Full Name (Last, First, Middle Initial)	1										
B. JAMES H BECKER	_			Receipt							
Mailing Address 378 FERNDALE ROAD WES	51		05	/ D D 31			Y				
City	State	Zip Code		action ID : PR							
WAYZATA	MN	55391-1559	Amount	of Each Rec	eipt this	Period					
FEC ID number of contributing federal political committee.	С				7	307.	70				
Name of Employer United HealthCare Services Inc	Occupation	l									
Receipt For:	SVP Ops	Versite Data 🖛									
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$153.85 Bi-Weekly)								
Other (specify) v	L	1692.35			0 21 1100	,,					
Full Name (Last, First, Middle Initial) C. JAMES C COLEMAN	-		Date of	Receipt							
Mailing Address 4135 ETHAN DRIVE			м м 05	/ D D 31			Y				
City EAGAN	State MN	Zip Code 55123-4908		action ID : PF			1				
	_	55125-4300	Amount	of Each Rec	eipt this	Period	_				
FEC ID number of contributing federal political committee.	С				y	200.	00				
Name of Employer	Occupation										
United HealthCare Services Inc Receipt For:											
Primary General	Aggregate	Year-to-Date ▼	P/R Ded	uction (\$100 0	0 Bi-Wee	klv)					
Other (specify) ▼		1100.00		P/R Deduction (\$100.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)					7	547.7	70				

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			for each category of the Detailed Summary Page		11a 13		11b		11c	12		17		
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) JAMES D DONOVAN				Date o	f Re	eceip	ot						
	Mailing Address 2816 MONTREAUX DRIVE	-		05 31 2013										
	City FRISCO	StateZip CodeTransaction ID : PR240TX75034-1855Amount of Each Receipt												
	FEC ID number of contributing federal political committee.	C			Amoun	t of	Eac	h Red	ceipt th		eriod 130.00			
	Name of Employer United HealthCare Services Inc	Occupation SVP Bus D												
	Receipt For: Primary General Other (specify) ▼	P/	'R Ded	uctio	on (\$	\$65.00	) Bi-We	eekly)						
	Full Name (Last, First, Middle Initial) JOHN L LARSEN				Date o	f Re	eceip	ot						
	Mailing Address 11688 TANGLEWOOD DRIVE				05 / D D / Y Y Y Y Y 2013									
	City EDEN PRAIRIE	State MN	Zip Code 55347-4726						R24024 ceipt th			_		
	FEC ID number of contributing federal political committee.	С			_	,		7	3	86.0	00			
	Name of Employer United HealthCare Services Inc													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2123.00	P/	R Ded	uctic	on (\$	\$193.0	)0 Bi-W	/eekly)				
	Full Name (Last, First, Middle Initial) JOY O HIGA				Date o	f Re	eceip	ot						
	Mailing Address 2208 ELM AVENUE				м м 05	/	D	31	/ Y	y 2013		Y		
	City MANHATTAN BEACH	State CA	Zip Code 90266-2809						R2402					
	FEC ID number of contributing federal political committee.	С			Amoun	t ot	Eac	n Red	ceipt th	iis Per	60.0	00		
	Name of Employer	Occupation		_										
	United HealthCare Services Inc	Dir Regl Aff	s											
	Receipt For: Primary General Other (specify) ▼	mary General General												
	JBTOTAL of Receipts This Page (optional)				_	-	7		7	5	76.0	0		

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.         NAME OF COMMITTEE (In Full)       Image: Commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.         A.       SOHINI G JINDAL       Date of Receipt         Mailing Address 9300 IVY TREE LANE       City       State       Zip Code         City       State       Zip Code       Transaction ID : PR2402446330141         Amount of Each Receipt for:       C       200.00         Primary       General       Occupation         Other (specify)       Govt Rel Dir         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$100.00 Bi-Weekly)         Pill Name (Last, First, Middle Initial)       Date of Receipt         B.       RUSSELL C PETRELLA       Date of Receipt         Mailing Address 4612 MOORLAND AVENUE       C       Transaction ID : PR2402446430141         Amount of Each Receipt for:       C       200.00         Full Name of Employer       Occupation       Transaction ID : PR2402446430141         Mailing Address 4612 MOORLAND AVENUE       C       31       2013         City	171			(che	(check only one)										
Ary Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicit contributions from such committee.       13       14       15       16         NAME OF COMMITTEE (in Full)       UnitedHealth Group Incorporated PAC (United for Health)       Date of Receipt         Mailing Address 9300 IVY TREE LANE       City       Date of Receipt         Mailing Address 9300 IVY TREE LANE       City       State       Zip Code         City       General       City       Date of Receipt         Mailing Address 9300 IVY TREE LANE       City       State       Zip Code         REAT FALLS       VA       22066-2206       Amount of Each Receipt this Period         Preceipt Torm       General       City       City       200.00         Receipt For:       General       Good Ral Dir       Pire Receipt for         Primary       General       Good Ral Dir       Transaction ID : PR2402444530141         Receipt For:       Aggregate Year-to-Date ▼       Pire Deduction (\$100.00 Bi-Weekly)       Pire Deduction (\$100.00 Bi-Weekly)         Pill Name (Last, First, Middle Initial)       Regip Pres       Aggregate Year-to-Date ▼       Pire Deduction (\$100.00 Bi-Weekly)         Full Name (Last, First, Middle Initial)       C       City       State       Zip Code       Zip Code <t< th=""><th>111</th><th></th><th colspan="3"></th><th><b>1</b>1a</th><th></th><th>11b</th><th>11c</th><th>12</th><th></th></t<>	111					<b>1</b> 1a		11b	11c	12					
ar for commercial purposes, other than using the name and address of any policial committee to solicit contributions from such committee.          NAME OF COMMITTEE (In Full)         A. SOHINI G JINDAL         Mailing Address 9300/IVY TREE LANE         City         GREAT FALLS         VA         20060         FEC ID number of contributing foderal policical committee.         Onther (specify) ↓         B. RUSSELL C PETRELLA         Mailing Address 4612 MOORLAND AVENUE         City         State       Zip Code         Mailing Address 4612 MOORLAND AVENUE         City       State         Difference         City       State         City <t< th=""><th></th><th></th><th></th><th></th><th></th><th>-</th><th></th><th></th><th></th><th></th><th>17</th></t<>						-					17				
UnitedHealth Group Incorporated PAC (United for Health)         A. SOHINI G JINDAL         Mailing Address 9300 IVY TREE LANE         City         GREAT FALLS         VA         2006-2206         FEC ID number of contributing tederal political committee.         Primary         Coher (specify)         Put Name (Last, First, Middle Initiat)         Rescipt For:         Primary         General         Other (specify)         FEC ID number of contributing tederal political committee.         Name of Employer         Outher (specify)         FEC ID number of contributing tederal political committee.         Rescipt For:         Pill Name (Last, First, Middle Initiat)         B. RUSSELEC PETRELA         Mailing Address 4612 MOORLAND AVENUE         City         Dine of Employer         Occupation         Name of Employer         Oncupation         Rescipt For:         Primary         General         Other (specify)         Aggregate Year-to-Date V         PIR Deduction (\$100.00 Bi-Weekly)         Pintary Class First, Middle Initiat)         Bate of Receipt         Cit															
Full Name (Last, First, Middle Initial)       Date of Receipt         A. SOHINI G JINDAL       Date of Receipt         City       State       Zip Code         City       VA       22066-2200         FEC ID rumber of contributing federal political committee.       C       Aggregate Year-to-Date ▼         Primary       General       Got Rel Dir         Raceipt For:       Aggregate Year-to-Date ▼       PIR Deduction (\$100.00 Bi-Weekly)         FUI Name (Last, First, Middle Initial)       B.       RUSSELL C PETRELLA         Mailing Address 4612 MOORLAND AVENUE       C       Got Rel Dir         City       State       Zip Code         Mailing Address 4612 MOORLAND AVENUE       C       Got State         City       State       Zip Code         Name of Employer       Aggregate Year-to-Date ▼       Pirmasciton IIS : PE2402446330141         Amount of Each Receipt this Period       State       Zip Code         City       State       Zip Code       Bit Address 4612 MOORLAND AVENUE         City       General       Occupation       Pirmasciton IIS : PE2402446330141         Amount of Each Receipt       Aggregate Year-to-Date ▼       Pirmasciton IIS : PE2402446330141         Amount of Each Receipt Mis Period       State       Zip Code	$\overline{)}$														
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federal political committee.       U       20000         Name of Employer       Occupation         United HealthCare Services Inc       Govr Rel Dir         Receipt For:       General         Dither (specify) ▼       1100.00         Full Name (Last, First, Middle Initial)       B.         RUSSELL C PETRELLA       Date of Receipt         Mailing Address 4612 MOORLAND AVENUE       C         City       State       Zip Code         FeCil D number of contributing federal political committee.       Occupation         Mailing Address 4203 BRADLEY LANE       Occupation         Mailing Address 4203 BRADLEY LANE       Aggregate Year-to-Date ▼         Pril Name (Last, First, Middle Initial)       Aggregate Year-to-Date ▼         Primary       General       Occupation         Initial Address 4203 BRADLEY LANE       Aggregate Year-to-Date ▼         Pill Name (Last, First, Middle Initial)       Date of Receipt         City       State       Zip Code         Mailing Address 4203 BRADLEY LANE       MD       20815-5234         City       State       Zip Code         Name of Employer       Occupation       Occupation         Mailing Address Receipt In:       Aggregate Year-to-Date ▼         Pirmary       G		GREAT FALLS	VA	22066-2206	_	Amount	of	Each Re	eceipt th	is Period					
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Primary       General         Other (specify) ▼       1100.00         Full Name (Last, First, Middle Initial)       B.         RUSSELL C PETRELLA       Date of Receipt         Mailing Address 4612 MOORLAND AVENUE       05 / 31 / 2013         City       State       Zip Code         PFEC ID number of contributing federal political committee.       C       200.00         Name of Employer       Occupation       Regn Pres         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$100.00 Bi-Weekly)         Full Name (Last, First, Middle Initial)       C       200.00       P/R Deduction (\$100.00 Bi-Weekly)         Full Name (Last, First, Middle Initial)       C       200.00       P/R Deduction (\$100.00 Bi-Weekly)         C C CORY ALEXANDER       Aggregate Year-to-Date ▼       P/R Deduction (\$100.00 Bi-Weekly)       P/R Deduction (\$100.00 Bi-Weekly)         City       State       Zip Code       Transaction ID : PR240542880141         Malling Address 4203 BRADLEY LANE       C       384.60         City       State       Zip Code       Transaction ID : PR240542880141         Manuel of Each Receipt For:       Occupation       P/R Deduction (\$192.30 Bi-Weekly)         United HealthCare Services Inc       P/P Gov't Rel       P/R Deduction (\$192.30 Bi-We															
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B.       RUSSELL C PETRELLA       Date of Receipt         Mailing Address 4612 MOORLAND AVENUE       05       31       2013         City       State       Zip Code       Transaction ID: PR202446430141         EDINA       MN       55424-1159       FEC ID number of contributing federal political committee.       200.00         Name of Employer       Occupation       Regn Pres       Receipt For:       200.00         Primary       General       Other (specify) ▼       1100.00       P/R Deduction (\$100.00 Bi-Weekly)         C       CORY ALEXANDER       Aggregate Year-to-Date ▼       P/R Deduction (\$100.00 Bi-Weekly)         City       State       Zip Code       Transaction ID : PR2405428830141         Adgregate Year-to-Date       Mo       2013       Transaction ID : PR2405428830141         Amount of Each Receipt His Period       State       Zip Code       P/R Deduction (\$192.30 Bi-Weekly)         Pirmary       General <td></td> <td></td> <td></td> <td>1 1 1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>				1 1 1											
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EDINA       MN       55424-1159       Induction of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       200.00         Name of Employer       Occupation       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$100.00 Bi-Weekly)         Cher (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$100.00 Bi-Weekly)         Full Name (Last, First, Middle Initial)       Date of Receipt       Date of Receipt         City       State       Zip Code       Transaction ID : PR2405428830141         City CHASE       MD       20815-5234       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Occupation       VP Gov't Rel         Name of Employer       Occupation       VP Gov't Rel       P/R Deduction (\$192.30 Bi-Weekly)         Name of Employer       Occupation       VP Gov't Rel       P/R Deduction (\$192.30 Bi-Weekly)         P/R Deduction (\$192.30 Bi-Weekly)       2115.30       P/R Deduction (\$192.30 Bi-Weekly)		Mailing Address 4612 MOORLAND AVENUE			M M	/	DD	/ Y		Y					
FEC ID number of contributing federal political committee.       C       200.00         Name of Employer United HealthCare Services Inc       Regn Pres       Primary General Other (specify) ▼       P/R Deduction (\$100.00 Bi-Weekly)         Full Name (Last, First, Middle Initial) Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$100.00 Bi-Weekly)         Full Name (Last, First, Middle Initial) C. CORY ALEXANDER       Date of Receipt         Mailing Address 4203 BRADLEY LANE       Date of Receipt         City       State       Zip Code         City       State       Zip Code         City       State       Zip Code         PEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       VP Gov't Rel         Receipt For:       Aggregate Year-to-Date ▼         P/R Deduction (\$192.30 Bi-Weekly)       P/R Deduction (\$192.30 Bi-Weekly)				·		Transa	actio	on ID : F	PR24024	14643014	1				
federal political committee.       200.00         Name of Employer United HealthCare Services Inc       Regn Pres         Receipt For: Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼         P/R Deduction (\$100.00 Bi-Weekly)       P/R Deduction (\$100.00 Bi-Weekly)         C       CORY ALEXANDER       Date of Receipt         Mailing Address 4203 BRADLEY LANE       05       31       2013         City CHEVY CHASE       State       Zip Code       Transaction ID : PR2405428830141         Amount of Each Receipt       05       31       2013         FEC ID number of contributing federal political committee.       C       384.60         Name of Employer       Occupation       VP Gov't Rel       P/R Deduction (\$192.30 Bi-Weekly)         Name of Employer       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)         P/R Deduction (\$192.30 Bi-Weekly)       2115.30       P/R Deduction (\$192.30 Bi-Weekly)		EDINA	MN	55424-1159	'	Amount	of	Each Re	eceipt th	is Period					
United HealthCare Services Inc       Regn Pres         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name (Last, First, Middle Initial)       Date of Receipt         C. CORY ALEXANDER       Date of Receipt         Mailing Address 4203 BRADLEY LANE       Date of Receipt         City       State       Zip Code         CHEVY CHASE       MD       20815-5234         FEC ID number of contributing federal political committee.       C       384.60         Name of Employer       Occupation       VP Gov't Rel         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)         Primary       General       Other (specify) ▼       2115.30		8	С					,	- 7	200	.00				
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       1100.00         Full Name (Last, First, Middle Initial)       Date of Receipt         C. CORY ALEXANDER       Date of Receipt         Mailing Address 4203 BRADLEY LANE       05         City       State       Zip Code         CHEVY CHASE       MD       20815-5234         FEC ID number of contributing federal political committee.       C       384.60         Name of Employer       Occupation       384.60         United HealthCare Services Inc       VP Gov't Rel       P/R Deduction (\$192.30 Bi-Weekly)         Primary       General       2115.30       P/R Deduction (\$192.30 Bi-Weekly)			Occupation												
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Other (specify) ▼       1100.00       P/K Deduction (\$100.00 bi-Weekly)         Full Name (Last, First, Middle Initial)       Date of Receipt         C. CORY ALEXANDER       Date of Receipt         Mailing Address 4203 BRADLEY LANE       05       31       2013         City       State       Zip Code       05       31       2013         FEC ID number of contributing federal political committee.       C       384.60       Amount of Each Receipt this Period         Name of Employer       Occupation       VP Gov't Rel       Beceipt For:       384.60         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)			Aggregate	Year-to-Date ▼											
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CHEVY CHASE       MD       20815-5234       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       384.60         Name of Employer       Occupation       384.60         United HealthCare Services Inc       VP Gov't Rel       Primary         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)         Other (specify) ▼       2115.30       P/R Deduction (\$192.30 Bi-Weekly)		Mailing Address 4203 BRADLEY LANE					/		/ Y		Y				
FEC ID number of contributing federal political committee.       C       384.60         Name of Employer       Occupation       VP Gov't Rel         United HealthCare Services Inc       VP Gov't Rel       Primary         General       Other (specify) ▼       C       2115.30		-		•		Trans	acti	on ID : I	PR2405	42883014	1				
federal political committee.       384.50         Name of Employer       Occupation         United HealthCare Services Inc       VP Gov't Rel         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       2115.30		CHEVY CHASE	MD	20815-5234		Amount	of	Each Re	eceipt th	is Period					
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Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       2115.30		Name of Employer	Occupation		_										
Primary       General         Other (specify) ▼       P/R Deduction (\$192.30 Bi-Weekly)		United HealthCare Services Inc	VP Gov't R	el											
Other (specify) ▼ 2115.30			Aggregate	Year-to-Date <b>V</b>											
SUBTOTAL of Receipts This Page (optional)					]   F	P/R Dedu	uctio	on (\$192	.30 Bi-V	Veekly)					
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Use separate schedule(s)

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			tor each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
An or	for commercial purposes, other than using th	Statements ma e name and a	ay not be sold or used by any p address of any political committe	e to solicit contributions from such committee.						
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	United for Health)							
Α.	Full Name (Last, First, Middle Initial) RODNEY CHARLES ARMSTEAD			Date of Receipt						
	Mailing Address 406 LEWELEN CIRCLE	01-1-	7. 0.1	05 / D D / Y Y Y Y Y 05 31 2013						
	City ENGLEWOOD	State NJ	Zip Code 07631-2021	Transaction ID : PR2405430230141						
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation VP Ops								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	P/R Deduction (\$40.00 Bi-Weekly)						
в.	Full Name (Last, First, Middle Initial) PETER H WALSH	I		Date of Receipt						
	Mailing Address 495 HIGHCROFT ROAD			05 31 2013						
	City WAYZATA	State MN	Zip Code 55391-1548	Transaction ID : PR2405431130141 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		194.00						
	Name of Employer United HealthCare Services Inc	Occupation Sr Deputy 0	i Gen Counsel							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)						
с.	Full Name (Last, First, Middle Initial) KAREN ANN SAELENS			Date of Receipt						
	Mailing Address 105 N FLORENCE AVE			M M / D D / Y Y Y Y 05 31 2013						
	City LITCHFIELD PARK	State AZ	Zip Code 85340-4424	Transaction ID : PR2408544830141 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C								
	Name of Employer	Occupation	1	—						
	United HealthCare Services Inc	Exec Dir								
	Receipt For: Primary General Other (specify) ▼	Primary General General								
s	UBTOTAL of Receipts This Page (optional)			314.00						
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### SCHEDULE A (FEC Form 3X) •

Use separate schedule(s)

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ידו	EMIZED RECEIPTS		(ch	(check only one)										
111		for each category of the Detailed Summary Page			11a		11b	11c	12					
•		Diata years			13		14	15	16	17				
	y information copied from such Reports and S for commercial purposes, other than using the													
$\overline{)}$	NAME OF COMMITTEE (In Full)													
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) GAIL KOZIARA BOUDREAUX				Date of	Re	ceipt							
	Mailing Address 841 HOLDEN COURT				м м 05	/	31	/ Y	2013	Y				
	City	State	Zip Code	Transaction ID : PR2437119530141										
	LAKE FOREST	IL	60045-4913	_	Amount	of	Each R	eceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С					7	,	384	.62				
	Name of Employer	Occupation												
	United HealthCare Services Inc													
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	Primary General Other (specify) ▼		2115.41	P	VR Ded	uctio	on (\$192	2.31 Bi-V	Veekly)					
			/7											
в.	Full Name (Last, First, Middle Initial) JEFFREY SEAN CORZINE				Date of	Re	ceipt							
	Mailing Address 7649 EARLINGTON PARKW		<sup>M</sup> M 05	1	D D D 31	/ Y	ү ү 2013	Y						
	City	State	Zip Code				-		11973014					
	DUBLIN	OH	43017-3424		Amount	of	Each R	eceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С				40	.00							
	Name of Employer	Occupation												
	United HealthCare Services Inc	Dir Mktg Bu	s Dev											
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	Other (specify) ▼		, 220.00	P/R Deduction (\$20.00 Bi-Weekly)										
<u> </u>	Full Name (Last, First, Middle Initial) JACK S WEISS				Date of	Re	ceipt							
	Mailing Address 6245 NORTH 75 STREET				м м 05	/	31	/ Y	2013	Y				
	City	State	Zip Code		Trans	acti	on ID :	PR2437	12053014	1				
	SCOTTSDALE	AZ	85250-4621		Amount	of	Each R	eceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С					7	- 7	50	0.00				
	Name of Employer	Occupation												
	United HealthCare Services Inc	Shared Svs	Regn CMO											
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00	I F	P/R Deduction (\$25.00 Bi-Weekly)									
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Use separate schedule(s)

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Mailing Address 9013 FARNSWORTH AVENUE NORTH         City       State       Zip Code         BROOKLYN PARK       MN       55443-1754         FEC ID number of contributing       C       Amount of Each Receipt this I         Image: Contributing federal political committee.       C       Amount of Each Receipt this I         Name of Employer       Occupation       Bus Segment CFO         Receipt For:       P/R Deduction (\$60.00 Bi-Week         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name (Last, First, Middle Initial)       B.         KELLY L CLARK       Date of Receipt His I         Mailing Address 13540 BIRCHWOOD AVENUE       C         City       State       Zip Code         ROSEMOUNT       MN       55068-3561         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       Bus Segment CIO         Receipt For:       Occupation       Bus Segment CIO         Receipt For:       Occupation       Bus Segment CIO         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekd         Other (specify) ▼       423.06       P/R Deduction (\$38.46 Bi-Weekd         Cture (Last,	12 16 17										
UnitedHealth Group Incorporated PAC (United for Health)         Full Name (Last, First, Middle Initial)         A. PAUL JOSEPH BALTHAZOR         Mailing Address 9013 FARNSWORTH AVENUE NORTH         City         BROOKLYN PARK         Mare of Employer         United HealthCare Services Inc         Receipt For:         Primary         General         Other (specify)         B. KELLY L CLARK         Mailing Address 13540 BIRCHWOOD AVENUE         City         State       Zip Code         Robel Coll         Mailing Address 13540 BIRCHWOOD AVENUE         City       State         Robel Coll         Mailing Address 13540 BIRCHWOOD AVENUE         City       State         Robel Coll         Mailing Address 13540 BIRCHWOOD AVENUE         City       State         Robel Coll         Mailing Address 10550 PINNACLE WAY         City       State         City       State         Pirinary       Ceneral         Other (specify)       Aggregate Year-to-Date ▼         Piranse of Employer       Aggregate Year-to-Date ▼         Piranse of Employer       Aggregate Year-to-Date ▼	contributions										
A.       PAUL JOSEPH BALTHAZOR       Date of Receipt         Mailing Address 9013 FARNSWORTH AVENUE NORTH       Offer State       Zip Code         Gity       State       Zip Code         BROOKLYN PARK       MN       55443-1754         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this         Name of Employer       Occupation       Bus Segment CFO         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$60.00 Bi-Week         Full Name (Last, First, Middle Initial)       B.       KELLY L CLARK       Date of Receipt         Mailing Address 13640 BIRCHWOOD AVENUE       Occupation Bus Segment CIO       Transaction ID : PR2437121 Amount of Each Receipt this I         Mailing Address 13640 BIRCHWOOD AVENUE       Occupation Bus Segment CIO       Transaction ID : PR2437121 Amount of Each Receipt this I         RosEMOUNT       Mailing Address 10550 PINNACLE WAY       Occupation Bus Segment CIO       P/R Deduction (\$38.46 Bi-Weekl         City       State       Zip Code       Transaction ID : PR2437121 Amount of Each Receipt this I         City       General       Occupation Bus Segment CIO       P/R Deduction (\$38.46 Bi-Weekl         City       State       Zip Code       Transaction ID : PR2437121 Amount of Each Receipt this I         City       State <td< td=""><td></td></td<>											
City       State       Zip Code       Transaction ID : PR2437120         BROOKLYN PARK       MN       55443-1754       Amount of Each Receipt Inis         FEC ID number of contributing tederal political committee.       C       Amount of Each Receipt Inis         Name of Employer       Occupation       Bus Segment CFO         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$60.00 Bi-Week         Full Name (Last, First, Middle Initial)       B.       KELLY CLARK       Date of Receipt         City       State       Zip Code       Transaction ID : PR2437121         Mailing Address 13540 BIRCH/WOOD AVENUE       Of       31       2         City       State       Zip Code       Transaction ID : PR2437121         Mailing Address 13540 BIRCH/WOOD AVENUE       Of       31       2         City       State       Zip Code       Transaction ID : PR2437121         Mailing Address 13540 BIRCH/WOOD AVENUE       Occupation       Date of Receipt       05         Mailing Address 10550 PINNACLE WAY       Occupation       P/R Deduction (\$33.46 Bi-Weeki         City       State       Zip Code       Transaction ID : PR2437121         Mailing Address 10550 PINNACLE WAY       Other (specify) ▼       423.06       P/R Deduction (\$33.46 Bi-Weeki											
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federal political committee.       Occupation         Name of Employer       Occupation         Bus Segment CFO       Aggregate Year-to-Date ▼         P/R Deduction (\$60.00 Bi-Week         Other (specify) ▼       660.00         Full Name (Last, First, Middle Initial)       Date of Receipt         B. KELLY L CLARK       Date of Receipt         Mailing Address 13540 BIRCHWOOD AVENUE       Transaction ID : PR2437121         City       State       Zip Code         ROSEMOUNT       MN       55068-3561         FEC ID number of contributing       C       Aggregate Year-to-Date ▼         United HealthCare Services Inc       Bus Segment CIO       Receipt For:         Primary       General       Occupation       P/R Deduction (\$38.46 Bi-Weekl         Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekl         City       State       Zip Code       P/R Deduction (\$38.46 Bi-Weekl         Mailing Address 10550 PINNACLE WAY       55129-4282       Date of Receipt         Gity       State       Zip Code       NN         Mailing Address 10550 PINNACLE WAY       55129-4282       Transaction ID : PR2437121         Amount of Each Receipt Ibis I       State       Zip Code       NN         Mail											
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B.       KELLY L CLARK       Date of Receipt         Mailing Address 13540 BIRCHWOOD AVENUE       City       State       Zip Code         City       MN       55068-3561       Fransaction ID : PR2437121         ROSEMOUNT       MN       55068-3561       Amount of Each Receipt this I         FEC ID number of contributing federal political committee.       Occupation       Mus Segment CIO         Name of Employer       Occupation       Bus Segment CIO         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekl         City       Value       423.06       P/R Deduction (\$38.46 Bi-Weekl         City       State       Zip Code       Volume (Last, First, Middle Initial)         C.       LAURA L NESS       Date of Receipt       05         Mailing Address 10550 PINNACLE WAY       05       31       2         City       State       Zip Code       MN       55129-4282         FEC ID number of contributing federal political committee.       C       Mailing Address revices Inc       P/R Ecolor this I         Name of Employer       Occupation       VP Finance       P/R Deduction (\$39.00 Bi-Weekl       P/R Deduction (\$39.00 Bi-Weekl	kly)										
City       State       Zip Code       Transaction ID : PR2437121         ROSEMOUNT       MN       55068-3561       Amount of Each Receipt this I         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this I         Name of Employer United HealthCare Services Inc       Bus Segment CIO       P/R Deduction (\$38.46 Bi-Weekl         Receipt For:       Other (specify) ▼       423.06       P/R Deduction (\$38.46 Bi-Weekl         City       State       Zip Code       05       31       2         Mailing Address 10550 PINNACLE WAY       State       Zip Code       05       31       2         City       State       Zip Code       MN       55129-4282       Transaction ID : PR2437121         FEC ID number of contributing federal political committee.       C       Transaction ID : PR2437121       Amount of Each Receipt this I         Name of Employer       Occupation       VP Finance       P/R Deduction (\$39.00 Bi-Weekl       P/R Deduction (\$39.00 Bi-Weekl         Name of Employer       Occupation       VP Finance       P/R Deduction (\$39.00 Bi-Weekl       P/R Deduction (\$39.00 Bi-Weekl											
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federal political committee.       C         Name of Employer United HealthCare Services Inc       Bus Segment CIO         Receipt For: Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼         P/R Deduction (\$38.46 Bi-Weekl         City       State       Zip Code MN         Yell Name of Employer       Occupation         WOODBURY       MN       55129-4282         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       VP Finance         Primary       General											
United HealthCare Services Inc       Bus Segment CIO         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       423.06         Full Name (Last, First, Middle Initial)       423.06         LAURA L NESS       Date of Receipt         Mailing Address 10550 PINNACLE WAY       Date of Receipt         City       State       Zip Code         WOODBURY       MN       55129-4282         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       VP Finance         Receipt For:       Aggregate Year-to-Date ▼         Primary       General	76.92										
Primary       General         Other (specify) ▼       P/R Deduction (\$38.46 Bi-Weekl         Full Name (Last, First, Middle Initial)       Date of Receipt         LAURA L NESS       Date of Receipt         Mailing Address 10550 PINNACLE WAY       05         City       State       Zip Code         WOODBURY       MN       55129-4282         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       VP Finance         Receipt For:       Aggregate Year-to-Date ▼         Primary       General											
C. LAURALNESS       Date of Receipt         Mailing Address 10550 PINNACLE WAY       Image: Constraint of the constr	cly)										
City       State       Zip Code         WOODBURY       MN       55129-4282         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       VP Finance         Receipt For:       Aggregate Year-to-Date ▼         Primary       General											
WOODBURY     MN     55129-4282       FEC ID number of contributing federal political committee.     C       Name of Employer     Occupation       United HealthCare Services Inc     VP Finance       Receipt For:     Aggregate Year-to-Date ▼       Primary     General	2013										
FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         United HealthCare Services Inc       VP Finance         Receipt For:       Aggregate Year-to-Date ▼         Primary       General											
United HealthCare Services Inc       VP Finance         Receipt For:       Aggregate Year-to-Date ▼         Primary       General	78.00										
Receipt For: Primary General Aggregate Year-to-Date ▼ P/R Deduction (\$39.00 Bi-Week											
	kly)										
SUBTOTAL of Receipts This Page (optional)	274.92										

### SCHEDULE A (FEC Form 3X) . . . . . . . DEAEI

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	ay not be sold or used by any purchased by any purchased of any political committee	13     14     15     16     1       erson for the purpose of soliciting contributions       a to collicit contributions								
NAME OF COMMITTEE (In Full)	ne name and a	iddress of any political committee	e to solicit contributions from such committee.								
UnitedHealth Group Incorpora	ted PAC (I	Jnited for Health)									
Full Name (Last, First, Middle Initial) A. JOHN W COSGRIFF			Date of Receipt								
Mailing Address 1837 SUMMIT LANE			05 31 2013								
City	State	Zip Code	Transaction ID : PR2437121630141								
MENDOTA HEIGHTS	MN	55118-4137	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		40.00								
Name of Employer	Occupation	1									
United HealthCare Services Inc	Chief of Sta	aff									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		220.00	P/R Deduction (\$20.00 Bi-Weekly)								
			1								
Full Name (Last, First, Middle Initial) B. PETER W RAINEY			Date of Receipt								
Mailing Address 3115 WEST 47 STREET			05 31 2013								
City	State	Zip Code	Transaction ID : PR2437127530141								
MINNEAPOLIS	MN	55410-1857	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		230.00								
Name of Employer United HealthCare Services Inc	Occupation	l									
	VP Finance	9									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		, 1265.00	P/R Deduction (\$115.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. ROBIN E LIPPERT			Date of Receipt								
Mailing Address 522 4 STREET SOUTH EA	ST		05 31 _2013 _								
City	State	Zip Code	Transaction ID : PR2439928030141								
WASHINGTON	DC	20003-4212	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.62								
Name of Employer	Occupation	1									
United HealthCare Services Inc	Dir Govt Re	el									
	Aggregate	Year-to-Date ▼									
Other (specify) ▼		2115.41	P/R Deduction (\$192.31 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			654.62								
TOTAL This Period (last page this line numbe	er only)										

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b 14	11c	$\vdash$	12 16	<b>□</b> 4 7			
	y information copied from such Reports and S for commercial purposes, other than using the				or the		oose of	solicitin		ntribut				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate													
Á.	Full Name (Last, First, Middle Initial) STEPHEN M HEYMAN				Date of	Re	ceipt							
	Mailing Address 5300 SHERRILL AVENUE				м м 05	/	31			013	Y			
	City	State MD	Zip Code					PR2444						
	CHEVY CHASE	טוא	20815-3720	/	Amount	of	Each R	eceipt t	his F	Period	_			
	FEC ID number of contributing federal political committee.	С					 J			200.	00			
	Name of Employer	Occupation												
	United HealthCare Services Inc	VP Govt Re	9											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P	Weel	<ly)< td=""><td></td></ly)<>								
	Full Name (Last, First, Middle Initial) LORI C MCDOUGAL				Date of	Re	ceipt							
	Mailing Address 19705 LAKEVIEW AVENUE				м м 05	/	31			) 13	Y			
	City	State	Zip Code					PR2445						
	EXCELSIOR	MN	55331-9351	/	Amount	of	Each R	eceipt t	his F	Period				
	FEC ID number of contributing federal political committee.	С				_	,	. ,		384.	60			
	Name of Employer United HealthCare Services Inc													
	Receipt For: Primary General Other (specify) ▼	P/	P/R Deduction (\$192.30 Bi-Weekly)											
с.	Full Name (Last, First, Middle Initial) DONALD S LANGER				Date of	Re	ceipt							
	Mailing Address 5110 OAK RAMBLING DRIV	Ξ			м м 05	/	31			) 13	Y			
	City KATY	State TX	Zip Code 77494-1971					PR244			1			
	FEC ID number of contributing federal political committee.	С			anount	J	7	Receipt this Period 40.0						
	Name of Employer	Occupation												
	United HealthCare Services Inc	Plan Pres												
	Receipt For:													
	Primary General Other (specify) ▼		, 220.00	P/R Deduction (\$20.00 Bi-Weekly)										
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			for each category of the Detailed Summary Page	X	11a 13		11	- H	11c 15	12	17			
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	ME OF COMMITTEE (In Full) hitedHealth Group Incorporate	ed PAC (l	United for Health)											
	Name (Last, First, Middle Initial) ARK J DUHAIME			[	Date of Receipt									
	ling Address 5781 RUBY DRIVE	<u></u>			м м 05	/		31	/ Y	2013	Y			
City TR		State MI	Zip Code 48085-3922							016930				
FEC	C ID number of contributing eral political committee.	С			Amoun	it of	Ea	CN RE	eceipt tr	nis Perio	78.00			
Unit	ne of Employer ted HealthCare Services Inc ceipt For: Primary General Other (specify) v	Occupation VP Info Tec Aggregate		P/	/R Dec	ducti	ion	(\$39.0	00 Bi-W	eekly)				
	Name (Last, First, Middle Initial) LEEN J LIVERANI				Date o	of Re	ecei	ipt						
	Mailing Address 100 BOSTOCK ROAD							31	/ Y	2013	Y			
City SH	OKAN	State NY	Zip Code 12481-5400	A						1672301 nis Peric				
	C ID number of contributing eral political committee.	С			55.									
	ne of Employer ed HealthCare Services Inc													
Rec	eipt For: Primary General Other (specify) ▼	P/	P/R Deduction (\$27.70 Bi-Weekly)											
	Name (Last, First, Middle Initial)				Date o	of Re	ecei	ipt						
Mai	ling Address 9958 BUTTONDOWN LANE				<sup>M</sup> 05	/		D D 31	/ Y	2013	Y			
City ZIC	, DNSVILLE	State IN	Zip Code 46077-8135	A						167330 nis Peric				
	C ID number of contributing eral political committee.	С					,		7		40.00			
Nan	ne of Employer	Occupation												
	ted HealthCare Services Inc	HIth Plan C	EO											
	eipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 220.00	P	P/R Deduction (\$20.00 Bi-Weekly)									
SUBT	<b>TOTAL</b> of Receipts This Page (optional)						7			17	'3.40			
тота	L This Period (last page this line number	only)		<b>•</b>			,		-					

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
or for commercial purposes, other than using	nd Statements may not be sold or used by any p g the name and address of any political committee									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (United for Health)									
Full Name (Last, First, Middle Initial) A. KARIN KEITEL		Date of Receipt								
Mailing Address 3918 HAVEN ROAD		M = M         /         D = D         /         Y = Y = Y = Y         Y           05         31         2013								
City MINNETONKA	State Zip Code MN 55345-2371	Transaction ID : PR2460167630141								
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period								
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Bus Segment Gen Counsel Aggregate Year-to-Date ▼ 550.00	P/R Deduction (\$50.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) B. JELKA S PETROVIC		Date of Receipt								
Mailing Address 4454 PEPPER MILL LAN	E	M = M         /         D = D         /         Y = Y = Y = Y         Y         O         Y         Y = Y = Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         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 ORION	StateZip CodeMI48359-2069	Transaction ID : PR2460168030141 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	40.00								
Name of Employer United HealthCare Services Inc	Occupation Hith Plan CEO									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. LARRY C RENFRO		Date of Receipt								
Mailing Address 5 DOVE LANE		05 31 2013								
City ANDOVER	State Zip Code MA 01810-2845	Transaction ID : PR2460168130141								
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period								
Name of Employer	Occupation	_								
United HealthCare Services Inc	EVP UHG CEO Optum									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
	I)									

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

Use separate schedule(s)

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	_								
			ay not be sold or used by any p	erson for the purpose of soliciting contribution									
		ne name and a	ddress of any political committee	e to solicit contributions from such committee.									
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporation	ted PAC (l	Jnited for Health)										
A.	Full Name (Last, First, Middle Initial) DAVID B ORBUCH			Date of Receipt									
	Mailing Address 3370 SYCAMORE LANE			05 31 2013									
	City PLYMOUTH	State MN	Zip Code 55441-2229	Transaction ID : PR2460168230141 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		77.00									
	Name of Employer United HealthCare Services Inc	Occupation Chief Comp											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.50	P/R Deduction (\$38.50 Bi-Weekly)									
	Full Name (Last, First, Middle Initial) ERIC J WEXLER			Date of Receipt									
	Mailing Address 7220 WILLOW OAK DR			05 31 Y Y Y Y 05 31									
	City WEST BLOOMFIELD	State MI	Zip Code 48324-3081	Transaction ID : PR2463723130141									
		IVII	46324-3061	Amount of Each Receipt this Period	_								
	FEC ID number of contributing federal political committee.	C		64.00									
	Name of Employer United HealthCare Services Inc	Occupation											
	Receipt For:	1	nt Gen Counsel										
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 352.00	P/R Deduction (\$32.00 Bi-Weekly)									
	Full Name (Last, First, Middle Initial) KAREN L WALKOWSKI			Date of Receipt									
	Mailing Address 6359 COUNTRY ROAD			05 31 2013									
	City EDEN PRAIRIE	State MN	Zip Code 55346-1342	Transaction ID : PR2463723430141 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		40.00									
	Name of Employer	Occupation											
	United HealthCare Services Inc	Dir Bus Pro	cess										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)									
	UBTOTAL of Receipts This Page (optional)	1		181.00									

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
IL LIVILLED NECEIF13		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12				
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 cor	ntributions fro	m such o	committe	;е.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	Jnited for Health)								
Full Name (Last, First, Middle Initial) <b>A.</b> SUE SCHICK			Date of	Receipt						
Mailing Address 714 GREYTHORNE ROAD			м м 05	/ D D 31		2013	Y			
City WYNNEWOOD	State PA	Zip Code 19096-2511		action ID : Pl						
FEC ID number of contributing federal political committee.	C				7	250.	00			
Name of Employer United HealthCare Services Inc	Occupation Hith Plan C									
Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 1375.00	P/R Ded	uction (\$125.0	00 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) B. LILLIAN R HECKMAN			Date of	Receipt						
Mailing Address 552 DEER LAKE CIRCLE			M M 05	/ D D 31		y y 2013	Y			
City BLUE BELL	State PA	Zip Code 19422-1371		action ID : PF						
FEC ID number of contributing federal political committee.	С				, , , , , , , , , , , , , , , , , , ,	60.0	00			
Name of Employer United HealthCare Services Inc	Occupation Dir Proj Mg									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 330.00	P/R Ded	uction (\$30.00	) Bi-Weel	dy)				
Full Name (Last, First, Middle Initial) C. MARK A PHILLIPS			Date of	Receipt						
Mailing Address 1760 LUCY RIDGE CT			M M 05	/ D D 31		2013	Y			
City CHANHASSEN	State MN	Zip Code 55317-7661		action ID : P			<u> </u>			
FEC ID number of contributing federal political committee.	С				,	78.	00			
Name of Employer	Occupation	1								
United HealthCare Services Inc	SVP SIs									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 429.00	P/R Ded	uction (\$39.00	) Bi-Wee	kly)				
SUBTOTAL of Receipts This Page (optional).				· · · · ·	7	388.0	00			

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			Detailed Summary Page	X 11a 11b 11c 12													
An	/ information copied from such Reports and S	tatements ma	y not be sold or used by any p	erson f	13 or the	purr	14 Dose of	15 solicitir		16 ntribut	1 <sup>.</sup> ions						
	for commercial purposes, other than using the																
	NAME OF COMMITTEE (In Full)																
/	UnitedHealth Group Incorporate	ed PAC (L	Inited for Health)														
۹.	Full Name (Last, First, Middle Initial) JERI G KUBICKI			0	Date of	Re	ceipt										
	Mailing Address 7659 COLDSTREAM DRIVE			05 31 2013													
	City	State	Zip Code		Trans	acti	on ID :	PR248			1						
	CINCINNATI	OH	45255-3932	A	mount	of	Each R	eceipt	this F	Period							
	FEC ID number of contributing federal political committee.	С					y			100.	00						
	Name of Employer	Occupation															
	United HealthCare Services Inc	VP Govt Re															
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General Other (specify) ▼		550.00	P/	R Ded	uctio	on (\$50.	00 Bi-V	/eekl	y)							
	Full Name (Last, First, Middle Initial) THOMAS B MANDERFELD		Date of	Re	ceipt												
	Mailing Address 4835 PENN AVENUE SOUTH	I			м м	/	31	1		)13	Y						
-	City	State	Zip Code			acti	on ID :	PR248									
	MINNEAPOLIS	MN	55419-5258				Each R										
	FEC ID number of contributing federal political committee.								80.00								
	Name of Employer United HealthCare Services Inc																
Ì	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	P/	R Dedu	uctic	on (\$40.	00 Bi-W	/eekl	y)							
).	Full Name (Last, First, Middle Initial)																
	Mailing Address 60 WILDHURST ROAD				м м 05	/	31	/		) 13	Y						
		State MN	Zip Code				ion ID :				1						
	EXCELSIOR	IVIIN	55331-8461	A	Mount	of	Each R	eceipt	this F	Period							
	FEC ID number of contributing federal political committee.	С					,			200.	.00						
1	Name of Employer	Occupation		_													
	United HealthCare Services Inc	Bus Segme	nt CEO														
Ī	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General		1400.00	P/	R Ded	uctio	on (\$10	0.00 Bi-	Wee	kly)							
	Other (specify)		1100.00	1													
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or for commercial purposes, other than usi	and Statements may not be sold or used by any period of the name and address of any political committee	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. KATHRYN M SULLIVAN		Date of Receipt
Mailing Address 530 N LAKE SHORE D		05 31 Y Y Y Y Y 05 31 2013
City CHICAGO	State Zip Code IL 60611-7435	Transaction ID : PR2491457530141
	iL 00011-7435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	194.00
Name of Employer	Occupation	
United HealthCare Services Inc	Regn CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	1067.00	P/R Deduction (\$97.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. KARA V SMITH		Date of Receipt
Mailing Address 610 CRESTWOOD DR	VE	05 31 2013
City	State Zip Code	Transaction ID : PR2540175330141
ALEXANDRIA	VA 22302-2533	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	307.70
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Rel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.35	P/R Deduction (\$153.85 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. HYLLIUS R EDWARDS		Date of Receipt
Mailing Address PO BOX 44246		05 31 2013
City	State Zip Code	Transaction ID : PR2541300430141
DENVER	CO 80201-4246	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
United HealthCare Services Inc	Dir Govt Rel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$50.00 Bi-Weekly)
Other (specify)	550.00	
SUBTOTAL of Receipts This Page (option	nal)	601.70
TOTAL This Period (last page this line nu	Imber only)	

### SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12		
Any information copied from such Reports and	Statements ma		erson fo	13 r the	pur	14 pose o	15 f solicitin	g contribu	utions	
or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	United for Health)								
Full Name (Last, First, Middle Initial) <b>JOHN VERSAGGI</b>			D	ate of	Re	eceipt				
Mailing Address 800 ALBANY AVENUE				м м 05	/	31		2013	Y	
City ALEXANDRIA	State VA	Zip Code 22302-3501						3008301		
FEC ID number of contributing federal political committee.	С					7		19:	2.32	
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1057.76	P/F	R Ded	ucti	on (\$96	6.16 Bi-W	/eekly)		
Full Name (Last, First, Middle Initial) B. JOHN F DOHERTY			D	ate of	Re	eceipt				
Mailing Address 5338 SPILMAN AVENUE	State	Zip Code	46	05	1	31		2013	_	
SACRAMENTO	CA	95819-1734				-		02453014 his Period		
FEC ID number of contributing federal political committee.	С					,			0.00	
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	P/F	R Dedu	uctio	on (\$50	0.00 Bi-W	eekly)		
Full Name (Last, First, Middle Initial) C. BRENDAN HOSTETLER			D	ate of	Re	eceipt				
Mailing Address 3643 N SEELEY AVENUE #2				м м 05	/	31		2013	Y	
City CHICAGO	State IL	Zip Code 60618-4925						25419301 his Period		
FEC ID number of contributing federal political committee.	С					7		6	0.00	
Name of Employer	Occupation	1	$\neg$							
United HealthCare Services Inc	Govt Rel D									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00	P/F	R Ded	ucti	on (\$3(	0.00 Bi-W	/eekly)		
SUBTOTAL of Receipts This Page (optional).				-		<u>,</u>	- 7	352	2.32	

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
or for commercial purposes, other than using	nd Statements may not be sold or used by any pe g the name and address of any political committee						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (United for Health)						
Full Name (Last, First, Middle Initial)							
Mailing Address 857 GLENBROOK DRIV		05 31 2013					
ATLANTA	State Zip Code GA 30318-1621	Transaction ID : PR2542542130141           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	50.00					
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Govt Rel Dir Aggregate Year-to-Date ▼						
Other (specify) ▼	275.00	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name (Last, First, Middle Initial) B. RICHARD E RAMSAY		Date of Receipt					
Mailing Address 543 E LURAY AVE		05 31 2013					
City ALEXANDRIA	StateZip CodeVA22301-1605	Transaction ID : PR2542542230141 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer United HealthCare Services Inc							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	P/R Deduction (\$50.00 Bi-Weekly)					
Full Name (Last, First, Middle Initial) C. IPYANA SPENCER		Date of Receipt					
Mailing Address 4226 40TH STREET NO	RTH	05 31 2013					
City ARLINGTON	StateZip CodeVA22207-4610	Transaction ID : PR2542542330141 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	60.00					
Name of Employer	Occupation	_					
United HealthCare Services Inc	Govt Rel Dir	_					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 330.00	P/R Deduction (\$30.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	I) Þ	210.00					
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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			Detailed Summary Page		11a		111		11c	12	<u> </u>				
	y information copied from such Reports and St							e of s							
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to sol	icit cor	ntrib	outio	ons fro	om such	o commit	ee.				
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)												
A.	Full Name (Last, First, Middle Initial) CHANTA G COMBS			[	Date of	Re	eceip	pt							
	Mailing Address 4229 SUMMERTREE DRIVE			05 / Y Y Y Y Y 2013											
	City TALLAHASSEE	State FL	Zip Code 32311-3331	-						3 <b>1353014</b> is Period	1				
	FEC ID number of contributing federal political committee.	С					7				.92				
	Name of Employer United HealthCare Services Inc	Occupation Govt Rel Di													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/	'R Dedi	ucti	ion (	\$38.4	6 Bi-We	ekly)					
B.	Full Name (Last, First, Middle Initial)				Date of	Re	eceip	pt							
	Mailing Address 458 MORENO ROAD				м м 05	/		31	/ Y	y y 2013	Y				
	City WYNNEWOOD	State PA	Zip Code 19096-1124	/						<b>1373014</b> is Period	1				
	FEC ID number of contributing federal political committee.									78	.00				
	Name of Employer United HealthCare Services Inc	Occupation KA Sr Acct													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/	R Dedu	uctio	on (	\$39.0	0 Bi-We	ekly)					
с.	Full Name (Last, First, Middle Initial) JEREMY VAUGHN BRYANT				Date of	Re	eceip	pt							
	Mailing Address 11700 ARBORHILL DRIVE				м м 05	/		31	/ Y	ү ү 2013	Y				
	City ZIONSVILLE	State IN	Zip Code 46077-9683							<b>96133014</b> is Period	1				
	FEC ID number of contributing federal political committee.	С					,		,	70	.00				
	Name of Employer	Occupation	I												
	United HealthCare Services Inc	KA Dir Acct	t Mgmt												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 385.00	<b>]</b> P/	/R Ded	ucti	ion (	(\$35.0	0 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)									224	92				
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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TEMIZED RECEIPTS	Detailed Summary Page		11a		11	b	11c		12								
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Any information copied from such Reports a or for commercial purposes, other than using																	
NAME OF COMMITTEE (In Full)																	
UnitedHealth Group Incorpo	rated PAC (I	Jnited for Health)															
Full Name (Last, First, Middle Initial) <b>A.</b> <u>SCOTT F FLANNERY</u>																	
Mailing Address 8508 TRELADY CT				м м 05	1		31	/ Y		)13	Y						
City	State	Zip Code		Trans	acti	ion	ID : P	R2552	9623	3014							
PLANO	TX	75024-6827	- :	Amount	t of	Ead	ch Re	ceipt th	is P	eriod							
FEC ID number of contributing federal political committee.	C					,		y	_	78.	00						
Name of Employer	Occupation	1															
United HealthCare Services Inc	Hith Plan C	EO															
Receipt For:	Aggregate	Year-to-Date ▼															
Primary     General       Other (specify) ▼		429.00	P/R Deduction (\$39.00 Bi-Weekly)														
Full Name (Last, First, Middle Initial) B. CLAIRE L HANNAN	I			Date of	Re	ecei	ipt										
Mailing Address 25932 PORTAFINO DRIV	/E		05 / Y Y Y Y Y 05 31 2013														
City	State	Zip Code		Trans	acti	ion	ID : P	R25529	<u>9627</u>	30141							
MISSION VIEJO	CA	92691-5716		Amount	t of	Ead	ch Re	ceipt th	is P	eriod							
FEC ID number of contributing federal political committee.	s and the second s							78.00									
Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg																
Receipt For: Primary General Other (specify) ▼	Receipt For:     Aggregate Year-to-Date ▼       Primary     General									P/R Deduction (\$39.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. GREGORY J JAMES				Date of	Re	ecei	ipt										
Mailing Address 2323 KINGS POINT DRI	VE			м м 05	/		31	/ Y	ү 20	13 13	Y						
City	State	Zip Code		Trans	act	tion	ID : F	PR2552	9632	23014							
LARGO	FL	33774-1009		Amount	t of	Ead	ch Re	ceipt th	is P	eriod							
FEC ID number of contributing federal political committee.	C					7		7	_	78	00						
Name of Employer	Occupation	1															
United HealthCare Services Inc	Med Dir																
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	] P	P/R Ded	ucti	ion (	(\$39.0	0 Bi-We	eekly	()							
SUBTOTAL of Receipts This Page (optiona	,				-	7		7	-	234.	00						

Use separate schedule(s)

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ידו	EMIZED RECEIPTS		Use separate schedule(s)				(check only one)								
11			for each category of the Detailed Summary Page		11a	$\square$	11b	11c	12		]				
	y information copied from such Reports and for commercial purposes, other than using t										17 5				
$\overline{)}$	NAME OF COMMITTEE (In Full)														
$\rangle$	UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)												
A.	Full Name (Last, First, Middle Initial) JARRETT T JEDLICKA				Date of	Ree	ceipt								
	Mailing Address 554 SPRUCE ST			05 31 2013											
	City EAGAN	State MN	Zip Code 55123-4914		Transaction ID : PR2552963330141 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С					,		8	80.00					
	Name of Employer United HealthCare Services Inc	Occupation Dir Gen Mg													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	P	P/R Ded	uctic	on (\$40.0	00 Bi-We	ekly)						
в.	Full Name (Last, First, Middle Initial) NARASIMHAN KIDAMBI				Date of	Ree	ceipt								
	Mailing Address 18477 85TH AVE N	8477 85TH AVE N State Zip Code				05 31 2013 Transaction ID : PR2552963830141									
	City MAPLE GROVE	MN	2ip Code 55311-1663	-			-								
	FEC ID number of contributing federal political committee.	С			Amount	. 01 1		eceipt th		0.00					
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Assc Dir Bu Aggregate	 P	/R Dedu	uctio	n (\$20.0	00 Bi-We	ekly)							
С.	Full Name (Last, First, Middle Initial)				Date of	Red	ceipt								
•.	Mailing Address 160 ACORN LANE				м м 05	/	31	/ Y	2013	Y					
	City MILFORD	State CT	Zip Code 06461-1876					PR25529 eceipt th							
	FEC ID number of contributing federal political committee.	С					,	7	7	78.00					
	Name of Employer United HealthCare Services Inc	Occupation KA Dir Acct													
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$39.00 Bi-Weekly)												
s	UBTOTAL of Receipts This Page (optional)			•			,	- 1	19	8.00					
т	OTAL This Period (last page this line numbe	er only)		•							٦				

Use separate schedule(s)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$							
or for commercial purposes, other than u	ts and Statements may not be sold or used by any pusing the name and address of any political committee	person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (United for Health)								
Full Name (Last, First, Middle Initial) A. BARRY R STREIT		Date of Receipt							
Mailing Address 5421 KELLOGG AVE	-	05 31 2013							
City	State Zip Code MN 55424-1604	Transaction ID : PR2552966730141							
EDINA	MN 55424-1604	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	78.00							
Name of Employer	Occupation								
United HealthCare Services Inc	RVP Medicr Field SIs								
Receipt For:	Aggregate Year-to-Date ▼								
Other (specify)	429.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. MONICA L RAYBURN	1	Date of Receipt							
Mailing Address 688 WEST SYCAMO	RE	05 31 2013							
City	State Zip Code	Transaction ID : PR2553475130141							
VERNON HILLS	IL 60061-1084	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	78.00							
Name of Employer United HealthCare Services Inc	Occupation Dir Clms								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. RICHARD D THOMAS		Date of Receipt							
Mailing Address 5121 DUPONT AVEN		05 / Y Y Y Y 2013							
City MINNEAPOLIS	State Zip Code MN 55419-1151	Transaction ID : PR2553475430141							
	MN 55419-1151	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	194.00							
Name of Employer	Occupation								
United HealthCare Services Inc	VP Gen Mgmt								
Receipt For:	Aggregate Year-to-Date ▼								
Other (specify)	1067.00	P/R Deduction (\$97.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (opt	onal)	350.00							
TOTAL This Period (last page this line	number only)								

# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	•	Use separate schedule(s)	(check only	(check only one)								
		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12						
Any information copied from such	Reports and Statements m		erson for the	14 Durpose of so	15 olicitina	16 contributi	17 ions					
or for commercial purposes, other												
NAME OF COMMITTEE (In Fi		United for Health)										
Full Name (Last, First, Middle DENEEN VOJTA	Initial)		Date of	Receipt								
Mailing Address 5201 KELLOC	G AVENUE		05	/ D D 31	/ Y	2013	Y					
City EDINA	State MN	Zip Code 55424-1304	Transaction ID : PR2553475530141 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C			- 7	7	386.	00					
Name of Employer United HealthCare Services Inc Receipt For:												
Primary Genera Other (specify) ▼		Year-to-Date ▼ 2123.00	P/R Dedu	uction (\$193.0	)0 Bi-We	ekly)						
Full Name (Last, First, Middle B. KARSTEN S FLAGSTA			Date of	Receipt								
Mailing Address 13420 JAY ST		7.0.1	05	/ D D 31		у у 2013	Y					
City ANDOVER	State MN	Zip Code 55304-4015		action ID : PF of Each Rec			<u> </u>					
FEC ID number of contributing federal political committee.						200.0	00					
Name of Employer United HealthCare Services Inc	Occupation VP Info Tec		_									
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)									
Full Name (Last, First, Middle C. DANIEL J CLUTE	Initial)		Date of	Receipt								
Mailing Address 7756 N 85TH	STREET		м м 05	/ D D 31		y y 2013	Y					
City OMAHA	State NE	Zip Code 68122-1281		action ID : P			1					
FEC ID number of contributing federal political committee.			Amount	of Each Rec	eipt this	s Period 194.	.00					
Name of Employer	Occupation	1	_									
United HealthCare Services Inc	: Med Dir											
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)									
SUBTOTAL of Receipts This Pa				y	5	780.0	00					
TOTAL This Period (last page th	as the number only)	······ )					_					

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		11a		11b	11c		12	<u> </u>	
	y information copied from such Reports and S										
or	for commercial purposes, other than using the										
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
۹.	Full Name (Last, First, Middle Initial) CRAIG W GAGE				Date of	Re	eceipt				
	Mailing Address 5724 EAGLEMOUNT CIRCLE	=			м м 05	1	31	/ Y		) 013	Y
	City	State	Zip Code		Trans	acti	ion ID : I	PR2560	0647	730141	
	LITHIA	FL	33547-3840	A	Amount	of	Each Re	eceipt th	nis P	Period	
	FEC ID number of contributing federal political committee.	С					7	7		78.	00
	Name of Employer	Occupation		$\neg$							
	United HealthCare Services Inc	Med Dir									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		429.00	]   P/	'R Dedi	uctio	on (\$39.(	00 Bi-We	eekly	()	
	Full Name (Last, First, Middle Initial) DONALD J GIANCURSIO				Date of	Re	eceipt				
	Mailing Address 72 MIDNIGHT RIDGE DR				м м 05	1	31	/ Y		)13	Y
	City	State	Zip Code		Trans	acti	ion ID : F	PR2560	0649	30141	
	LAS VEGAS	NV	89135-1680	A	Amount	of	Each Re	eceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					7	7		386.	00
	Name of Employer Health Plan of Nevada	Occupation HIth Plan Cl									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2123.00	P/	R Dedu	uctio	on (\$193	.00 Bi-W	/eek	ly)	
с.	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt				
	Mailing Address 512 W ORANGEWOOD AVE				м м 05	1	D D 31	/ Y		)13	Υ
	City	State	Zip Code		Trans	act	ion ID :	PR2560	0651	130141	1
	PHOENIX	AZ	85021-7252	/	Amount	of	Each Re	eceipt th	nis P	Period	
	FEC ID number of contributing federal political committee.	С					7	7		78.	00
	Name of Employer	Occupation		$\neg$							
	United HealthCare Services Inc	Hith Plan C	EO								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	50 0 1		P/	R Ded	ucti	on (\$39.0	00 Bi-W	eekly	y)	
	Other (specify)	L	429.00								
s	UBTOTAL of Receipts This Page (optional)						,	7		542.0	00
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Use separate schedule(s)

FOR LINE NUMBER:

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TTEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or for commercial purposes, other that	ports and Statements may not be sold or used by any in using the name and address of any political committee	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	orporated PAC (United for Health)	
Full Name (Last, First, Middle Initia A. SHELDON LIPPMAN	al)	Date of Receipt
Mailing Address 55 CLIFFIELD RC		05 31 Y Y Y Y Y 05 31 2013
City BEDFORD	State Zip Code NY 10506-1210	Transaction ID : PR2560065430141 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Anount of Each Necept this Feriod
Name of Employer United HealthCare Services Inc	Occupation Med Dir	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)
Full Name (Last, First, Middle Initia B. ANGELA L LOBERG	al)	Date of Receipt
Mailing Address 2837 EAST PARK	PLACE	05 31 2013
City MILWAUKEE	StateZip CodeWI53211-3845	Transaction ID : PR2560065530141 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	194.00
Name of Employer United HealthCare Services Inc	Occupation SB VP SIs Acct Mgmt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)
Full Name (Last, First, Middle Initia C. JEFFREY D LUCHT	al)	Date of Receipt
Mailing Address 191 MAIN ST		05 31 Y Y Y Y Y 2013
City S GLASTONBURY	State Zip Code CT 06073-3004	Transaction ID : PR2560065630141 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Anount of Each Necept this Feriod
Name of Employer	Occupation	
United HealthCare Services Inc	SVP Act Underwriting	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (	optional)	582.00
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11b	110	: [	12	
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	ny information copied from such Reports and for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporat	ted PAC (I	United for Health)								
Α.	Full Name (Last, First, Middle Initial) DAVID MILICH				Date of	Re	ceipt				
	Mailing Address 2702 BIRCHMERE COURT				M M	/		/		Y Y Y	Y
	City	State	Zip Code	- 1	05 Trans	acti	31 ion ID :	PR25		2013 603014	1
	KĂTY	ТХ	77450-1303				Each R				
	FEC ID number of contributing federal political committee.	С					,	,		78	.00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Hith Plan C	EO								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		429.00	P.	/R Ded	uctio	on (\$39.	.00 Bi-	Weel	kly)	
в.	Full Name (Last, First, Middle Initial) TIMOTHY J NOEL	1			Date of	Re	ceipt				
	Mailing Address 4408 THOMAS AVE SOUTH	I			м м 05	/	31	1		y y 2013	Y
	City	State	Zip Code			acti	on ID :	PR25			1
	MINNEAPOLIS	MN	55410-1968				Each R				
	FEC ID number of contributing federal political committee.	С					<b>7</b>			78	.00
	Name of Employer United HealthCare Services Inc	Occupation VP Finance									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/	/R Dedi	uctic	on (\$39.	00 Bi-'	Neeł	<ly)< td=""><td></td></ly)<>	
с.	Full Name (Last, First, Middle Initial) JAMES CRONIN				Date of	Re	ceipt				
	Mailing Address 20700 DELTA DRIVE				м м 05	/	31	1		y y 2013	Y
	City GAITHERSBURG	State MD	Zip Code 20882-1121				ion ID :				
			20002-1121	- '	Amount	tof	Each R	leceipt	this	Period	
	FEC ID number of contributing federal political committee.	С				_	,			76	5.92
	Name of Employer	Occupation		_							
	United HealthCare Services Inc	HIth Plan C	EO								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		423.06	P	/R Ded	uctio	on (\$38	.46 Bi-	Wee	kly)	
	CUBTOTAL of Receipts This Page (optional)			<u> </u>			5	- 1	-	232	.92
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information partial from such Day	d Otatawa anta		13 14 15 16
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
> UnitedHealth Group Incorpor	ated PAC (	United for Health)	
Full Name (Last, First, Middle Initial)			
A. BRIAN W LUND			Date of Receipt
Mailing Address 464 EAST NORTH AVE			
City	State	Zip Code	05 31 2013 Transaction ID : PR2561457630141
GRANTSBURG	WI	54840-7423	Amount of Each Receipt this Period
FEC ID number of contributing	С		78.00
federal political committee.	U		
Name of Employer	Occupatior	1	
United HealthCare Services Inc	Mgr Tax		
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		429.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. LARRY W CAVANAUGH	·		Date of Receipt
Mailing Address 520 NE 20TH ST # 1010			M M / D D / Y Y Y Y
<u></u>	Chata	Zin Onda	05 31 2013
City WILTON MANORS	State FL	Zip Code 33305-2162	Transaction ID : PR2563211030141 Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	С		78.00
Name of Employer	Occupatior	1	
United HealthCare Services Inc	Spc Ben G	ovt Dntl Sls Mgr	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		429.00	P/R Deduction (\$39.00 Bi-Weekly)
		, ,	1
Full Name (Last, First, Middle Initial) C. KATHLEEN R CRAMPTON			Date of Receipt
Mailing Address 2335 SOUTH OCEAN BL			
			05 31 2013
City	State	Zip Code	Transaction ID : PR2563211130141
PALM BEACH	FL	33480-5368	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer	Occupatior	1	
United HealthCare Services Inc	Plan Pres		
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		1100.00	P/R Deduction (\$100.00 Bi-Weekly)
		7 7	1
SUBTOTAL of Receipts This Page (optional	)		356.00
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TOTAL This Period (last page this line numl	per only)		•

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

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		durede of any pointed committee	
UnitedHealth Group Incorpor	ated PAC (I	United for Health)	
Full Name (Last, First, Middle Initial) A. JENNIFER F WALSH			Date of Receipt
Mailing Address 3116 4TH STREET NORT	Ή		M M / D D / Y Y Y Y Y 05 31 2013
City	State	Zip Code	Transaction ID : PR2564296830141
ARLINGTON	VA	22201-1614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		194.00
Name of Employer	Occupation	1	
United HealthCare Services Inc	Dir Govt Re	el	
Receipt For:	Aggregate	Year-to-Date <b>V</b>	
Primary General Other (specify) ▼		1067.00	P/R Deduction (\$97.00 Bi-Weekly)
		7	1
Full Name (Last, First, Middle Initial) B. ANDREW C MACKENZIE			Date of Receipt
Mailing Address 1912 IRVING AVE S			M = M         /         D = D         /         Y = Y = Y         Y           05         31         2013         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1         1
City	State	Zip Code	Transaction ID : PR2564297130141
MINNEAPOLIS	MN	55403-2823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer	Occupation	1	
United HealthCare Services Inc	Bus Segme	ent CMO	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		1100.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. STEPHEN E SWANSON			Date of Receipt
Mailing Address 3001 HUNTINGTON COU	IRT		05 31 _2013 _
City	State	Zip Code	Transaction ID : PR2564297330141
КАТҮ	ТХ	77493-1159	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		78.00
Name of Employer	Occupation	1	-
United HealthCare Services Inc	KA VP Acc	t Mgmt	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		429.00	P/R Deduction (\$39.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional	)		472.00
TOTAL This Period (last page this line number			

Use separate schedule(s)

FOR LINE NUMBER:

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17	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck only	y on	ie)			
111			for each category of the Detailed Summary Page		(11a		11b	11c	12	
	y information copied from such Reports and S for commercial purposes, other than using the									
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)							
Α.	Full Name (Last, First, Middle Initial) HARVEY J BALTHASER				Date of	Re	ceipt			
	Mailing Address 11417 ARCHSTONE DR				м м 05	/	31	/ Y	2013	Y
	City AUSTIN	State TX	Zip Code 78739-1907					PR25642 eceipt th		
	FEC ID number of contributing federal political committee.	С					7		7	8.00
	Name of Employer United HealthCare Services Inc	Occupation Med Dir								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00		P/R Ded	uctio	on (\$39.	00 Bi-We	ekly)	
в.	Full Name (Last, First, Middle Initial) CHRISTOPHER CHARLES CARLS	SON			Date of	Re	ceipt			
	Mailing Address 12801 OVERLOOK ROAD	Ctata	Zin Code		м м 05	/	D D 31		2013	_
	City DAYTON	State MN	Zip Code 55327-9678	-			-	PR25648		
	FEC ID number of contributing federal political committee.	С			Amount	. 01		eceipt th		0.00
	Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P	/R Dedu	uctio	on (\$20.0	00 Bi-We	ekly)	
с.	Full Name (Last, First, Middle Initial) PAUL DANIEL HANSEN				Date of	Re	ceipt			
	Mailing Address 18430 62ND PLACE NORTH				м м 05	/	D D 31	/ Y	2013	Y
	City MAPLE GROVE	State MN	Zip Code 55311-4585					PR25648 eceipt th		
	FEC ID number of contributing federal political committee.	С					7	7	19	4.00
	Name of Employer United HealthCare Services Inc	Occupation Controller N								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1067.00		P/R Ded	uctio	on (\$97.	00 Bi-We	∍ekly)	
s	UBTOTAL of Receipts This Page (optional)			•					312	2.00
т	OTAL This Period (last page this line number	only)	b	•						

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	MIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or fo	r commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
	ull Name (Last, First, Middle Initial) ELIZABETH D MORAN			Date of Receipt
_	ailing Address 2231 BENT TREE LANE			05 31 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
Ci N	ty IENDOTA HEIGHTS	State MN	Zip Code 55120-2003	Transaction ID : PR2564803130141 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		
U	ame of Employer nited HealthCare Services Inc	Occupation Sr Deputy G	Gen Counsel	
R(	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)
	III Name (Last, First, Middle Initial)			Date of Receipt
М	ailing Address 22408 FITZGERALD DRIVE			05 31 2013
Ci	ity AYTONSVILLE	State MD	Zip Code 20882-2301	Transaction ID : PR2564803230141 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		78.00
	ame of Employer hited HealthCare Services Inc	Occupation SB VP of Ac		
R	eceipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)
	ull Name (Last, First, Middle Initial) PAUL O MARDEN			Date of Receipt
_	ailing Address 718 HICKORY HILL RD			05 31 / Y Y Y Y 05 31 2013
Ci F	ity RANKLIN LAKES	State NJ	Zip Code 07417-1707	Transaction ID : PR2564803330141 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		78.00
N	ame of Employer	Occupation		
-	nited HealthCare Services Inc eceipt For:	KA VP SIs A		_
н [	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)
SUI	BTOTAL of Receipts This Page (optional)			350.00

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		Detailed Summary Page		<b>X</b> 11a		11	lb	11c	1	2	
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An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any address of any political committ	person ee to s	for the olicit co	pur pntrib	rpos	se of sons fro	soliciting om such	i cont n com	ributio Imitte	ons e.
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	United for Health)									
A.	Full Name (Last, First, Middle Initial) WILLIAM T MCENERY				Date c	of Re	ecei	ipt				
	Mailing Address 2012 HUMBOLDT AVENUE S	SOUTH			M N 05	/		31	/ Y	y 201		Y
	City	State	Zip Code		Tran	sact	tion	ID : F	PR25648	30363	0141	
	MINNEAPOLIS	MN	55405-2507		Amour	nt of	Ea	ich Re	ceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С					7		7	_	100.0	00
	Name of Employer	Occupation	1									
	United HealthCare Services Inc	Bus Segme	ent CMO									
	Receipt For:	Aggregate	Year-to-Date <b>V</b>									
	Other (specify)		1000.00	]	P/R Deo	ducti	ion	(\$100.	.00 Bi-W	/eekly	r)	
В.	Full Name (Last, First, Middle Initial) TAMMY A O'HARE				Date c	of Re	ecei	ipt				
	Mailing Address 2420 SAINT GEORGE WAY				M N 05	/		31	/ Y	201		Y
	City	State	Zip Code		Trans	sacti	ion	ID : P	R25648	30393	0141	
	BROOKEVILLE	MD	20833-3265		Amour	nt of	Ea	ich Re	ceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С			[.		,		5	_	78.0	00
	Name of Employer United HealthCare Services Inc	Occupation SB VP SIs	1									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	]	P/R Dec	ductio	ion (	(\$39.0	0 Bi-We	ekly)		
с.	Full Name (Last, First, Middle Initial) DEBRA J BERNS				Date c	of Re	ecei	ipt				
	Mailing Address 2553 WASHBURN AVENUE	SOUTH			<sup>M</sup> 05	/		D D 31	/ Y	Y 201		Y
	City	State	Zip Code		Tran	sact	tion	n ID : F	PR2564	80403	0141	
	MINNEAPOLIS	MN	55416-4350		Amour	nt of	Ea	ich Re	ceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С					3		7	_	194.(	00
	Name of Employer	Occupation	1									
	United HealthCare Services Inc	Chief Com	pInc/Ethics Off									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General				P/R De	ducti	ion	(\$97.0	0 Bi-We	ekly)		
	Other (specify)	<u> </u>	1067.00									
s	UBTOTAL of Receipts This Page (optional)			•						:	372.0	0
	<b>OTAL</b> This Period (last page this line number			<u> </u>	Ē		1	-	- 7	-		-
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# SCHEDULE A (FEC Form 3X)

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		Use separate schedule(s)	(check on	ly on	e)			
ILLIVIIZED NEGEIF13		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	
Any information copied from such Reports and	Statements ma	ay not be sold or used by any p	erson for the		14 lose of s	15 soliciting	contribut	17 tions
or for commercial purposes, other than using t								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	United for Health)						
Full Name (Last, First, Middle Initial) KATHRYN S RUBIN			Date c	of Red	ceipt			
Mailing Address 310 SYCAMORE LANE			05	/	D D D 31	/ Y	2013	Y
City PLYMOUTH	State MN	Zip Code 55441-5615					30433014 is Period	1
FEC ID number of contributing federal political committee.	С				y		194	.00
Name of Employer United HealthCare Services Inc Receipt For:		Resp/Pres Found						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1067.00	P/R Dec	ductio	on (\$97.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) <b>B.</b> JARROD A FORBES			Date c	of Red	ceipt			
Mailing Address 2121 PARK FOREST DRIV			M N 05	1 /	D D D 31	/ Y	2013	Y
City CHESTERFIELD	State MO	Zip Code 63017-5029					0453014	1
FEC ID number of contributing federal political committee.	С						80.	.00
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	P/R Dec	ductio	n (\$40.0	0 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. WENDY D ARNONE			Date c	of Red	ceipt			
Mailing Address N62W13531 SUNBRUST D	RIVE		M N 05	/	31	/ Y	2013	Y
City MENOMONEE FALLS	State WI	Zip Code 53051-8335					90053014 is Period	1
FEC ID number of contributing federal political committee.	С				,		100	.00
Name of Employer	Occupation	1						
United HealthCare Services Inc Receipt For:	Hith Plan C		_					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 550.00	P/R Dec	ductio	on (\$50.0	)0 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optional).					7	7	374.	00

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b 14	11c 15	12	Г	17
	y information copied from such Reports and				for the		pose of	soliciting	g contrib		าร
or	for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	e name and a	iddress of any political committee	e to so	OLICIT COL	ntrip	outions ti	om sucr		Ittee	
$\rangle$	UnitedHealth Group Incorporat	ed PAC (I	United for Health)								
Α.	Full Name (Last, First, Middle Initial) KENDALL B MARSH				Date of	f Re	eceipt				
	Mailing Address N72 W24078 CRAVEN DR				м м 05	/	31	/ Y	2013	Y	1
	City	State	Zip Code		Trans	act	ion ID :	PR25689	3006301	41	_
	SUSSEX	WI	53089-1998		Amoun	t of	Each R	eceipt th	is Perio	d	
	FEC ID number of contributing federal political committee.	С					7	7	3	39.00	)
	Name of Employer	Occupation	1								
	United HealthCare Services Inc	SB Dir Acc	t Mgmt								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary     General       Other (specify) ▼		390.00	]   <sup>P</sup>	/R Ded	ucti	on (\$39.)	00 Bi-We	ekly)		
в.	Full Name (Last, First, Middle Initial) MATTHEW H STEARNS				Date of	f Re	eceipt				
	Mailing Address 5131 MASSACHUSETTS AV	/ENUE			м м 05	1	31	/ Y	2013	Y	1
	City	State	Zip Code		Trans	acti	ion ID : I	PR25717	779301	41	
	BETHESDA	MD	20816-2739	'	Amoun	t of	Each R	eceipt th	is Perio	d	
	FEC ID number of contributing federal political committee.	С					7	7	7	8.00	)
	Name of Employer United HealthCare Services Inc	Occupation Dir Comm	1								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P.	/R Ded	uctio	on (\$39.0	00 Bi-We	ekly)		
c.	Full Name (Last, First, Middle Initial) BRUCE E MOYER				Date of	f Re	eceipt				
	Mailing Address 18426 MAGENTA BAY				м м 05	/	D D 31	/ Y	2013	Y	1
	City	State MN	Zip Code				ion ID :				
	EDEN PRAIRIE	IVIIN	55347-1051		Amoun	t of	Each R	eceipt th	is Perio	d	
	FEC ID number of contributing federal political committee.	С					7	7	7	78.00	D
	Name of Employer	Occupation	l								
	United HealthCare Services Inc	VP Gen Mg	gmt								
	Receipt For:	Aggregate	Year-to-Date <b>V</b>								
	Primary General Other (specify) ▼		429.00	]   <sup>P</sup>	P/R Ded	lucti	on (\$39.	00 Bi-We	∍ekly)		
s	UBTOTAL of Receipts This Page (optional)						<b>y</b>	- 7	19	5.00	
Т	OTAL This Period (last page this line number	only)					,			-	

Use separate schedule(s)

FOR LINE NUMBER:

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			tor each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         11
or	for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
	Full Name (Last, First, Middle Initial) RICHARD A ELLIOTT			Date of Receipt
	Mailing Address 715 WOODSCAPE TRAIL	Otota	Zie Oode	M = M / D = D / Y = Y = Y = Y 05 31 2013
	City ALPHARETTA	State GA	Zip Code 30022-3246	Transaction ID : PR2572588830141
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 78.00
	Name of Employer United HealthCare Services Inc	Occupation Hith Plan C		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) JEFFREY P DEAN			Date of Receipt
	Mailing Address W5912 DEAN ROAD			05 31 2013
	City TOMAHAWK	State WI	Zip Code 54487-8314	Transaction ID : PR2572589430141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Finance		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	P/R Deduction (\$40.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) KEVIN JAMES CARLSON			Date of Receipt
	Mailing Address 4909 WEST SUNNYSLOPE R	OAD		05 31 2013
	City EDINA	State MN	Zip Code 55424-1170	Transaction ID : PR2572590030141
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	United HealthCare Services Inc	Chief of Sta	aff	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional)			236.00

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

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		-	Use separate schedule(s)	(cheo	ck only	y or	ne)			
	D RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	
Any informa	tion copied from such Reports an	d Statements m		erson fo	13 In the	nur	14	15 soliciting	16	tions
	percial purposes, other than using									
	F COMMITTEE (In Full)									
	Health Group Incorpora	ated PAC (I	United for Health)							
	e (Last, First, Middle Initial)									
					ate of			_		
Maining A	ddress 16652 1/2 GRAND AVE				м м 05	1	31	р / Ү	2013	Y
City		State	Zip Code		Trans	acti		PR2572	59113014	1
BELLFL	OWER	CA	90706-5038	A	mount	t of	Each F	Receipt th	nis Period	
	number of contributing olitical committee.	С					,		78	3.00
Name of	Employer	Occupation								
	ealthCare Services Inc	Assc Dir Cl	in Qlty							
Receipt F		Aggregate	Year-to-Date ▼							
	mary General ner (specify) <del></del>		429.00	P/F	R Ded	uctio	on (\$39	.00 Bi-We	eekly)	
			A) () () () () () () () () () () () () ()							
	e (Last, First, Middle Initial) AS P WIFFLER			D	ate of	Re	ceipt			
Mailing A	ddress 1421 SOMERFIELD DRIV	E		- F	M M	/	D I	) / Y	Y Y	Y
City		State	Zip Code	- 4	05	Ι.	31		2013	
BOLING	BROOK	IL	60490-3207				-	-	99273014 his Period	
	number of contributing olitical committee.	С					,	, 1000 pt 1	194	_
	Employer	Occupation	1							
	ealthCare Services Inc	Hith Plan C	-							
Receipt F	-or: mary General	Aggregate	Year-to-Date ▼	D/E		uotic	n (¢07		okly)	
	ner (specify)		1067.00		C Deul	ucii	(\$97	.00 Bi-We	eekiy)	
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	ddress 903 MCINDOE ST				M M		D	) / Y	Y Y	Y
0:1		Otata	Zin Oada	- L	05	Ι,	31		2013	
City WAUSA	U	State WI	Zip Code 54403-4976						51903014 nis Period	
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	olitical committee.	С		11			7		78	3.00
Name of	Employer	Occupation	I							
	ealthCare Services Inc	Dir Clnt Svo	c Acct Mgt							
Receipt F	For: mary	Aggregate	Year-to-Date ▼							
	ner (specify)		429.00	P/F	R Ded	ucti	on (\$39	.00 Bi-W	eekly)	
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	of Receipts This Page (optional)					-	7		350	.00

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11k	'⊢	11c	$\mid$	12	<u> </u>	
	y information copied from such Reports and for commercial purposes, other than using												
<u></u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora												
A.	Full Name (Last, First, Middle Initial) JOHN C SICKELS	HNCSICKELS											
	Mailing Address 1706 TALL OAKS				м м 05	/	D	31	/ Y		)13	Y	
	City	State	Zip Code		Trans	acti	ion	ID : F	R2573	5191	30141		
	WAUSAU	WI	54403-8118	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		78.00								00	
	Name of Employer	Occupation											
	United HealthCare Services Inc	TPA NA VP	SIs AM										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼	P	/R Ded	uctio	on (S	\$39.0	0 Bi-We	eekly	')				
	Full Name (Last, First, Middle Initial) JAMIE BURNETT				Date of	Re	ceip	ot					
	Mailing Address 4625 EWING AVENUE SO	UTH			м м 05	/		31	/ Y	20	й 13	Y	
	City	State	Zip Code		Trans	acti	on l	D : F	R2574	9882	30141		
	MINNEAPOLIS	MN	55410-1745	/	Amount	of	Eac	h Re	ceipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.				7		7		78.	00			
	Name of Employer United HealthCare Services Inc												
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$39.00 Bi-Weekly)											
с.	Full Name (Last, First, Middle Initial) LORI A VAN HOLMES				Date of	Re	ceip	ot					
	Mailing Address 4117 BRYANT AVENUE S				м м 05	/	D	31	/ Y	20	ү 13	Y	
	City MINNEAPOLIS	State MN	Zip Code 55409-1423						<b>R2575</b>			1	
	FEC ID number of contributing federal political committee.	С			Amount	. 01	Eac	ii Re	, seipt tr		eriod 194.	00	
	Name of Employer	Occupation											
	United HealthCare Services Inc	Dir Human	Capital Dev										
	Receipt For:		Year-to-Date ▼										
	Primary General	, , , , , , , , , , , , , , , , , , , ,	1067.00	-   Р	/R Ded	uctio	on (	\$97.0	0 Bi-W	eekly	′)		
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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and S or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
Full Name (Last, First, Middle Initial) A. CARY J MCCARTY			Date of Receipt								
Mailing Address 8800 RUMFIELD RD			05 31 2013								
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Transaction ID : PR2575059430141								
		70102-0131	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		78.00								
Name of Employer	Occupation										
United HealthCare Services Inc	VP Gen Mg	mt									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		429.00	P/R Deduction (\$39.00 Bi-Weekly)								
		/y / /	-								
Full Name (Last, First, Middle Initial) B. PHEBE M CHAMPION			Date of Receipt								
Mailing Address 5124 WEDMORE CT			05 31 2013								
City	State NV	Zip Code	Transaction ID : PR2575108330141								
NORTH LAS VEGAS	INV	89031-0364	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer Health Plan of Nevada	Occupation										
	Assc Dir Cu										
Receipt For: Primary General	Aggregate	Year-to-Date ▼									
Other (specify)		275.00	P/R Deduction (\$25.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. SCOTT G CASSANO			Date of Receipt								
Mailing Address 8113 BANDOLEER CT			05 31 2013								
City	State	Zip Code	Transaction ID : PR2575164430141								
LAS VEGAS	NV	89131-4561	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		200.00								
Name of Employer	Occupation										
Health Plan of Nevada	Dir Prov Sv	с									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		1100.00	P/R Deduction (\$100.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			328.00								
TOTAL This Period (last page this line number	only)	······									

# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

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ידו			Use separate schedule(s)				(check only one)							
111			for each category of the Detailed Summary Page		<b>〈</b> 11a		11b	11c	12					
An	y information copied from such Reports and	Statements ma		erson	13 for the	 puri	14 pose of	15 soliciting	16 g contribu	17 Itions				
	for commercial purposes, other than using th													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) MICHAEL PATRICK STAMM			Date of Receipt										
	Mailing Address 6721 MOSSY GLEN DR			05 31 2013										
	City FORT MYERS	State FL	Zip Code 33908-4771	Transaction ID : PR2575194630141 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С					,		80	0.00				
	Name of Employer United HealthCare Services Inc	Occupation VP Ops												
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$40.00 Bi-Weekly)												
в.	Full Name (Last, First, Middle Initial) HOWARD CHARLES GILPIN JR				Date of	Re	eceipt							
	Mailing Address 1210 SHEPARD DRIVE				м м 05	1	31	) / Y	2013	Y				
	BLUE BELL PA 19422-3481								22493014					
	FEC ID number of contributing	19422-9401		Amount	OT	Each F	receipt tr	nis Perioc						
	federal political committee.	C				-	7		78	8.00				
	Name of Employer United HealthCare Services Inc	Occupation Dir Act Cnsl												
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		429.00	P/R Deduction (\$39.00 Bi-Weekly)										
	Full Name (Last, First, Middle Initial) JOHN J ESSLINGER				Date of	Re	eceipt							
	Mailing Address 4944 W 151ST TERRACE				м м 05	/	31		2013	Y				
	City LEAWOOD	State KS	Zip Code 66224-9744				-		28893014 nis Perioc					
	FEC ID number of contributing federal political committee.	С					,	7	78	3.00				
	Name of Employer	Occupation												
	United HealthCare Services Inc	Sr Med Dir												
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$39.00 Bi-Weekly)												
s	UBTOTAL of Receipts This Page (optional)								236	.00				
т	OTAL This Period (last page this line number	only)		- •	<b>.</b>			, ,						

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

Use separate schedule(s)

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a	11b	11c	12	<u> </u>				
Any information copied from such Reports or for commercial purposes, other than usi											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (Un	ited for Health)									
Full Name (Last, First, Middle Initial) A. DAVID W WALSH			Date of	Receipt							
Mailing Address 2158 CARROLL AVENU	JE		M M / D D / Y Y Y Y Y 05 31 2013								
City SAINT PAUL	State MN	Zip Code 55104-5042		action ID : P of Each Red		1273014	1				
FEC ID number of contributing federal political committee.	C			7	9	100.	.00				
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Regl Affs Aggregate Yea	ar-to-Date ▼	_								
Primary General Other (specify) ▼	· · · ·	550.00	P/R Deduction (\$50.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) B. JEFFREY A GOLDBERG			Date of	Receipt							
Mailing Address 3410 BRADLEY LANE	01-1-	7. 0. 1.	05	/ D D 31	/ Y	2013	Y				
City CHEVY CHASE	State MD	Zip Code 20815-3262		of Each Red			1				
FEC ID number of contributing federal political committee.	С			7	7	78.	.00				
Name of Employer United HealthCare Services Inc	Occupation Strat Clnt Rel E	x Optuml									
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. MICHAEL J TELESKY			Date of	Receipt							
Mailing Address 2602 PENNINGTON PL	ACE		05	/ D D 31	/ Y	2013	Y				
City VALPARAISO	State IN	Zip Code 46383-9163		action ID : P of Each Red			1				
FEC ID number of contributing federal political committee.	С			3	7	78	.00				
Name of Employer United HealthCare Services Inc	Occupation Spc Ben KA SE	3 RVP SIs									
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)								
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# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

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			for each category of the Detailed Summary Page		< 11a 13		11b 14	11c	12	Г	17		
Ar or	y information copied from such Reports and s for commercial purposes, other than using th	Statements ma e name and a	L ay not be sold or used by any p ddress of any political committed	erson e to so	for the	purp ntrib	oose of	15 soliciting rom such	g contri	ibutic	17 ns e.		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)										
A.	Full Name (Last, First, Middle Initial) JERI L LOSE				Date of	Re	ceipt						
	Mailing Address 9995 DELL ROAD				м м 05	/	31	/ Y	2013		1		
	City EDEN PRAIRIE	State MN	Zip Code 55347-3524		Transaction ID : PR2575419830141           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					7		2	200.0	0		
	Name of Employer United HealthCare Services Inc Receipt For:	sh Veer te Dete 🗮											
	Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$100.00 Bi-Weekly)										
в.	Full Name (Last, First, Middle Initial) PAUL B HEBERT				Date of	Re	ceipt						
	Mailing Address 54 GREENWOOD DRIVE				м м 05	1	31	/ Y	y 2013				
	City SOUTH WINDSOR	State CT	Zip Code 06074-2957				-	PR25755 eceipt th			_		
	FEC ID number of contributing federal political committee.	С					,			250.0	0		
	Name of Employer United HealthCare Services Inc	Occupation CEO Spclty											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1375.00	] F	P/R Deduction (\$125.00 Bi-Weekly)								
c.	Full Name (Last, First, Middle Initial)	L			Date of	Re	ceipt						
	Mailing Address 1004 PHILLIPS STREET				м м 05	/	31	/ Y	y 2013				
	City VISTA	State CA	Zip Code 92083-7171					PR2575 eceipt th					
	FEC ID number of contributing federal political committee.	C					7			78.0	0		
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Dir Bus Pro Aggregate	P/R Deduction (\$39.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, .		5	28.00	)		
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Use separate schedule(s)

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PAGE 90 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED KEVEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information conied from such Densite	and Statements		13 14 15 16 1						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
ight angle UnitedHealth Group Incorp	orated PAC (	United for Health)							
Full Name (Last, First, Middle Initial)									
A. TERRENCE M CLARK			Date of Receipt						
Mailing Address 8 COOPER AVENUE			05 31 _ 2013 _						
City	State	Zip Code	Transaction ID : PR2575636930141						
EDINA	MN	55436-1315	Amount of Each Receipt this Period						
FEC ID number of contributing	С		194.00						
federal political committee.	U								
Name of Employer	Occupatior								
United HealthCare Services Inc Receipt For:	Bus Segme								
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$97.00 Bi-Weekly)						
Other (specify)		1067.00							
Full Name (Last, First, Middle Initial) <b>NANCY J SUBLETTE</b>			Date of Receipt						
Mailing Address 445 CLARA			M = M / D = D / Y = Y = Y						
#24 City	State	Zip Code	05 31 2013						
SAINT LOUIS	MO	63112-4507	Transaction ID : PR2575646930141 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer	Occupation	1							
United HealthCare Services Inc	PS Dir Stra	t Accts							
Receipt For:	Aggregate	Year-to-Date <b>V</b>							
Other (specify)		550.00	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) C. RONALD MICHAEL GONG			Date of Receipt						
Mailing Address 2240 SOUTH MOON	IEW DRIVE								
			05 31 2013						
City HACIENDA HEIGHTS	State CA	Zip Code 91745-5739	Transaction ID : PR2575651530141						
		31743 3733	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		78.00						
Name of Employer	Occupatior	1	-						
United HealthCare Services Inc	M R SIs Di	r							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		429.00	P/R Deduction (\$39.00 Bi-Weekly)						
·			*						
SUBTOTAL of Receipts This Page (optio	nal)		372.00						
	,								
TOTAL This Period (last page this line n	umber only)								

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

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
ILEWIZED KECEPIS		for each category of the Detailed Summary Page	🗙 11a 🗌 11b	11c	12							
			13 14	15	16	17						
Any information copied from such Reports or for commercial purposes, other than us												
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorp	orated PAC (I	Jnited for Health)										
Full Name (Last, First, Middle Initial)												
A. CARLEALLEN			Date of Receipt									
Mailing Address 8675 AZURE SKY DRI	VE		05 3 <sup>4</sup>		2013	Y						
City	State	Zip Code	Transaction ID	: PR25756	69330141							
LAS VEGAS	NV	89129-2227	Amount of Each	Receipt thi	is Period							
FEC ID number of contributing federal political committee.	С		78.00									
Name of Employer	Occupation	1	_									
Southwest Medical Assoc. Inc.	Phys Dir											
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General		400.00	P/R Deduction (\$3	9.00 Bi-We	ekly)							
Other (specify)		429.00										
Full Name (Last, First, Middle Initial) B. STEVEN CHARLES FELTON			Data of Dessint									
Mailing Address 6837 29TH AVE NE			Date of Receipt	D ( )		1						
Maining Address 6837 29TH AVE NE			05 3 <sup>°</sup>		2013	Ŷ						
City	State	Zip Code	Transaction ID									
SEATTLE	WA	98115-7236	Amount of Each	Receipt thi	is Period							
FEC ID number of contributing federal political committee.	С				40.0	00						
Name of Employer	Occupation	1	_									
Optum Clinical Services INC	Mgr Nurse	Pract										
Receipt For:	Aggregate	Year-to-Date ▼	-									
Primary General			P/R Deduction (\$20	0.00 Bi-We	ekly)							
Other (specify)		, 220.00										
Full Name (Last, First, Middle Initial) C. CARLOS E ADAME			Date of Receipt									
Mailing Address 42584 WHISTLE COUI	RT		05 3		2013	Y						
City	State	Zip Code	Transaction ID									
TEMECULA	CA	92592-7105	Amount of Each	Receipt thi	is Period							
FEC ID number of contributing federal political committee.	C			7	78.	00						
Name of Employer	Occupation	1	_									
United HealthCare Services Inc		pital Partner Mgr										
Receipt For:		Year-to-Date ▼	-									
Primary General	33 - 3 - 4		P/R Deduction (\$3	9.00 Bi-We	ekly)							
Other (specify)		429.00										
SUBTOTAL of Receipts This Page (option	,				196.0	00						
TOTAL This Period (last page this line nu	mber only)					_						

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

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check o	(check only one)								
II EIVIIZED NEGEIPIS		for each category of the Detailed Summary Page	X 11a		11b	11c 15	12	17				
Any information copied from such Reports or for commercial purposes, other than us			erson for th		pose of	soliciting	contribu	tions				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	Jnited for Health)										
Full Name (Last, First, Middle Initial) A. DARREL A FARKUS			Date	of Re	eceipt							
Mailing Address 15 WHITE OAK DRIVI	E		05		31	/ Y	ү ү 2013	Y				
City ASBURY	State NJ	Zip Code 08802-1155	Transaction ID : PR2575797530141 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С				7		78	3.00				
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Dir Bus Dvl Aggregate		 	educti	ion (\$39.	00 Bi-We	ekly)					
Other (specify)		429.00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) <b>B.</b> LAURIE ERIN RUSSELL	LAURIE ERIN RUSSELL											
Mailing Address 3108 SONIA DRIVE	Ctoto	Zin Code	05	5	31		2013					
City LAS VEGAS	State NV	Zip Code 89107-3246			-	PR25758 eceipt th						
FEC ID number of contributing federal political committee.	С							.00				
Name of Employer United HealthCare Services Inc	Occupation Govt Rel Di											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) C. EDWARD JOHN SKOPAS			Date	of Re	eceipt							
Mailing Address 43 JOEL DR			05		31	/ Y	у у 2013	Y				
City HEBRON	State CT	Zip Code 06248-1245				PR25758 eceipt th						
FEC ID number of contributing federal political committee.	C							3.00				
Name of Employer	Occupation	1										
United HealthCare Services Inc	VP Info Teo	ch										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R D	educt	ion (\$39.	00 Bi-We	ekly)					
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line n	,				л. 	· · ·	234	.00				

Use separate schedule(s)

FOR LINE NUMBER:

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			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         11										
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) PATRICK J LANGAN			Date of Receipt										
	Mailing Address 405 MEADOW LANE	01.1	7.0.1	05 / Y Y Y Y Y 05 31 2013										
	City BENSON	State MN	Zip Code 56215-1033	Transaction ID : PR2575885030141										
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
	Name of Employer United HealthCare Services Inc	Occupation VP IT		_										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)										
в.	Full Name (Last, First, Middle Initial) MICHAEL W MEDEIROS			Date of Receipt										
	Mailing Address 7112 LANGMUIR DRIVE	_		05 31 / Y Y Y Y Y										
	City MCKINNEY	State TX	Zip Code 75071-4606	Transaction ID : PR2575930630141           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		78.00										
	Name of Employer United HealthCare Services Inc													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)										
с.	Full Name (Last, First, Middle Initial) MARC T SALINAS			Date of Receipt										
	Mailing Address 1630 ROCK RIDGE DRIVE			05 31 2013										
	City PROSPER	State TX	Zip Code 75078-9728	Transaction ID : PR2575967930141 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		78.00										
	Name of Employer	Name of Employer Occupation												
	United HealthCare Services Inc	VP Gen Mg	ımt											
	Receipt For: Primary General Other (specify) <del>V</del>	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			350.00										

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
or for commercial purposes, other than using	d Statements may not be sold or used by any p the name and address of any political committe	person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (United for Health)						
Full Name (Last, First, Middle Initial) A. JUDITH GAGER PERLMAN		Date of Receipt					
Mailing Address 116 CANTERBURY LANE PO BOX 2108 City	State Zip Code	M - M / D - D / Y - Y - Y - Y 05 31 2013					
VINEYARD HAVEN	MA 02568-5659	Transaction ID : PR2575968930141 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	78.00					
Name of Employer United HealthCare Services Inc	Occupation VP Gen Mgmt	_					
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) B. MARK LEENAY		Date of Receipt					
Mailing Address 8157 GARLAND LANE NC	DRTH	05 31 2013					
City MAPLE GROVE	StateZip CodeMN55311-1774	Transaction ID : PR2575982830141 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	78.00					
Name of Employer United HealthCare Services Inc	Occupation NA Med Dir/CMO						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)					
Full Name (Last, First, Middle Initial) C. MARC R BRIGGS		Date of Receipt					
Mailing Address 1608 RED TREE CT		05 / Y Y Y Y 2013					
City DRAPER	StateZip CodeUT84020-7704	Transaction ID : PR2576001630141 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	80.00					
Name of Employer	Occupation						
United HealthCare Services Inc	Regn Exec						
Receipt For:	Aggregate Year-to-Date ▼						
Other (specify)	440.00	P/R Deduction (\$40.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	)	236.00					
TOTAL This Period (last page this line numl	ber only)						

#### SCHEDULE A (FEC Form 3X) DEACH

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		Use separate schedule(s)	(check only one)						
II LIVIIZED NEVEIFIJ		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 (I	Jnited for Health)							
Full Name (Last, First, Middle Initial) <b>A.</b> <u>RESTOR JOHNSON</u>			Date of Receipt						
Mailing Address 2700 CRESCENT RIDGE RC	DAD		M M / D D / Y Y Y Y Y 05 31 _ 2013 _						
City	State	Zip Code	05 31 2013 Transaction ID : PR2576051630141						
MINNETONKA	MN	55305-2806	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		194.00						
Name of Employer	Occupation	1							
United HealthCare Services Inc	VP Entrprs	Real Estate Svs							
Receipt For: Primary General	Aggregate	Year-to-Date ▼							
Other (specify)		1067.00	P/R Deduction (\$97.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) B. JOHN F REX			Date of Receipt						
Mailing Address 503 HARRINGTON ROAD			05 31 2013						
City WAYZATA	State MN	Zip Code 55391-1512	Transaction ID : PR2576060030141						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 386.00						
Name of Employer									
United HealthCare Services Inc	Mkt Group								
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		, 2123.00	P/R Deduction (\$193.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) C. CHANDRA LUE TORGERSON			Date of Receipt						
Mailing Address 5433 10TH AVENUE SOUTH	ł		05 31 Y Y Y Y Y 05 31 2013						
City MINNEAPOLIS	State MN	Zip Code 55417-2413	Transaction ID : PR2576128630141 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer	Occupation	1							
United HealthCare Services Inc	VP Med Cli	in Ops							
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		429.00	P/R Deduction (\$39.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			658.00						
TOTAL This Period (last page this line number	only)								

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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		Detailed Summary Page		11a	$\mid \mid$	11b	11c	12	47
Any information copied from such Reports and									
or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (	United for Health)			_				
Full Name (Last, First, Middle Initial) <b>A.</b> TERRI M JACQUE				Date of	Red	ceipt	-	_	
Mailing Address 10508 MORNING DROP A	VE			м м 05	/	D D D 31	/ Y	ү ү 2013	Y
City	State	Zip Code		Trans	actio	on ID : I	PR25761	3243014	1
LAS VEGAS	NV	89129-3223	A	Mount	of I	Each Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С					,	7	78	.00
Name of Employer	Occupation	1							
Health Plan of Nevada	Assc Dir Pr	eservice Review							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/	'R Dedu	uctio	on (\$39.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) B. JOHN E FRIDNER				Date of	Red	ceipt			
Mailing Address 782 PENFIELD DR				M M 05	/	D D D 31	/ Y	y y 2013	Y
City	State	Zip Code		Transa	actio	on ID : F	PR25761	4753014	1
CAROL STREAM	IL	60188-4738	A	mount	of I	Each Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С					,	3	78	.00
Name of Employer United HealthCare Services Inc									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) C. DANIEL J KENIRY				Date of	Red	ceipt			
Mailing Address 5553 LITTLE FALLS ROAI				м м 05	/	D D 31	/ Y	y y 2013	Y
	State VA	Zip Code						7933014	1
ARLINGTON	VA	22207-1525	A	Mount	of I	Each Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С					,	7	194	.00
Name of Employer	Occupation	1							
United HealthCare Services Inc	VP Gov't R	el							
Receipt For:	Aggregate	Year-to-Date ▼	_			(****			
Other (specify)		1067.00	0 P/R Deduction (\$97.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)						,		350.	00
TOTAL This Period (last page this line numb	er only)					,		37570.	32

SC	HEDULE B (FEC Form 3X)			F	OR	LINE N	NUMBEF	1:			PA	GE	97 (	OF 105				
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(c	hec	k only 21b	22	×	23		24		25	26 20b				
	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 (Ur	nited for Hea	lth)														
Α.	Full Name (Last, First, Middle Initial) Mike McIntyre For Congress						Date of	of Di	sburse	eme	ent							
	Mailing Address PO Box 1						05	/	D	D 06			)13	Y				
	City S Lumberton	State NC	Zip Code 28359			Transaction ID : 36043842												
	Purpose of Disbursement Contribution			C	)11		Amoui	nt of	Each	Di	sburse	ment	this	Period				
	Candidate Name			Cat									1000	0.00				
	Rep. Mike McIntyre         Office Sought:       House         Senate       President         State:       NC         District:       07	ment For: Primary Other (spe	General		ype		Contrib	outior	n									
в.	Full Name (Last, First, Middle Initial) Guthrie For Congress						Date o	_	_	eme	ent	YY	Y	Y				
	Mailing Address PO Box 9639						05		(	06	I L	20	013					
	Bowling Green	State KY	Zip Code 42102-9639				Transaction ID : 36045287											
	Purpose of Disbursement Contribution Candidate Name	pution				n/	Amount of Each Disbursement this Period											
	Rep. S. Brett Guthrie			Cate T	ype				7	_	,		2000	0.00				
		nent For: Primary Other (spe	General				Contril	outio	n									
C.	Full Name (Last, First, Middle Initial)						Date of	_		eme	ent							
	Mailing Address 919 Congress Ave, Suite 1400					05	/		D 6	/		)13 )	Y					
	CityStateZip CodeAustinTX78701								ion ID	D:3	360796	42						
	Purpose of Disbursement Contribution 011								Each	Di	sburse	ment	this	Period				
	Candidate Name Category/ Alamo PAC Type								,		- 7		5000	0.00				
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan					perso	on for	the		oose		solicitii		ntribu	tions				
$\backslash$	NAME OF COMMITTEE (In Full)																		
	UnitedHealth Group Incorporated F	PAC (U	nited for Hea	lth)															
_	Full Name (Last, First, Middle Initial)						D												
А.	Alexander For Senate 2014 Inc								Dis	sburse		_							
	Mailing Address 228 S. Washington Street, Suite 11						05 / 16 / 2013												
	City	State	Zip Code				Transaction ID : 36079643												
	Alexandria	VA	22314																
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	Sen. Lamar Alexander			Ţ	ype			-	-	7	-		-	2000					
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В.	Full Name (Last, First, Middle Initial) Heidi For Senate						Dat	te of	f Dis	sburse	em	nent							
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	Mailing Address PO Box 1577							05		L	17		2	013					
	Bismarck	State ND	Zip Code 58502-1577				т	rans	acti	ion IE	):	36085 <sup>-</sup>	01						
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_	Full Name (Last, First, Middle Initial)																		
C.	Mark Pryor For US Senate						Da	te of	f Dis	sburse	em	nent							
	Mailing Address PO Box 2720							05	/	D 1	17			013 <sup>°</sup>	Y				
	-	State	Zip Code				Т	rans	acti	ion IC	):	360851	02						
	Little Rock AR 72203 Purpose of Disbursement Contribution																		
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Т	OTAL This Period (last page this line number only)					•				,	2	. ,							

ITEMIZED DISBURSEMENTS       Use separate schedule(s) for each category of the category of the parate schedule(s) or to commercial purposes, other than using the name and address of any political committee to solicit contributions from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or tor commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.         NAME OF COMMITTEE (in Full)       NAME OF COMMITTEE (in Full)         VintedHealth Group Incorporated PAC (United for Health)         Full Name (Last, First, Middle Initial)         A.         Mailing Address PO Box 2720         City       State         Vinter Report         Office Sought:         House         Office Sought:         House         City         State         Vinter Report Source         Office Sought:         House         Office Sought:         House         City         State         Sen. Michael Bennet         City         Sen. Michael Bennet         City       Senate         Primary       General         Other (specify)       Contribution         Office Sought:       House       Disbursement For: 2016
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.         NAME OF COMMITTEE (in Full)         UnitedHealth Group Incorporated PAC (United for Health)         Full Name (Last, First, Middle Initial)         A.         Mailing Address PO Box 2720         Oity         State       Zip Code         Hitte Rock       AR         Purpose of Disbursement         Contribution       O11         Gree Sought:       House         President       Disbursement For: 2014         President       Date of Disbursement         Office Sought:       House         Purpose of Disbursement       Disbursement For: 2014         Contribution       Date of Disbursement         Office Sought:       House         President       Disbursement For: 2014         Contribution       Date of Disbursement         Mailing Address PO Box 3078       Contribution         City       State       Zip Code         Deriver       Co       80201         Purpose of Disbursement       O11         Cardidate Name       Cole gopr/         Sen. Michael Bennet       Disbursement For: 2016
UnitedHealth Group Incorporated PAC (United for Health)         Full Name (Last, First, Middle Initia)         A. Mark Pryor For US Senate         Mailing Address PO Box 2720         City         City         Cardidate Name         Sen. Mark L. Pryor         Office Sought:         House         Distorter         President         Other (specify)         Full Name (Last, First, Middle Initial)         B. Bennet For Colorado         Mailing Address PO Box 3078         City         City         State:       AR         Purpose of Disbursement contribution         Other (specify)         State:       AR         District:         Full Name (Last, First, Middle Initial)         B. Bennet For Colorado         Mailing Address PO Box 3078         City       State         Contribution         Candidate Name         Senset       Disbursement For: 2016         Denver       Code         Contribution       011         Cadidate Name       2000.00         Senset       Disbursement For: 2016         Contribution       011
Full Name (Last, First, Middle Initial)         A. Mark Pryor For US Senate         Mailing Address PO Box 2720         City       State       Zip Code         Purpose of Disbursement       011         Contribution       011         Category/       Transaction ID : 36085103         Amount of Each Disbursement this Period         Contribution       011         Category/       1500.00         Office Sought:       House         President       Disbursement For: 2014         Other (specify)       Contribution         State: AR       District:         Full Name (Last, First, Middle Initial)       Date of Disbursement         B. Bennet For Colorado       Date of Disbursement         Mailing Address PO Box 3078       City         City       State       Zip Code         Purpose of Disbursement       Co         Contribution       011         Category/       Transaction ID : 36085104         Mount of Each Disbursement this Period       2000.00         Contribution       011         Category/       Transaction ID : 36085104         Mount of Each Disbursement this Period       2000.00         Contrinbution       Disbursement For: 2016
A. Mark Pryor For US Senate       Date of Disbursement         Mailing Address PO Box 2720       05 ' 17 ' 2013         City       State       Zip Code         Little Rock       AR       72203         Purpose of Disbursement       011         Contribution       011         Candidate Name       011         Sen. Mark L. Pryor       Disbursement For: 2014         Office Sought:       House         President       Disbursement For: 2014         State:       AR         B. Bennet For Colorado       Contribution         Mailing Address PO Box 3078       Date of Disbursement         City       State       Zip Code         Purpose of Disbursement       Constribution         Mailing Address PO Box 3078       Onter (Specify)          City       State       Zip Code         Purpose of Disbursement       Constribution         Candidate Name       Cole       80201         Purpose of Disbursement       Onter (specify)        Transaction ID : 36085104         Amount of Each Disbursement this Period       2000.00         Candidate Name       Senate       Primary         General       Other (specify)        Contribution
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Mailing Address PO Box 2720       05       17       2013         City       State       Zip Code       Transaction ID : 36085103         Purpose of Disbursement       O11       AR       72203         Purpose of Disbursement       O11       Category/       Transaction ID : 36085103         Amount of Each Disbursement this Period       Interpretation       Interpretation       Interpretation         Category/       Senate       President       Disbursement For: 2014       Category/       Contribution         State:       AR       Disbursement For: 2014       Other (specify) ▼       Contribution       Contribution         State:       AR       Disbursement Contribution       Other (specify) ▼       Date of Disbursement       Contribution         Mailing Address       PO Box 3078       Interpretation       Interpretation       Interpretation         City       State       Zip Code       Boennet       Transaction ID : 36085104         Purpose of Disbursement       Contribution       Interpretation       Interpretation       Interpretation         City       State       Zip Code       Boennet       Interpretation       Interpretation       Interpretation         City       State       Disbursement For: 2016       Interpretation </td
Little Rock       AR       72203       Transaction ID : 36085103         Purpose of Disbursement Contribution       011       Amount of Each Disbursement this Period         Category/ Sen. Mark L. Pryor       Disbursement For: 2014 President       011       Category/ Type         Office Sought:       House President       Disbursement For: 2014 Other (specify) ▼       Contribution         Full Name (Last, First, Middle Initial)       B.       Bennet For Colorado       Date of Disbursement 05       Date of Disbursement         Mailing Address PO Box 3078       City       State       Zip Code 80201       Transaction ID : 36085104         City       State       Zip Code 80201       Amount of Each Disbursement this Period         Category/ Typose of Disbursement Contribution       011       Category/ 17       2013         City       State       Zip Code 80201       Transaction ID : 36085104         Purpose of Disbursement Contribution       011       Category/ Type       Amount of Each Disbursement this Period         Category/ Sen. Michael Bennet       Disbursement For: 2016       Contribution       Contribution         State:       CO       Disbursement For: 2016       Contribution       Contribution
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Sen. Mark L. Pryor       Category/ Type         Office Sought:       House         Senate       Primary         President       Other (specify)         State:       AR         District:       Other (specify)         Full Name (Last, First, Middle Initial)         B. Bennet For Colorado         Mailing Address       PO Box 3078         City       State         Purpose of Disbursement         Contribution         Office Sought:       House         Disbursement For:       2016         Category/ Type       Contribution         Category/ Sen. Michael Bennet       Disbursement For:         Office Sought:       House       Disbursement For:         State:       CO       Disbursement For:         State:       CO       Disbursement For:         Other (specify)       Contribution
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State: AR     President     Other (specify)     Full Name (Last, First, Middle Initial)   Bennet For Colorado   Mailing Address     PO Box 3078     City   Denver   Code   Denver <tr< td=""></tr<>
State:       AR       District:         Full Name (Last, First, Middle Initial)       Date of Disbursement         B. Bennet For Colorado       Date of Disbursement         Mailing Address       PO Box 3078         City       State       Zip Code         Denver       CO       80201         Purpose of Disbursement       O11         Candidate Name       Category/         Sen. Michael Bennet       Disbursement For: 2016         Office Sought:       House         President       Other (specify)         State:       CO
Full Name (Last, First, Middle Initial)       Date of Disbursement         B. Bennet For Colorado       Date of Disbursement         Mailing Address PO Box 3078       05       17         City       State       Zip Code         Denver       CO       80201         Purpose of Disbursement       011       Amount of Each Disbursement this Period         Candidate Name       Category/ Sen. Michael Bennet       2000.00         Office Sought:       House       Disbursement For: 2016       Contribution         Office Sought:       House       Disbursement For: 2016       Contribution         State:       CO       Disbursement For: 2016       Contribution
Mailing Address       PO Box 3078         City       State       Zip Code         Denver       CO       80201         Purpose of Disbursement       011         Candidate Name       011         Office Sought:       House         Primary       General         Other (specify)       Contribution
Mailing Address       PO Box 3078       05       17       2013         City       State       Zip Code       Transaction ID : 36085104         Denver       CO       80201       011         Purpose of Disbursement       011       Category/       Amount of Each Disbursement this Period         Candidate Name       Category/       Type       2000.00         Sen. Michael Bennet       Disbursement For: 2016       2000.00         Office Sought:       House       Disbursement For: 2016       Contribution         State:       CO       District:       General       Contribution
Denver       CO       80201         Purpose of Disbursement Contribution       011       Amount of Each Disbursement this Period         Candidate Name       Category/ Type       2000.00         Candidate Name       Disbursement For: 2016       2000.00         Office Sought:       House       Disbursement For: 2016       Contribution         Senate       Primary       General       Contribution         State:       CO       District:       Contribution
Denver       CO       80201         Purpose of Disbursement Contribution       011       011         Candidate Name       011       Category/ Type       Amount of Each Disbursement this Period         Candidate Name       Disbursement For: 2016       2000.00         Office Sought:       House       Disbursement For: 2016       Contribution         Senate       Primary       General       Contribution         State:       CO       District:       Other (specify)       Contribution
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Sen. Michael Bennet     Category/ Type       Office Sought:     House       Senate     Disbursement For: 2016       Senate     President       Other (specify)     Contribution
Sen. Michael Bennet     Type       Office Sought:     House       Senate     Disbursement For: 2016       President     Other (specify)       State:     CO
Senate     Primary     General     Contribution       President     Other (specify)     Image: Contribution
State:     CO     District:
Full Name (Last, First, Middle Initial)
C. Blue Dog Political Action Committee
Mailing Address     6849 Old Dominion Drive, Suite 222     05     17     2013
City State Zip Code Transaction ID : 36085105
McLean VA 22101 Purpose of Disbursement
Contribution 011 Amount of Each Disbursement this Period
Candidate Name Category/ Source Sourc
Blue Dog Political Action Committee     Type       Office Sought:     House       Disbursement For:
Senate Primary General Contribution
President Other (specify)
State: District:
SUBTOTAL of Disbursements This Page (optional)
TOTAL This Period (last page this line number only)

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	y information copied from such Reports and Stater for commercial purposes, other than using the nan															
$  \rangle$	NAME OF COMMITTEE (In Full)			1463												
	UnitedHealth Group Incorporated F	PAC (Ur	lited for Hea	utn)												
Α.	Full Name (Last, First, Middle Initial) Collins For Senator						Date of	_	burse		(Y	Y	Ŷ			
	Mailing Address PO Box 1096						05		2	9	201	13				
	City Sangor	State ME	Zip Code 04402				Trans	sacti	on ID	: 361106	15					
	Purpose of Disbursement		04402	_	_	_										
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В.	Collins For Senator						Date of	f Dis	burse	ment						
	Mailing Address PO Box 1096						м м 05	/	2	9 / 1	20	13	Y			
	Bangor	State ME	Zip Code 04402				Transaction ID : 36110616									
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	Candidate Name			Cat	egory	y/						1000	00			
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C.	Full Name (Last, First, Middle Initial) Ryan For Congress						Date of	_								
	Mailing Address PO Box 1488						05	/	D 3		201		Y			
	City Sanesville	State WI	Zip Code 53547-1488				Trans	sacti	on ID	: 361116	73					
	Purpose of Disbursement Contribution				)11											
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	Rep. Paul D. Ryan Type								,			5000.	00			
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$\setminus$	NAME OF COMMITTEE (In Full)																	
	UnitedHealth Group Incorporated F	PAC (Ur	nited for Hea	alth)														
~	Full Name (Last, First, Middle Initial)						Data	( D:-	h									
А.	Price For Congress						Date of	r Dis	burse		/ Y	V						
	Mailing Address PO Box 425				05 31 2013													
	5	State	Zip Code				Trans	acti	on ID	: 361116	74							
	Roswell Purpose of Disbursement	GA	30077															
	Contribution			C	011		Amount	t of	Each	Disburse	ment t	this Pe	eriod					
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	Rep. Thomas Edmunds Price M.D. Office Sought: Y House Disburser		2014	T	ype				,			2000.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
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_	State: GA District: 06																	
в.	Full Name (Last, First, Middle Initial) Next Century Fund						Date of	f Dis	burse	ment								
							M M	/	D		( Y	Y Y	-					
	Mailing Address 116 S Royal Street						05		3	1	201	13						
	Alexandria	State VA	Zip Code 22314				Trans	acti	on ID	: 361116	75							
	Purpose of Disbursement Contribution			C	011		Amount of Each Disbursement this Period											
	Candidate Name				egory	y/						3000.0	00					
	Next Century Fund           Office Sought:         House         Disburser	ment For:		1	уре				,	7								
	Senate President	Primary Other (spe	General cify) ▼				Contrib	ution	I									
	State: District:																	
c.	Full Name (Last, First, Middle Initial) Walberg For Congress						Date of	f Dis	burse	ment								
							M M	/	D	D / 1	/ Y	Y Y						
	Mailing Address PO Box 1362						05		3	1	201	13						
	City S Jackson	State MI	Zip Code 49204-1362				Trans	acti	on ID	: 361116	76							
	Purpose of Disbursement Contribution																	
	Candidate Name				)11		Amount	t of	Each	Disburse	ment t	this Pe	eriod					
	Rep. Timothy L. Walberg		egory ype	y/	2500.00													
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General				Contribu	ution	,									
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Т	OTAL This Period (last page this line number only)	)							, ,									

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 102 OF 105										
TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	) (check only											
	Detailed Summary Page	27	28a         28b         28c         29         30b										
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ments may not be sold or u me and address of any polit	sed by any perso ical committee to	on for the purpose of soliciting contributions solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	DAC (United for Us	olth)											
UnitedHealth Group Incorporated	PAC (United for He	aiin)											
Full Name (Last, First, Middle Initial)			Date of Disbursement										
			M M / D D / Y Y Y Y										
Mailing Address 25 E Main Street, Suite 200			05 31 2013										
City Richmond	State Zip Code VA 23219-2109		Transaction ID : 36111677										
Purpose of Disbursement	20210 2100												
Contribution Candidate Name		011	Amount of Each Disbursement this Period										
Every Republican Is Crucial (ERIC	PAC)	Category/ Type	5000.00										
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Senate President	Primary General Other (specify)		Contribution										
State: District:	Other (specify)												
Full Name (Last, First, Middle Initial)													
<sup>3.</sup> Issa for Congress			Date of Disbursement										
Mailing Address PO Box 760			05 31 / Y Y Y Y Y 05 31 2013										
City	State Zip Code		Transaction ID - 26111679										
Vista	CA 92085-0760		Transaction ID : 36111678										
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period										
Candidate Name		Category/											
Rep. Darrell E. Issa		Туре	2500.00										
	ment For: 2014 Primary General		Contribution										
President	Other (specify) ▼												
State: CA District: 49													
Full Name (Last, First, Middle Initial)	ral Account		Date of Disbursement										
			M M / D D / Y Y Y Y										
Mailing Address 520 Seymour Street			05 31 2013										
5	State Zip Code		Transaction ID: 36111679										
Lansing Purpose of Disbursement	MI 48933												
Contribution	Contribution 011												
Candidate Name Michigan Popublican Party Fodo	Category/	5000.00											
Michigan Republican Party - Fede	ment For:	Туре											
Office Sought: House Disburse													
Office Sought: House Disburse Senate	Primary General		Contribution										
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			Summary Page		$\mid \mid$	21b 27	22 28a	×	23 28b	24 28c		25 2 29 3						
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NAME OF COMMITTEE (In Fu	,																	
UnitedHealth Group	•	PAC (Ur	nited for Hea	alth)														
Full Name (Last, First, Middle A. Friends Of Todd You	,						Date of Disbursement											
Mailing Address PO Box 1053																		
City		State	Zip Code				Transaction ID : 36111680											
Bloomington		IN	47402				Trans	acti	on ID	: 361116	80							
Purpose of Disbursement Contribution				0	11		Amoun	t of	Each	Disburse	ment th	nis Period						
Candidate Name				Cate	aor	v/												
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Office Sought: House Senate Preside	ent X	nent For: Primary Other (spe	General				Contribu	ution	)									
	)9																	
Full Name (Last, First, Middle							Date of	f Die	bureo	mont								
B. Hoyer's Majority Fun	a							_			Y Y							
Mailing Address 700 13th Stre	et NW, Suite 600						05	1	3	1	201							
City Washington	ţ	State DC	Zip Code 20005				Transaction ID : 36111681											
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Candidate Name				Cate	egor	y/	2500.00											
Hoyer's Majority Fund		. =		Ty	ype			-	7									
Office Sought: House Senate Preside	Disburser	nent For: Primary Other (spe	General cify) ▼						Contribution									
State: District:			57 <b>v</b>															
Full Name (Last, First, Middle C. Swalwell For Congre	ull Name (Last, First, Middle Initial)						Date of	f Dis	sburse	ment								
Mailing Address PO Box 2847							м м 05	/	D 3		201							
City		State	Zip Code															
Dublin Purpose of Disbursement		CA	94568				Trans	sacti	ion ID	: 361116	694							
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Candidate Name	Cate	egor ype	y/					1	000.00									
	Rep. Eric Michael Swalwell         Office Sought:       V       House       Disbursement For: 2014								7		_	000.00						
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State: CA District:	5																	
SUBTOTAL of Disbursements Th	nis Page (optional)							_	,	- 7	5	500.00						
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan				perso	n for the	purpo	ose o	f soliciti	ing con	ntribut	ions				
$\left[ \right]$	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporated F	PAC (United for He	ealth)													
Α.	Full Name (Last, First, Middle Initial) Kurt Schrader For Congress					Date of	Disb	urser	ment							
						M M	/	D	_	YY	Y	Y				
	Mailing Address PO Box 3314					05		31		_ 20	13					
	,	State Zip Code OR 97045				Trans	actio	n ID :	36111	696						
	Oregon City Purpose of Disbursement	OR 97045	-		_											
	Contribution			011		Amount	of E	ach I	Disburse	ement	this F	eriod				
	Candidate Name			tegoi	ry/						5000	00				
	Rep. Kurt Schrader           Office Sought:         V         House         Disburser	ment For: 2014		Туре			. ,									
	Senate	Primary General				Contribu	ition									
	President	Other (specify) ▼														
	State:         OR         District:         05           Full Name (Last, First, Middle Initial)															
В.	Vargas For Congress					Date of	Disb	ourser	ment							
	Mailing Address 330 Encinitas Blvd., Suite 101					м м 05	/	D 31		ү ү 20	13	Y				
						00		Ş		20	10	_				
	Encinitas	State Zip Code CA 92024				Transaction ID : 36111697										
	Purpose of Disbursement Contribution			011		Amount of Each Disbursement this Period 2500.00										
	Candidate Name		Ca	itegoi	N/											
	Rep. Juan Vargas			Туре	<i>y,</i>			_			2500	.00				
		ment For: 2014 Primary General				Contribution										
	President	Primary General Other (specify)														
	State: CA District: 51															
C	Full Name (Last, First, Middle Initial)					Date of	Dieh	urson	mont							
0.	Matheson For Congress						/	D	_	Y Y	Y	Y				
	Mailing Address PO Box 521048		05		31		20									
	City Salt Lake City	State Zip Code UT 84152-1048				Trans	actio	n ID	: 36111	699						
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	Contribution Candidate Name		011		Amount	of E	ach I	Disburs	ement	this F	eriod					
	Rep. James D. Matheson	itegoi Type	ry/						5000	00						
	Office Sought: House Disburser		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,										
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S	CHEDULE B (FEC Form 3X)		FOR LINE										
	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	) (check only 21b 27	22     X     23     24     25     26       28a     28b     28c     29     30b									
	y information copied from such Reports and Stater for commercial purposes, other than using the nan												
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporated F	PAC (United for He	alth)										
Α.		Full Name (Last, First, Middle Initial)         Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)         Mailing Address 601 Pennsylvania Avenue NW, Suite											
				05 31 2013									
	City S Washington	StateZip CodeDC20004		Transaction ID : 36111701									
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period									
	Candidate Name Pharmaceutical Care Management Association Political Action Co	ommittee (PCMA PAC)	Category/ Type	5000.00									
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		Contribution									
B.	Full Name (Last, First, Middle Initial)         Bill Owens For Congress         Mailing Address       PO Box 1575			Date of Disbursement 05 / 05 / 05 / 05 / 05 / 05 / 05 / 05 /									
	City S Plattsburgh	State Zip Code NY 12901		Transaction ID : 36111729									
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period									
	Candidate Name		Category/	1000.00									
	Senate X	ment For: 2014 Primary General Other (specify) ▼	Туре	Contribution									
C.	Full Name (Last, First, Middle Initial)			Date of Disbursement									
	Mailing Address												
	City	State Zip Code											
	Purpose of Disbursement			-									
	Candidate Name		Category/ Type	Amount of Each Disbursement this Period									
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼	.,,,,										
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