Image# 12953086927			_	PAGE 1 / 155
	EPORT OF F ND DISBURS Other Than An Autho	EMENTS		Office Use Only
	e or print V	Example: If typing	type 12FE4M5	
COMMITTEE (in full)		over the lines.		· · · · ·
UnitedHealth Group Incor		d for Health)		
ADDRESS (number and street)	900 Bren Road East			
Check if different				
than previously reported. (ACC)	∕linnetonka			55343
2. FEC IDENTIFICATION NUMB		•	STATE 🔺	ZIP CODE
C C00274431	3. IS T REF	THIS NE		MENDED .)
 (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election 	(b) Monthly Report Due On: (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election	(M3) Jun (M4) Jun Primary (12P) Convention (12 on /	20 (M6) X Sep 20 (M7) Oct General C) Special	(12S) in the State of
Year Only) (MY) Termination Report (TER)	POST-Election Report for the: Election		Runoff (30R) Special (30S) in the State of
5. Covering Period	eport and to the best of m	through	M M 08 31	2012
Type or Print Name of Treasurer Signature of Treasurer	Susan Sherwood	[Electronically F	iled] Date 09	M / D D / Y Y Y Y Y 20 2012
NOTE: Submission of false, erroneous	, or incomplete information r	nay subject the person	n signing this Report to t	the penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

09/20/2012 16 : 14

6.

7.

8.

9.

X

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name UnitedHealth Group Incorporated PAC (United for Health) M Y М N 08 01 2012 08 2012 Report Covering the Period: 31 From: To: COLUMN A COLUMN B This Period Calendar Year-to-Date (a) Cash on Hand 184057.86 January 1, 2012 (b) Cash on Hand at 244398.05 Beginning of Reporting Period..... 514705.85 54765.66 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 299163.71 698763.71 6(a) and 6(c) for Column B)..... 134300.00 533900.00 Total Disbursements (from Line 31)..... Cash on Hand at Close of Reporting Period 164863.71 164863.71 (subtract Line 7 from Line 6(d)) Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: 08	/ D D / Y Y Y Y 01 2012 To	b: 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	10500 50	368761.22
(i) Itemized (use Schedule A)	48509.58	300701.22
Γ		70/50 50
(ii) Unitemized	5256.08	79459.58
(iii) TOTAL (add	50705.00	440000 80
Lines 11(a)(i) and (ii)	53765.66	448220.80
	0.00	0.00
(b) Political Party Committees	0.00	
(c) Other Political Committees	0.00	0.00
(such as PACs)		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	53765.66	448220.80
Totals to Line 33, page 5)		
Party Committees	0.00	54285.05
Farty Commutees	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	7 7 7
All Loans Received	0.00	0.00
All Loans Received		
Г	0.00	
. Loan Repayments Received	0.00	0.00
6. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)		0.00
. Refunds of Contributions Made		
to Federal Candidates and Other	1000.00	12000.00
Political Committees	1000.00	12000.00
(Dividende Interest etc.)	0.00	200.00
(Dividends, Interest, etc.)	0.00	200.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,	0.00
ΓΓ	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
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	54765.66	514705.85
	7	
. Total Federal Receipts		
(subtract Line 18(c) from Line 19) ►	54765.66	514705.85

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 02/2003)		Page 4
	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. C (a	Derating Expenditures: a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
4	(ii) Non-Federal Share	0.00	0.00
`	 Other Federal Operating Expenditures 	0.00	0.00
(0	 c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	0.00	0.0
	ransfers to Affiliated/Other Party	0.00	0.00
C F	contributions to ederal Candidates/Committees nd Other Political Committees	59000.00	433500.00
Ir	ndependent Expenditures	0.00	0.00
(L C (2	use Schedule E) coordinated Party Expenditures 2 U.S.C. §441a(d)) use Schedule F)		
(ι	use Schedule F)	0.00	0.00
L	oan Repayments Made	0.00	0.00
R	oans Made lefunds of Contributions To:	0.00	0.00
(8	a) Individuals/Persons Other Than Political Committees	0.00	1300.00
(t	,	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
(0	d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	1300.00
С	ther Disbursements	75300.00	99100.00
,	ederal Election Activity (2 U.S.C. §431(20)) a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
14	(ii) "Levin" Shareb) Federal Election Activity Paid Entirely	0.00	0.00
,	With Federal Funds	0.00	0.00
(0	 c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ► 	0.00	0.00
	otal Disbursements (add Lines 21(c), 22, 3, 24, 25, 26, 27, 28(d), 29 and 30(c))	124200.00	500000
		134300.00	533900.0
	otal Federal Disbursements subtract Line 21(a)(ii) and Line 30(a)(ii)		
fr	om Line 31)	134300.00	533900.00

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)	53765.66	448220.80
. Total Contribution Refunds (from Line 28(d))	0.00	1300.00
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53765.66	446920.80
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) ITEMIZED DECEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and S or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
Full Name (Last, First, Middle Initial) A. DEBORAH S STREB			Date of Receipt								
Mailing Address 2201 NORTH STAR ROAD			M M / D D / Y Y Y Y 08 31 2012								
City	State	Zip Code	Transaction ID : PR1159794128399								
UPPER ARLINGTON	OH	43221	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer	Occupation										
United HealthCare Services Inc	Dir Project I	Management									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		252.00	P/R Deduction (\$14.00 Bi-Weekly)								
		/5 / / /									
Full Name (Last, First, Middle Initial) B. ANTHONY J KAZLAUSKAS	Date of Receipt										
Mailing Address 11 CARNIVAL TERRACE											
City WEST WARWICK	State RI	Zip Code 02893	Transaction ID : PR1159794628399								
FEC ID number of contributing		02033	Amount of Each Receipt this Period								
federal political committee.	C		40.00								
Name of Employer United HealthCare Services Inc	Occupation										
Receipt For:	Sr Medical I										
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$20.00 Bi-Weekly)								
Other (specify)		360.00									
Full Name (Last, First, Middle Initial) C. CARLA M MUGGIO			Date of Receipt								
Mailing Address 3533 FAIR OAKS LANE			08 31 2012								
City	State	Zip Code	Transaction ID : PR1159798228399								
LONGBOAT KEY	FL	34228	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.46								
Name of Employer	Occupation										
United HealthCare Services Inc	Network Co	ontract Director									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		346.14	P/R Deduction (\$19.23 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			106.46								
TOTAL This Period (last page this line number	only)	······									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

FOR LINE NUMBER:

PAGE 7 OF

	-	Use separate schedule(s)			(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	ı 🗌	11b	11c	12				
Any information copied from such Reports a											
or for commercial purposes, other than usir											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (United for Health)									
Full Name (Last, First, Middle Initial) A. BRIAN R BELLOWS			Date	of R	eceipt						
Mailing Address 10 SHADOWOOD LANE	E		08		31	/ Y	2012	Y			
City TRUMBULL	State CT	Zip Code 06611					303828399 is Period	9			
FEC ID number of contributing federal political committee.	С				7		30.	00			
Name of Employer United HealthCare Services Inc	Occupatior Dir Bus Dvl										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00	P/R D	educt	ion (\$15.	00 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) B. KEITH W NOBLITT			Date	of R [,]	eceipt						
Mailing Address 122 SOUTH OAK POIN		08 / D D / Y Y Y Y Y 2012									
	State SC	Zip Code	Transaction ID : PR1159805528399 Amount of Each Receipt this Period								
SENECA	30	29672	Amo	unt of	Each R	eceipt th	is Period				
FEC ID number of contributing federal political committee.	C				3	7	40.	00			
Name of Employer United HealthCare Services Inc	Occupatior SCE 3 - Na	tl Accts Indiv Contr									
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		360.00	P/R D	əducti	ion (\$20.	00 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) C. JAMES S WATSON III			Date	of R [,]	eceipt						
Mailing Address 6520 SHENANDOAH D			M 04		31	/ Y	у у 2012	Y			
City LINCOLN	State NE	Zip Code 68510					306028399 is Period	9			
FEC ID number of contributing federal political committee.	С				7	7	50	.00			
Name of Employer	Occupatior	1									
United HealthCare Services Inc	Associate (General Counsel									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	P/R D	educt	ion (\$25.	00 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (option	al)						120.	00			
TOTAL This Period (last page this line nu	mber only)										

FOR LINE NUMBER:

PAGE 8 OF

		Use separate schedule(s)			neck only									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c		12				
	y information copied from such Reports and S for commercial purposes, other than using the								g cont					
	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) WAYNE F COOK			Date of Receipt										
	Mailing Address 1200 PEBBLE HILL ROAD				м м 08	/	31	/ Y	201		Y			
	City	State PA	Zip Code				on ID :	PR1159	81282	28399				
	DOYLESTOWN	FA	18901	_	Amount	of	Each R	eceipt th	is Pe	riod				
	FEC ID number of contributing federal political committee.	С				_	,		_	120.0	00			
	Name of Employer	Occupation												
	United HealthCare Services Inc													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1080.00		P/R Dedu	uctio	on (\$60.	00 Bi-We	eekly)					
в.	Full Name (Last, First, Middle Initial) DAVID S WICHMANN						ceipt							
	Mailing Address 7000 ANTRIM ROAD			08 31 2012										
	City	State Zip Code MN 55439				Transaction ID : PR1159814728399								
	EDINA	MN	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С				_	384.60							
	Name of Employer United HealthCare Services Inc	Occupation	UHG Operations											
	Receipt For:		Year-to-Date ▼		1									
	Primary General Other (specify) ▼		3461.40	P/R Deduction (\$192.30 Bi-Weekly)										
<u>с</u> .	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt							
	Mailing Address 1000 OLD LONG LAKE ROA	D			м м 08	/	31	/ Y	y 201		Y			
	City	State	Zip Code		Trans	acti	ion ID :	PR1159	81592	28399)			
	WAYZATA	MN	55391	_	Amount	of	Each R	eceipt th	is Pe	riod				
	FEC ID number of contributing federal political committee.	С			384.60									
	Name of Employer	Occupation												
	United HealthCare Services Inc Receipt For:		ess Operations	_										
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40		P/R Ded	uctio	on (\$192	2.30 Bi-V	Veekly	y)				
s	UBTOTAL of Receipts This Page (optional)			•						889.2	20			
_T	OTAL This Period (last page this line number	only)		-	.									

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PAGE 9 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)			(check only one)									
		for each category of the Detailed Summary Page		11a		11b	11c	12	Г					
Any information copied from such Reports an or for commercial purposes, other than using									butio					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	Jnited for Health)												
Full Name (Last, First, Middle Initial) A. PATRICIA R SAURO			[Date of	f Re	ceipt								
Mailing Address 8943 HIDDEN MEADOW	R			м м	/	31	/ Y	2012		1				
City WOODBURY	State MN	Zip Code 55125		Trans		ion ID :	PR1159	816428	399	_				
FEC ID number of contributing federal political committee.	С					,		1	20.0	0				
Name of Employer United HealthCare Services Inc Receipt For:		Healthcare Year-to-Date ▼												
Primary General Other (specify)	Aggregate	1080.00	P/R Deduction (\$60.00 Bi-Weekly)											
Full Name (Last, First, Middle Initial) B. WILLIAM A MUNSELL				Date of	f Re	ceipt								
Mailing Address 2119 WINDSONG CIRCL						08 / D D / Y Y Y Y Y 2012								
City WAYZATA	State MN	Zip Code 55391	-			-	PR11598							
FEC ID number of contributing federal political committee.	С					Amount of Each Receipt this Period								
Name of Employer United HealthCare Services Inc Receipt For: Primary General		Health Group Year-to-Date ▼		P/R Deduction (\$100.00 Bi-Weekly)										
Other (specify) ▼ Full Name (Last, First, Middle Initial)	L	1800.00												
C. JOHN S PENSHORN Mailing Address 120 BLACK OAKS LANE			[Date of		ceipt 31	/ Y	2012		1				
City WAYZATA	State MN	Zip Code 55391					PR1159 eceipt th							
FEC ID number of contributing federal political committee.	С			Amount			eceipt u		84.6	0				
Name of Employer United HealthCare Services Inc		Health Group												
Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 3461.40				P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)					л		7(04.60)				
TOTAL This Period (last page this line num	ber only)													

FOR LINE NUMBER:

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	Use separate schedule(s)			(check only one)										
IILWIZED NECEIFI3		for each category of the Detailed Summary Page		11a		11b	11c	12						
Any information conied from such Deports and S	tatemente m	w not be sold or used by any n	areon fr	13 or the		14	15 soliciting	16	17					
Any information copied from such Reports and S or for commercial purposes, other than using the														
UnitedHealth Group Incorporate	ed PAC (l	United for Health)												
Full Name (Last, First, Middle Initial)					_									
A. PAUL D KALLMEYER Mailing Address 468 HERALD DR				ate of	Rec		_							
Maining Address 400 HERALD DR				м м 08		31	/ Y	2012	Y					
City	State	Zip Code		Trans	actio		PR11598	31742839	99					
AMBLER	PA	19002	A	mount	of E	ach R	eceipt th	is Period						
FEC ID number of contributing federal political committee.	С		1.0					100	0.00					
							,							
Name of Employer	Occupation													
United HealthCare Services Inc Receipt For:		neral Counsel (Mgr)	_											
Primary General	Aggregate	Year-to-Date ▼	P/I	R Dedi	uction	n (\$50.	00 Bi-We	eklv)						
Other (specify)		900.00		P/R Deduction (\$50.00 Bi-Weekly)										
			_											
Full Name (Last, First, Middle Initial) B. TIMOTHY F RYAN				ate of	Rec	eipt								
Mailing Address 4913 BRUCE AVE	E AVE													
		08 31 2012												
City EDINA	State Zip Code MN 55424			Transaction ID : PR1159817928399										
FEC ID number of contributing		Amount of Each Receipt this Period												
federal political committee.	С						,	38	8.00					
Name of Employer	Occupation													
United HealthCare Services Inc	Business Se	egment Gen Counsel												
Receipt For:	Aggregate	Year-to-Date ▼		P/R Deduction (\$19.00 Bi-Weekly)										
Primary General		342.00	P/F											
Other (specify)		,,												
Full Name (Last, First, Middle Initial)														
C. THOMAS J QUIRK			D	ate of	Rec	eipt								
Mailing Address 4307 BEECHWOOD LANE			1.1	м м 08	/	D D 31	/ Y	2012	Y					
City	State	Zip Code			actic		PR1159	81912839	99					
DALLAS	ТХ	75220	A	mount	of E	ach R	eceipt th	is Period						
FEC ID number of contributing	С		1.0					100	0.00					
federal political committee.	0		1.1				7							
Name of Employer	Occupation													
United HealthCare Services Inc	Health Plan		_											
Receipt For:	Aggregate	Year-to-Date ▼	D/	P Dod	uctio	o (\$50	00 Bi-We	ockly)						
Other (specify)		900.00		r Deu	uctio	n (\$50.	00 DI-116	BERIY)						
		7												
			Γ					238	00					
SUBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••						230						
TOTAL This Period (last page this line number	only)													

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 11 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using	d Statements may not be sold or used by any p the name and address of any political committe									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (United for Health)									
Full Name (Last, First, Middle Initial) A. REED V TUCKSON M.D.		Date of Receipt								
Mailing Address 3501 ZENITH AVE SOUTH		08 31 2012								
City MINNEAPOLIS	State Zip Code MN 55416	Transaction ID : PR1159819828399 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С	230.76								
Name of Employer United HealthCare Services Inc	Occupation EVP Consumr Health & Med Care									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2076.84	P/R Deduction (\$115.38 Bi-Weekly)								
Full Name (Last, First, Middle Initial) B. DAVID J FALK		Date of Receipt								
Mailing Address 323 LAWRENCE AVE	08 31 2012									
City HIGHLAND PARK	StateZip CodeNJ08904	Transaction ID : PR1159820228399 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	28.00								
Name of Employer United HealthCare Services Inc	Occupation Medical Director									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. WILLIAM C TRACY		Date of Receipt								
Mailing Address 13016 CANTERBURY		M = M / D = D / Y = Y = Y = Y Y 08 31 2012 1								
City LEAWOOD	State Zip Code KS 66209	Transaction ID : PR1159821528399 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	115.40								
Name of Employer	e of Employer Occupation									
United HealthCare Services Inc	Health Plan CEO	_								
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1038.60	P/R Deduction (\$57.70 Bi-Weekly)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)			(check only one)									
			for each category of the Detailed Summary Page		11a		11b	11c	12	Г	47			
	y information copied from such Reports and S for commercial purposes, other than using the									butio				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) MICHAEL M HAWKINS				Date of	Re	ceipt							
	Mailing Address 11137 AMESITE TRAIL				м м	/	31) / Y	2012		1			
	City AUSTIN	State TX	Zip Code 78726		Trans		ion ID :	PR1159	822028	399				
	FEC ID number of contributing federal political committee.	С					7			23.0	8			
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation Sr Medical												
	Primary General Other (specify)	Aggregate	207.72		/R Ded	uctio	on (\$11.	.54 Bi-We	eekly)					
в.	Full Name (Last, First, Middle Initial) RICHARD J MIGLIORI						ceipt							
	Mailing Address PO BOX 72 City State Zip Code					08 / 31 / 2012								
	WAYZATA	MN		Transaction ID : PR1159827428399 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С					7			00.00)			
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		itiatives & Clin Aff Year-to-Date ▼ 1800.00	P	/R Dedu	uctio	on (\$100	0.00 Bi-W	/eekly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) BARBARA C BUENEMANN				Date of	Re	ceipt							
	Mailing Address 128 ROSEBROOK DR			08 31 2012										
	City FLORISSANT	State MO	Zip Code 63031					PR1159 Receipt th						
	FEC ID number of contributing federal political committee.	С					7			23.0	8			
	Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Dir Custom Aggregate			2/R Ded	ucti	on (\$11	.54 Bi-We	eekly)					
_	Other (specify)		207.72				(ψ • •							
s	UBTOTAL of Receipts This Page (optional)			•			,	,	24	46.16	;			
Т	OTAL This Period (last page this line number	only)		•										

FOR LINE NUMBER:

PAGE 13 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
ILWIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a		1c 12						
Any information copied from such Reports ar	nd Statements ma	av not be sold or used by any n	erson for the		5 16	17 tions					
or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	United for Health)									
Full Name (Last, First, Middle Initial)			Date of	Receipt							
Mailing Address 4305 TRILLIUM WAY			M M / D D / Y Y Y Y Y 08 31 2012								
City MINNETRISTA	State MN	Zip Code 55364		action ID : PR1 of Each Recei							
FEC ID number of contributing federal political committee.	С			7	384	.60					
Name of Employer United HealthCare Services Inc Receipt For:		i IHealth Group Year-to-Date ▼									
Primary General Other (specify) ▼	, iggi oguto	3461.40	P/R Ded	uction (\$192.30	Bi-Weekly)						
Full Name (Last, First, Middle Initial) B. JACK E SHUFF			Date of	Receipt							
Mailing Address 360 ASPEN LANE	01-1-	7. 0.1	08	/ D D / 31	2012	Y					
City COVINGTON	State LA	Zip Code 70433	Transaction ID : PR1159830528399 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С					.00					
Name of Employer United HealthCare Services Inc	Occupation SB RVP	I	_								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 702.00	P/R Ded	uction (\$39.00 B	i-Weekly)						
Full Name (Last, First, Middle Initial) C. JILL WINTERS			Date of	Receipt							
Mailing Address 16 SPOEDE LN			M M 08	/ D D / 31	y y y 2012	Y					
City SAINT LOUIS	State MO	Zip Code 63141		action ID : PR1							
FEC ID number of contributing federal political committee.	С		Amount	of Each Recei	pt this Period 108						
Name of Employer United HealthCare Services Inc	Occupation VP Operati		_								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 972.00	P/R Ded	uction (\$54.00 E	i-Weekly)						
SUBTOTAL of Receipts This Page (optional)				570.	.60					
TOTAL This Period (last page this line num	ber only)				7						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 14 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only	v one)								
		for each category of the Detailed Summary Page	X 11a	11b 11c								
Any information copied from such Re or for commercial purposes, other that												
NAME OF COMMITTEE (In Full) UnitedHealth Group Inc						-						
Full Name (Last, First, Middle Initia Mr. ANTHONY WELTERS	al)		Date of	Receipt								
Mailing Address 919 SAIGON ROA	\D		08									
City MCLEAN	State VA	Zip Code 22102	Transa	action ID : PR133 of Each Receipt								
FEC ID number of contributing federal political committee.	C			7 7	384.	60						
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		n dHealth Group Year-to-Date ▼ 3461.40	P/R Dedu	uction (\$192.30 Bi	-Weekly)							
Full Name (Last, First, Middle Initia MICHAEL J BRESOLIN Mailing Address 121 W VIEW STR			Date of	Receipt	y y y 2012	Y						
City LOMBARD	State IL	Zip Code 60148	Transa	action ID : PR155 of Each Receipt	51005728399)						
FEC ID number of contributing federal political committee.	C				40.0	00						
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Care Ac Aggregate		P/R Dedu	uction (\$20.00 Bi-\	Neekly)							
Full Name (Last, First, Middle Initia C. CHRISTOPHER R HOCH			Date of	Receipt								
Mailing Address 215 WINDMILL H				/ D D / 31	y y y 2012	Y						
City WETHERSFIELD	State CT	Zip Code 06109		action ID : PR15		9						
FEC ID number of contributing federal political committee.	C			7 7	23.	.08						
Name of Employer United HealthCare Services Inc Receipt For: Primary General		n I Management Year-to-Date ▼	P/R Dedu	Weeklv)								
Other (specify)	L	207.72										
SUBTOTAL of Receipts This Page (. ,				447.6	68						
TOTAL This Period (last page this li	ne number only)	······]				_						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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 th			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	Jnited for Health)								
A.	Full Name (Last, First, Middle Initial) JEFFREY W KAGAN			Date of Receipt							
	Mailing Address 52 CRESTWOOD LANE			M M / D D / Y							
	City FARMINGVILLE	State NY	Zip Code 11738	Transaction ID : PR1551132328399							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 40.00							
	Name of Employer United HealthCare Services Inc	Occupation VP, Produc									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)							
В.	Full Name (Last, First, Middle Initial) GERALD JOHN Knutson			Date of Receipt							
	Mailing Address 520 KIMBERLY LN N			08 31 2012							
	City PLYMOUTH	State MN	Zip Code 55447	Transaction ID : PR1551132528399 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		20.00							
	Name of Employer United HealthCare Services Inc	Occupation Business S	egment CFO								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi-Weekly)							
C.	Full Name (Last, First, Middle Initial) MICHAEL C MATTEO	I		Date of Receipt							
	Mailing Address 25 JEREMIAHS WAY			08 31 Y Y Y Y Y Y							
	City SOUTH GLASTONBURY	State CT	Zip Code 06073	Transaction ID : PR1551133428399 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		38.46							
	Name of Employer	Occupation	1								
	United HealthCare Services Inc	Chief Grow	th Officer								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$19.23 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			98.46							
Т	OTAL This Period (last page this line number	only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 16 OF

	-	Use separate schedule(s)	(check only o	one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b 11c	12					
Any information copied from such Reports a	nd Statements ma	ay not be sold or used by any p	erson for the pu	14 15	16 a contributio	17 ons				
or for commercial purposes, other than using	g the name and a	ddress of any political committee	e to solicit contri	butions from suc	h committe	e.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	United for Health)								
Full Name (Last, First, Middle Initial) DAWN M OWENS			Date of R	leceipt						
Mailing Address 2119 E LAKE OF THE IS	LES PKWY		08 31 2012							
City MINNEAPOLIS	State MN	Zip Code 55405	Transac Amount o							
FEC ID number of contributing federal political committee.	С			y y	200.0	00				
Name of Employer United HealthCare Services Inc Receipt For: Primary General		egment CEO Year-to-Date ▼		tion (\$100.00 Ri V	Vookly)					
Other (specify)		1800.00	P/R Deduc	tion (\$100.00 Bi-V	чеекіу)					
Full Name (Last, First, Middle Initial) B. THOMAS J VALERIUS			Date of R	leceipt						
Mailing Address 2820 DEER RUN TRAIL	2		M M 08	/ D D / Y 31	2012	Y				
City LONG LAKE	State MN	Zip Code 55356		tion ID : PR1551						
FEC ID number of contributing federal political committee.	С			- y	153.8	34				
Name of Employer United HealthCare Services Inc	Occupation SVP Recrui									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1384.56	P/R Deduct	tion (\$76.92 Bi-We	ekly)					
Full Name (Last, First, Middle Initial) C. LOIS T WEIHRAUCH			Date of R	leceipt						
Mailing Address 10392 SHERMAN DRIVE	E		08	/ D D / Y 31	2012	Y				
City EDEN PRAIRIE	State MN	Zip Code 55347		ction ID : PR1551 f Each Receipt th)				
FEC ID number of contributing federal political committee.	С			7 7	120.0	00				
Name of Employer	Occupation	1								
United HealthCare Services Inc	VP Genera	I Management								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1080.00	P/R Deduc	tion (\$60.00 Bi-W	eekly)					
SUBTOTAL of Receipts This Page (optiona	ı l)			1 1	473.8	34				
TOTAL This Period (last page this line num	nber only)			7						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 17 OF

		Detailed Summary Page	(11a		111	b	11c		12				
					13		14		15		16	17	
	y information copied from such Reports and s for commercial purposes, other than using th												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	Jnited for Health)										
Α.	Full Name (Last, First, Middle Initial) JOHN O ENDERLE				Date of Receipt								
	Mailing Address 31 ANDREIS TRAIL				M = M / D = D / Y = Y = Y = Y Y 08 31 2012 1								
	City	State CT	Zip Code 06074	Transaction ID : PR1554323528399									
	SOUTH WINDSOR	CI	00074	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С										00	
	Name of Employer	Occupation											
	United HealthCare Services Inc	Regional E	xecutive Director										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_ _				(A = - ·			,		
	Other (specify)		990.00		P/R Ded	uctio	on ((\$55.0	0 Bi-We	∋ekly	y)		
В.	Full Name (Last, First, Middle Initial) RICK M JELINEK				Date of	f Re	eceip	pt					
	Mailing Address 5570 WOODSIDE LANE				м м 08	/		31	/ Y) 12	Y	
	City	State	Zip Code		Trans	acti	ion	ID : P	R1554	3239	28399)	
	SHOREWOOD	MN	55331	_	Amount	t of	Ead	ch Re	ceipt th	is P	Period		
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer United HealthCare Services Inc	Occupation Business S	egment CEO										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40	P	/R Ded	uctio	on (\$192.3	30 Bi-W	/eek	ly)		
c.	Full Name (Last, First, Middle Initial) MICHAEL RADU				Date of	f Re	eceip	pt					
	Mailing Address 42820 VIOLA CT				м м 08	1		31	/ Y)12	Y	
	City LEESBURG	State VA	Zip Code 20176						R1554			9	
			20110		Amount	t of	Ead	ch Re	ceipt th	iis P	'eriod	_	
	FEC ID number of contributing federal political committee.	С					7		9	_	108	00	
	Name of Employer	Occupation											
	United HealthCare Services Inc	COO, Colla	borative Care										
	Receipt For:	Aggregate											
	Other (specify)		972.00] F	P/R Ded	luctio	ion ((\$54.0	0 Bi-W	ekly	y)		
s	UBTOTAL of Receipts This Page (optional)			•			-				602.	60	
Т	OTAL This Period (last page this line number	only)	······	•			,			Ξ			

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

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FOR LINE NUMBER:

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			for each category of the Detailed Summary Page		11a 13		11b 14		11c 15	12	17	
	y information copied from such Reports and St for commercial purposes, other than using the				or the		oose o		liciting	contrib	utions	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) CATHERINE E SPILLANE Mailing Address 3807 PLEASANT VALLEY DR	IVE			Date of Receipt							
	City	State	Zip Code	4	08	acti	31		15543	2012		
	MISSOURI CITY	ТХ	77459	A	Transaction ID : PR1554324628399 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					7	_		3	8.46	
	Name of Employer United HealthCare Services Inc	Occupation Dir Busines										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/	R Ded	uctic	on (\$19) .23	Bi-We	ekly)		
В.	Full Name (Last, First, Middle Initial) KIRK E STAPLETON				Date of	Re	ceipt					
	Mailing Address 3840 INGLEWOOD AVE S				м – м 08	1	D 31		/ Y	y y 2012	Y	
	City SAINT LOUIS PARK	State MN	Zip Code 55416							3247283 is Perio		
	FEC ID number of contributing federal political committee.	С		100.00								
	Name of Employer United HealthCare Services Inc	Occupation VP Strategie										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	P/	R Dedu	uctio	on (\$50).00	Bi-We	ekly)		
с.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt					
	Mailing Address 15348 RED OAKS ROAD SE				м м 08	/	D 31		/ Y	үү 2012	Y	
	City PRIOR LAKE	State MN	Zip Code 55372	A						9 576283 is Perio		
	FEC ID number of contributing federal political committee.	С					7	_	7	38	4.60	
	Name of Employer	Occupation		_								
	United HealthCare Services Inc	Market Gro	up CAO									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)								
	Other (specify)		3461.40									
S	UBTOTAL of Receipts This Page (optional)						,	_	3	52	3.06	
Т	OTAL This Period (last page this line number of	only)		. [,		7			

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PAGE 19 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check o	nly o	ne)	·					
ILIVIIZED REVEIPIS		for each category of the Detailed Summary Page	X 11a]11b	11c	12				
Any information copied from such Reports	and Statements ma	av not be sold or used by any p	erson for th	e pur	14 pose of	15 soliciting	16 contribut	17 tions			
or for commercial purposes, other than us											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	Jnited for Health)									
Full Name (Last, First, Middle Initial) A. ERNEST MONFILETTO			Date	of Re	eceipt						
Mailing Address 3062 COMFORT ROA	C		08 31 2012								
City NEW HOPE	State PA	Zip Code 18938		9 5812839 iis Period	9						
FEC ID number of contributing federal political committee.	С		E		7		153	.84			
Name of Employer United HealthCare Services Inc	Occupation Plan Presid	ent									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1384.56	P/R D	educti	ion (\$76	.92 Bi-We	eekly)				
Full Name (Last, First, Middle Initial) B. <u>LEE D VALENTA</u>			Date	of Re	eceipt						
Mailing Address 4701 GOLF TERRACE			M 08		31	/ Y	у у 2012	Y			
City EDINA	State MN	Zip Code 55424					95852839 iis Period	9			
FEC ID number of contributing federal political committee.	С						384.	60			
Name of Employer United HealthCare Services Inc	Occupation President L	fe Sciences									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40	P/R De	educti	on (\$192	2.30 Bi-W	/eekly)				
Full Name (Last, First, Middle Initial) C. THOMAS S PAUL			Date	of Re	eceipt						
Mailing Address 2006 QUEEN AVENUE	SOUTH		08		31) / Y	y y 2012	Y			
City MINNEAPOLIS	State MN	Zip Code 55405					86472839	9			
FEC ID number of contributing federal political committee.	С			int of	Each H	eceipt th	iis Period 200	.00			
Name of Employer	Occupation										
United HealthCare Services Inc	UHC, Chief	Consumer Officer									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1800.00	P/R D	educt	ion (\$10	0.00 Bi-W	Veekly)				
SUBTOTAL of Receipts This Page (optio	,			-	7 I		738.	44			

FOR LINE NUMBER:

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IT.	EMIZED RECEIPTS		Use separate schedule(s)			(check only one)						
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	y information copied from such Reports and S for commercial purposes, other than using the			erson fo	r the		oose of	soliciting	g cont	ributio	ons	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
A.	Full Name (Last, First, Middle Initial) ROBERT THOMAS WEBB			D	Date of Receipt							
	Mailing Address 4516 DREXEL AVENUE											
	City EDINA	State MN	Zip Code 55424					PR1580 eceipt th				
	FEC ID number of contributing federal political committee.	С									60	
	Name of Employer United HealthCare Services Inc Receipt For:		Health Group									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40	P/F	R Dedu	uctio	on (\$192	2.30 Bi-V	Veekly	/)		
в.	Full Name (Last, First, Middle Initial) RICHARD J HUGHES			D	ate of	Re	ceipt					
	Mailing Address 735 SAINT MORITZ				м м 08	/	31	/ Y	201	2	ſ	
	City VICTORIA	State MN	Zip Code 55386	Transaction ID : PR1596304 Amount of Each Receipt this P								
	FEC ID number of contributing federal political committee.	С								200.0	0	
	Name of Employer United HealthCare Services Inc	Occupation SVP Humar	n Capital Dvlpmt									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1800.00	P/F	R Dedu	uctic	on (\$100	.00 Bi-V	√eekly	')		
с.	Full Name (Last, First, Middle Initial) THAD C JOHNSON			D	ate of	Re	ceipt					
	Mailing Address 16848 STIRRUP LN				м м 08	/	31	/ Y	201		Y	
	City EDEN PRAIRIE	State MN	Zip Code 55347					PR1596 eceipt th				
	FEC ID number of contributing federal political committee.	С					7			200.0	00	
	Name of Employer United HealthCare Services Inc	Occupation	up General Counsel									
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1800.00	P/f	R Dedi	uctio	on (\$100).00 Bi-V	Veekly	()		
s	UBTOTAL of Receipts This Page (optional)				-		7			784.6	0	
т	OTAL This Period (last page this line number	only)	••••••	. [7					

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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 t			erson for			se of s				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora										
Full Name (Last, First, Middle Initial) A. GAYE ADAMS MASSEY			Da	te of I	Rece	eipt				
Mailing Address 3801 ABBOTT AVE S			08 31 2012							
City MINNEAPOLIS	State MN	Zip Code 55410				n ID : P		30452839 is Perioc		
FEC ID number of contributing federal political committee.	С				- 7		3	230	0.76	
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		General Counsel Year-to-Date ▼ 2076.84	 P/R	Dedu	ction	(\$115.	38 Bi-W	/eekly)		
Full Name (Last, First, Middle Initial) B. JAY S MATUSHAK Mailing Address 9346 SHETLAND ROAD			M	te of I 08	Rece	eipt D D D 31	/ Y	2012	Ŷ	
City EDEN PRAIRIE	State MN	Zip Code 55347						30462839 is Perioc		
FEC ID number of contributing federal political committee.	С				7				3.00	
Name of Employer United HealthCare Services Inc	Occupation VP Finance									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R	Deduc	ction	(\$39.0	0 Bi-We	ekly)		
Full Name (Last, First, Middle Initial) C. CAROL B MORNESS			Da	te of I	Rece	eipt				
Mailing Address 401 N 2ND ST UNIT 512				м 08	/	D D 31	/ Y	y y 2012	Y	
City MINNEAPOLIS	State MN	Zip Code 55401						30492839 is Perioc		
FEC ID number of contributing federal political committee.	С				- 7		3	70	6.92	
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Underw									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R	Dedu	ction	(\$38.4	€ Bi-We	eekly)		
SUBTOTAL of Receipts This Page (optional)				-	7		7	335	.68	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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		Detailed Summary Page	11a		111	b	11c	12					
				1	13		14		15	16	17		
	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) SCOTT E THEISEN			[Date of Receipt								
	Mailing Address 1950 MEADOWWOODS TRA	IL			08 31 2012								
	City	State	Zip Code		Transaction ID : PR1596305628399								
	LONG LAKE	MN	55356	/	Amount	of	Ead	ch Re	ceipt th	is Period			
	FEC ID number of contributing federal political committee.	С					,		7	38	.46		
	Name of Employer	Occupation		\neg									
	United HealthCare Services Inc	Business S	egment CFO										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify)	346.14	P/	/R Dedu	uctio	ion ((\$19.23	3 Bi-We	ekly)				
в.	Full Name (Last, First, Middle Initial) THOMAS D LEWIS				Date of	Re	eceip	pt					
	Mailing Address 306 CHIPPEWA AVENUE				08 31 Y Y Y Y Y Y Y								
	City	State	Zip Code							0692839	9		
	ТАМРА	FL	33606	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		76.92									
	Name of Employer United HealthCare Services Inc	Occupation Health Plan											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.28	P/	R Dedu	uctio	on ((\$38.46	6 Bi-We	ekly)			
с.	Full Name (Last, First, Middle Initial) ROBERT W OBERRENDER			[Date of	Re	eceip	pt					
	Mailing Address 4505 MOORLAND AVENUE				м м 08	/		31	/ Y	у у 2012	Y		
	City	State MN	Zip Code							30702839	9		
	EDINA	IVIIN	55424		Amount	of	Ead	ch Re	ceipt th	is Period			
	FEC ID number of contributing federal political committee.	C				_	7		- 7	220	.00		
	Name of Employer	Occupation		-									
	United HealthCare Services Inc	SVP Treas	urer										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		1980.00	P/R Deduction (\$110.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)									335	38		
	OTAL This Period (last page this line number of						,		7				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	United for Health)								
A.	Full Name (Last, First, Middle Initial) MICHAEL J ANDERSON			Date of Receipt							
	Mailing Address 17907 INVERNESS CURVE	01-14-	7. 0.1	08 / D D / Y Y Y Y 08 31 2012							
	City EDEN PRAIRIE	State MN	Zip Code 55347	Transaction ID : PR1596309328399							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		& Clinical Ops Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)							
в.	Full Name (Last, First, Middle Initial) DIANE BEDNAR FLYNN Mailing Address 3318 FOXRIDGE CIRCLE			Date of Receipt							
				08 31 _2012 _							
	City TAMPA	State FL	Zip Code 33618	Transaction ID : PR1596309728399 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		78.00							
	Name of Employer United HealthCare Services Inc	Occupation VP, Medica	I & Clinical Ops	_							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi-Weekly)							
с.	Full Name (Last, First, Middle Initial)			Date of Receipt							
	Mailing Address 19647 CASA VERDE WAY			08 31 2012							
	City	State FL	Zip Code	Transaction ID : PR1596309828399							
	FORT MYERS	FL.	33967	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		194.00							
	Name of Employer	Occupation	l								
	United HealthCare Services Inc	Medical Dir	ector								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1166.00	P/R Deduction (\$97.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		····· •	300.00							
Т	OTAL This Period (last page this line number	only)	••••••								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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		Detailed Summary Page		11a		11b	11c	12			
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any po ddress of any political committee	erson f e to sol	or the licit cor	pur _l ntrib	pose of outions f	soliciting	contribut committ	ions ee.		
NAME OF COMMITTEE (In Full)		Inited for Line (4)									
UnitedHealth Group Incorporate		United for Health)									
Full Name (Last, First, Middle Initial) A. RAMON E COTO			Date of Receipt								
Mailing Address 14021 LEANING PINE DRIVE											
				08		31		2012			
City MIAMI LAKES	State FL	Zip Code 33014						1152839	9		
	r L	00014	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С					7		38	.46		
Name of Employer	Occupation	I									
United HealthCare Services Inc	VP Genera	Management									
Receipt For:	Aggregate	Year-to-Date ▼		/D =			00.5	-11.5			
Other (specify)		346.14	P/	R Ded	uctio	on (\$19.	23 Bi-We	ekly)			
V. F. T. J. V.											
Full Name (Last, First, Middle Initial) B. JEFFREY P DOOLEY				Date of	Re	eceipt					
Mailing Address 306 W MEADOWS LANE				M M	/	DD	/ Y	Y Y	Y		
				08		31		2012			
	State	Zip Code						1212839)		
DANVILLE	CA	94506	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		23.08								
Name of Employer	Occupation	1	\neg								
United HealthCare Services Inc	KA VP Sale	es and Account Mgmt									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General		207.72	P/	R Dedu	uctio	on (\$11.	54 Bi-We	ekly)			
Other (specify)		, <u>,</u>									
Full Name (Last, First, Middle Initial) C. STEVAN D GARCIA				Date of	Re	ceipt					
Mailing Address 28115 BOULDER BRIDGE DF	RIVE			м м 08	/	31	/ Y	y y 2012	Y		
City	State MN	Zip Code						81292839	9		
SHOREWOOD	IVIIN	55331	/	Amount	of	Each R	eceipt th	is Period			
FEC ID number of contributing federal political committee.	С					,	7	38	.46		
Name of Employer	Occupation	1									
United HealthCare Services Inc	SVP Opera	tions									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		346.14	P/R Deduction (\$19.23 Bi-Weekly)								
		7									
SUBTOTAL of Receipts This Page (optional)			•			1		100.	00		
TOTAL This Period (last page this line number	only)	······				,					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

FOR LINE NUMBER:

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using th		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (United for Health)	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 9825 GERALD DR		08 31 2012
City SAINT LOUIS	State Zip Code MO 63128	Transaction ID : PR1596313728399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00
Name of Employer United HealthCare Services Inc	Occupation VP Finance	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. JOHN H RENNICK JR	I	Date of Receipt
Mailing Address 3220 LAKEWOOD EDGE DF		08 31 2012
City CHARLOTTE	StateZip CodeNC28269	Transaction ID : PR1596316828399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer United HealthCare Services Inc	Occupation Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	P/R Deduction (\$19.23 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. DANIEL I ROSENTHAL		Date of Receipt
Mailing Address 109 SLEEPY HOLLOW LAN		08 31 2012
City ORINDA	State Zip Code CA 94563	Transaction ID : PR1596317328399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 38.46
Name of Employer	Occupation	
United HealthCare Services Inc	Health Plan CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 346.14	P/R Deduction (\$19.23 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		

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	nd Statements ma	ay not be sold or used by any p	erson for the	purpose of	15 soliciting	16 contribut	ions			
NAME OF COMMITTEE (In Full)	g the name and a			minoutions		1 COmmute				
UnitedHealth Group Incorpor	rated PAC (I	United for Health)								
Full Name (Last, First, Middle Initial) A. KEVIN J RUTH			Date o	of Receipt						
Mailing Address 16621 ALEXANDER MAN	NOR DRIVE		M - M 08	/ D 31) / Y	ү ү 2012	Y			
City SILVER SPRING	State MD	Zip Code 20905		saction ID : It of Each F			•			
FEC ID number of contributing federal political committee.	С					150.	00			
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	·	o prise Clinical Alignm Year-to-Date ▼ 1350.00	P/R Dec	duction (\$75	.00 Bi-We	eekly)				
Full Name (Last, First, Middle Initial) DAVID C STURKEY Mailing Address 1625 CONE FLOWER WA	٩Y		M) / Y	Y Y	Y			
City	State	Zip Code	08 Trans	31 saction ID :	PR15963	2012 318428399	,			
SUWANEE	GA	30024	Amoun	nt of Each F	Receipt th	is Period				
FEC ID number of contributing federal political committee.	С					78.	00			
Name of Employer United HealthCare Services Inc	Occupation KA VP Sale	es and Account Mgmt								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 624.00	P/R Dec	luction (\$39	.00 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) C. ROXANNE THOMAS			Date o	of Receipt						
Mailing Address 720 COUNTRY LAKES D	PR		M M 08	/ D 31		у у 2012	Y			
CIRCLE PINES	State MN	Zip Code 55014		saction ID : It of Each F			<u>}</u>			
FEC ID number of contributing federal political committee.	С			· · ·		23.	08			
Name of Employer	Occupation	1								
United HealthCare Services Inc	Dir Product	t								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.72	P/R Dec	duction (\$11	.54 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num	,			· · · ·	- 7	251.	08			

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

Use separate schedule(s)

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	ED RECEIPTS		Use separate schedule(s)	(check	(check only one)								
			for each category of the Detailed Summary Page	X 11	a 🗌	11b	11c	12					
Any informa	ation copied from such Reports a	and Statements ma	ay not be sold or used by any p	erson for t	ne pu	14 rpose o	15 f solicitin	16 a contribu	17 Itions				
	nercial purposes, other than usin												
	of COMMITTEE (In Full) dHealth Group Incorpo	orated PAC (l	Jnited for Health)										
	ne (Last, First, Middle Initial) REY ALAN TODD			Date	of R	eceipt							
Mailing A	Address 467 PRAIRIE WAY SOU	TH		м 0		/ 31		2012	Y				
City BAYPO	RT	State MN	Zip Code 55003					31902839 his Period					
	number of contributing political committee.	С				7			0.00				
	f Employer lealthCare Services Inc	Occupation VP Underw	riting										
Pri	imary General her (specify) ↓	Aggregate	Year-to-Date ▼ 450.00	P/R D	educt	ion (\$2	5.00 Bi-W	eekly)					
	ne (Last, First, Middle Initial) JRIE WASSERSTEIN			Date	of R	eceipt							
	Address 92 GOODWIN CIRCLE	2		М 0		31		2012	Y				
City HARTF(ORD	State CT	Zip Code 06105					31952839 his Period	-				
FEC ID	number of contributing political committee.	С				J	, incompt t		8.46				
	f Employer lealthCare Services Inc	Occupation PS National	VP Account Mgmt										
	For: imary General her (specify) ▼	Aggregate	Year-to-Date ▼ 365.37	P/R D	educt	ion (\$19	9.23 Bi-W	eekly)					
	ne (Last, First, Middle Initial) ON R WERLEY			Date	of R	eceipt							
Mailing A	Address 4260 FOXBERRY COUF	RT		0		/ 3/		y y 2012	Y				
City MEDINA	A	State MN	Zip Code 55340					31962839 his Period					
	number of contributing political committee.	С		E		7	7	40	0.00				
	f Employer lealthCare Services Inc	Occupation Dir Underw											
	For: imary General her (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R D	educ	tion (\$2)	0.00 Bi-W	eekly)					
	L of Dessints This Dags (antions	al)			-			128	.46				

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	RECEIPTS		Use separate schedule(s)	(check onl	y one)			
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Any information or for commerci	copied from such Reports an ial purposes, other than using	d Statements ma the name and a	Ay not be sold or used by any p ddress of any political committe	e to solicit co	urpose of purbose fr	15 soliciting rom such	16 contribut n committ	tions ee.
	OMMITTEE (In Full) ealth Group Incorpora	ated PAC (I	Jnited for Health)			_		_
Full Name (L A. JOHN P E	ast, First, Middle Initial)			Date o	f Receipt			
	ess 1 ROXITICUS VIEW			м м 08	/ D D 31	/ Y	2012	Y
City CHESTER		State NJ	Zip Code 07930		saction ID : I t of Each Re			9
	ber of contributing cal committee.	С				7	78	.00
	ployer nCare Services Inc		tion Technology					
Receipt For: Primary Other	y General (specify) v	Aggregate	Year-to-Date ▼ 702.00	P/R Ded	luction (\$39.0	00 Bi-We	ekly)	
	ast, First, Middle Initial) D MICHAUX			Date o	f Receipt			
	ess 742 GOODRICH AVE	-		08	/ D D	/ Y	y y 2012	Y
City SAINT PAUL		State MN	Zip Code 55105		action ID : I			•
	ber of contributing cal committee.	С				7	200.	.00
	ployer nCare Services Inc	Occupation VP & GM P						
Receipt For: Primary Other	y General (specify) ▼	Aggregate	Year-to-Date ▼ 1800.00	P/R Ded	uction (\$100	.00 Bi-W	/eekly)	
Full Name (L C. LEWIS C	ast, First, Middle Initial)			Date o	f Receipt			
	ess 4800 SUNNYSLOPE ROA			08	/ D D 31	/ Y	2012	Y
City EDINA		State MN	Zip Code 55424		saction ID : t of Each Re			9
	ber of contributing cal committee.	С				7	200	.00
Name of Em United Health Receipt For:	ployer nCare Services Inc		al Advancement					
Primar	y General (specify) ▼	Aggregate	Year-to-Date ▼ 1800.00	P/R Dec	luction (\$100).00 Bi-W	/eekly)	
SUBTOTAL of	Receipts This Page (optional)						478.	00
TOTAL This P	eriod (last page this line numb	per only)						

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		Use separate schedule(s)	(check	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12				
Any information copied from such Reports and	Statements ma		erson for t		14 Irpose of	15 f soliciting	16 contribut	17 ions			
or for commercial purposes, other than using t	he name and a	address of any political committee	e to solicit	contri	ibutions	from such	h committe	ee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	United for Health)									
Full Name (Last, First, Middle Initial) A. MATTHEW W PETERSON			Date	e of P	leceipt						
Mailing Address 20595 SPENCER LANE					/ 31	D / Y	2012	Y			
City SHOREWOOD	State MN	Zip Code 55331			tion ID :		66992839 his Period)			
FEC ID number of contributing federal political committee.	С			_	7		200	00			
Name of Employer United HealthCare Services Inc Receipt For: Primary General		egment CAO Year-to-Date ▼	 P/R [Deduc	tion (\$10	0.00 Bi-V	Veekly)				
Full Name (Last, First, Middle Initial)		1800.00									
B. JEFFREY W MALONEY Mailing Address 18076 CLEAR SPRING LAN	NE		M	e of R)8	leceipt / 31		2012	Y			
City EDEN PRAIRIE	State MN	Zip Code 55347					243528399 nis Period)			
FEC ID number of contributing federal political committee.	С				7	7	192.	30			
Name of Employer United HealthCare Services Inc	Occupation VP Genera	n I Management									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R [)educt	tion (\$96	.15 Bi-We	eekly)				
Full Name (Last, First, Middle Initial) C. DANIEL S WALLER			Date	e of F	leceipt						
Mailing Address 17034 BAINBRIDGE DR				™ 08	/ D 31		у у 2012	Y			
City EDEN PRAIRIE	State MN	Zip Code 55347					36002839 nis Period	9			
FEC ID number of contributing federal political committee.	С				7	7		.00			
Name of Employer United HealthCare Services Inc	Occupation Dir Finance										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 540.00	P/R I	Deduc	tion (\$30	0.00 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional).					3	7	452.	30			
TOTAL This Period (last page this line number	er only)				, .						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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
or	for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
Α.	Full Name (Last, First, Middle Initial) WILLIAM F KENNEDY			Date of Receipt
	Mailing Address 14 MYRA LN			08 31 / Y Y Y Y Y Y Y Y
	City BURLINGTON	State CT	Zip Code 06013	Transaction ID : PR1653443128399
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc	Occupation Dir IT		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) STEVE R KOOREN			Date of Receipt
	Mailing Address 4444 ELLSWORTH DRIVE			08 31 2012
	City EDINA	State MN	Zip Code 55435	Transaction ID : PR1653443228399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer United HealthCare Services Inc	Occupation Business Se	egment CFO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40	P/R Deduction (\$192.30 Bi-Weekly)
.	Full Name (Last, First, Middle Initial) THOMAS J BELLAMY			Date of Receipt
	Mailing Address 2743 THOMAS AVENUE SOL			M = M / D = D / Y = Y = Y = Y Y 08 31 2012 2
	City MINNEAPOLIS	State MN	Zip Code 55416	Transaction ID : PR1653444328399
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	United HealthCare Services Inc	SB RVP		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1038.60	P/R Deduction (\$57.70 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			540.00
T	OTAL This Period (last page this line number of	only)	••••••	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Summary Page		11a		11b	11c	Ш	12	
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	y information copied from such Reports and Si 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) ALISTAIR D JACQUES				Date of	Re	ceipt				-
	Mailing Address 645 OLD LONG LAKE ROAD				м м 08	1	D D 31	/ Y)12	Y
	City	State	Zip Code		Trans	acti	ion ID : F	PR16534)
-	ORONO	MN	55391	A	Mount	t of	Each Re	ceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С			_	_	5	- 7		384.	60
	Name of Employer	Occupation									
	United HealthCare Services Inc	Business S	egment CIO								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		3461.40	P/	'R Ded	uctio	on (\$192.	.30 Bi-W	Veek	ly)	
	Full Name (Last, First, Middle Initial) DANIEL T SULLIVAN				Date of	Re	ceipt				
	Mailing Address 57 QUORN HUNT ROAD			м м 08	1	31	/ Y	ү 20	Y 12	Y	
	City	State	Zip Code				ion ID : P				
-	WEST SIMSBURY	СТ	06092	A	\mount	t of	Each Re	ceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С				_	5			23.	08
	Name of Employer United HealthCare Services Inc	Occupation Dir IT Projec									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.72	P/.	R Dedu	uctic	on (\$11.5	i4 Bi-W€	ekly	<i>'</i>)	
	Full Name (Last, First, Middle Initial) ELIZABETH DARCIE D. CORBIN				Date of	Re	ceipt		-		_
	Mailing Address 7985 LEA CIRCLE				м м 08	1	D D 31	/ Y) 12	Y
		State	Zip Code				ion ID : F)
-	BLOOMINGTON	MN	55438	A	\mount	t of	Each Re	eceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С				_	3	- 7		200.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	VP Health (Care Initiatives								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify)		1800.00	P/	'R Ded	uctio	on (\$100	.00 Bi-W	Veek	ly)	
			1000.00	1							
sı	JBTOTAL of Receipts This Page (optional)					Ξ	7	-1		607.6	88
т	OTAL This Period (last page this line number of	only)		•							

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FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports a	and Statements ma	ay not be sold or used by any p	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	doress of any political committee	to solicit contributions from such committee.							
	orated PAC (l	Jnited for Health)								
Full Name (Last, First, Middle Initial) A. Mr. MILES S SNOWDEN			Date of Receipt							
Mailing Address 4349 FREMONT AVE S			M M / D / Y							
City MINNEAPOLIS	State MN	Zip Code 55409	Transaction ID : PR1746717828399 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: Primary General	Occupation Chief Medic Aggregate		P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify)		3461.40	P/K Deduction (\$192.50 bi-weekly)							
Full Name (Last, First, Middle Initial) B. WILLIAM TALAMANTES			Date of Receipt							
Mailing Address 11618 ROLLING MEAD			08 / D D / Y Y Y Y 2012							
City GREAT FALLS	State VA	Zip Code 22066	Transaction ID : PR1806444728399 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 ▼ 496.00	P/R Deduction (\$40.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. LORIA ARCHER			Date of Receipt							
Mailing Address 2781 SADDLE CLUB R	DAD		08 31 2012							
City GREENWOOD	State IN	Zip Code 46143	Transaction ID : PR1806750128399 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer	Occupation	1								
United HealthCare Services Inc	Dir Provide	r Svc								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.72	P/R Deduction (\$11.54 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		487.68							
TOTAL This Period (last page this line nur	mber only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Summary Page		11a		11b	11c		12	
	y information copied from such Reports and										
or	for commercial purposes, other than using th										
\setminus	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ad PAC /I	Inited for Health)								
A.	Full Name (Last, First, Middle Initial) PAUL M EMERSON			1	Date of	Be	eceipt				
	Mailing Address 18855 MEADOW VIEW BLV	D		-				/ Y	Y	Y	Y
					08		31	L	20	012	
	City PRIOR LAKE	State MN	Zip Code 55372				ion ID : F)
			55572	/	Amount	of	Each Re	eceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С				_			_	76.	92
	Name of Employer	Occupation									
	United HealthCare Services Inc	Business S	egment CFO								
	Receipt For:	Aggregate	Year-to-Date ▼	_	(D. E		(4			、 、	
	Other (specify)		692.28] ^{P/}	R Ded	uctio	on (\$38.4	ю Bi-We	ekly	/)	
	Full Name (Last, First, Middle Initial) CATHERINE K ANDERSON	I			Date of	Re	eceipt				
	Mailing Address 37 W 2000 S				M M	/	D D	/ Y	Y	Y	Y
		0+-1-	Zin Codo		08		31	L		12	
	City DRIGGS	State ID	Zip Code 83422				on ID : F)
	FEC ID number of contributing				LINOUIII	. 01	Each Re	sceipt th	115 P	enuu	_
	federal political committee.	С			_	-	g		-	115.	40
	Name of Employer United HealthCare Services Inc	Occupation									
	Receipt For:		Management								
	Primary General	Aggregate	Year-to-Date ▼	P/	'R Dedi	uctio	on (\$57.7	0 Bi-We	ekly	()	
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с.	Full Name (Last, First, Middle Initial) KATHLEEN L BISHOP	1			Date of	Re	ceipt				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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PAGE 34 OF

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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Any information copied from such Reports and Statements may not be sold or used by a or for commercial purposes, other than using the name and address of any political com NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) STEVEN F PENN Mailing Address 6766 IDLEWOOD WAY City State Zip Code EDEN PRAIRIE MN 55346 FEC ID number of contributing federal political committee. Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) S. JOHN C SANTELLI	Date of Receipt 08 31 2012 Transaction ID : PR1903612928399 Amount of Each Receipt this Period 28.00
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A. STEVEN F PENN Mailing Address 6766 IDLEWOOD WAY City State Zip Code EDEN PRAIRIE MN 55346 FEC ID number of contributing federal political committee. C C Name of Employer Occupation VP Finance United HealthCare Services Inc VP Finance Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 210.0 Full Name (Last, First, Middle Initial) C C	Mmm / D / Y
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Mailing Address 17498 GEORGE MORAN DRIVE	08 31 2012
CityStateZip CodeEDEN PRAIRIEMN55347	Transaction ID : PR1903622028399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	200.00
Name of Employer Occupation United HealthCare Services Inc SVP & CIO	
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1800.0	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)	Date of Receipt
Mailing Address 128 WOODLAND RD	08 31 2012
CityStateZip CodeCOVENTRYCT06238	Transaction ID : PR1903636928399
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 38.46
Name of Employer Occupation	
United HealthCare Services Inc VP Finance	
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 346.1	P/R Deduction (\$19.23 Bi-Weekly)
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NAME OF COMMITTEE (In Full)	ed PAC (United for He	ealth)					
Full Name (Last, First, Middle Initial)			Date of Receipt				
Mailing Address 10 SHADOW GLEN							
City IRVINE	State Zip Code CA 92620						
FEC ID number of contributing federal political committee.	C						
Name of Employer United HealthCare Services Inc	Occupation SVP Operations		-				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	3456.00	P/R Deduction (\$192.00 Bi-Weekly)				
Full Name (Last, First, Middle Initial) 3. KATHIE L BRYAN			Date of Receipt				
Mailing Address 912 JOSHUA PLACE			M = M / D = D / Y = Y = Y				
City SAN DIEGO	StateZip CodeCA92154		Transaction ID : PR2119469428399				
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Name of Employer United HealthCare Services Inc	Occupation Assoc Dir Mrkting Comm		-				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	450.00	P/R Deduction (\$25.00 Bi-Weekly)				
Full Name (Last, First, Middle Initial)			Date of Receipt				
Mailing Address 5515 W 73RD AVENUE							
City WESTMINSTER	State Zip Code CO 80003						
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United HealthCare Services Inc	Assoc Dir Clinical Quality						
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	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	ed PAC (l	United for Health)									
Α.	Full Name (Last, First, Middle Initial) DAVID S CARLSON			[Date of	Re	eceipt					
	Mailing Address 13130 WESTPORT ST				08 31 _ 2012 _							Y
	City	State	Zip Code		Trans	acti			R21194	-		
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В.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt					
	Mailing Address 19021 POPPY HILL CIRCLE									Y	Y	
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	United HealthCare Services Inc	SVP Opera	tions									
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)	
Α.	Full Name (Last, First, Middle Initial) RICHARD A CROSS		Date of Receipt
	Mailing Address 11361 DONOVAN ROAD		M = M / D = D / Y = Y = Y 08 31 2012
	City ROSSMOOR	State Zip Code CA 90720	Transaction ID : PR2119471828399
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation Deputy General Counsel (Mgr) Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$25.00 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) KENNETH R DAVIS		Date of Receipt
	Mailing Address 7640 N 10TH AVE		08 31 2012
	City PHOENIX	StateZip CodeAZ85021	Transaction ID : PR2119472528399 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 Medical Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
с.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address 5364 E ABBEYFIELD ST		08 31 2012
	City LONG BEACH	State Zip Code CA 90815	Transaction ID : PR2119472628399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.00
	Name of Employer	Occupation	
	United HealthCare Services Inc	Chief of Staff	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	P/R Deduction (\$19.00 Bi-Weekly)
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SCHEDULE A (FEC Form 3X) _ _ _ _ -----

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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)		
A.	Full Name (Last, First, Middle Initial) TODD J DEMBROSKI			Date of Receipt	
	Mailing Address 1390 FINCH LN			08 31 20	
	City GREEN BAY	State WI	Zip Code 54313	Transaction ID : PR211947282 Amount of Each Receipt this Pe	
	FEC ID number of contributing federal political committee.	С			30.00
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		ctuarial Services Year-to-Date ▼ 270.00	P/R Deduction (\$15.00 Bi-Weekly))
в.	Full Name (Last, First, Middle Initial) ANGELO GIAMBRONE Mailing Address 1821 PARK STREET				Ý Ý
	City HUNTINGTON BEACH	State CA	Zip Code 92648	08 31 201 Transaction ID : PR211947512 Amount of Each Receipt this Pe	28399
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	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation SVP Networ Aggregate	rks Year-to-Date ▼ 900.00	P/R Deduction (\$50.00 Bi-Weekly)	
<u>с.</u>	Full Name (Last, First, Middle Initial) AMY J GILDERNICK			Date of Receipt	
	Mailing Address 2709 WILLIAMS GRANT			08 31 201	
	City DE PERE	State WI	Zip Code 54115	Transaction ID : PR21194752 Amount of Each Receipt this Pe	
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	r information copied from such Reports and or commercial purposes, other than using t											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (l	Jnited for Health)									
	Full Name (Last, First, Middle Initial) DAVID M HANSEN				Date of	Ree	ceipt					
Ν	Mailing Address 33 VIA CONOCIDO				08 31 2012							
	Dity SAN CLEMENTE	State CA	Zip Code 92673						4767283 9 iis Perioc			
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ι	Name of Employer Jnited HealthCare Services Inc	Occupation Health Plan										
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	Full Name (Last, First, Middle Initial) SAMUEL W HO				Date of	Re	ceipt					
_	Mailing Address 4220 OCEAN DR	Otata	Zie Oode		M M 08	/	31		2012	_		
	City MANHATTAN BEACH	State CA	Zip Code 90266				-	-	17792839 iis Perioc			
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l	Name of Employer Jnited HealthCare Services Inc Receipt For: Primary General Other (specify)	· · ·	Chief Clinical Off Year-to-Date ▼ 2768.40	P	/R Dedu	uctio	n (\$153	.80 Bi-W	′eekly)			
	Full Name (Last, First, Middle Initial) KEVIN D HOST				Date of	Red	ceipt					
	Mailing Address 14617 GRANT ST				08		D D D 31	/ Y	y y 2012	Y		
	Dity OVERLAND PARK	State KS	Zip Code 66221						4782283 iis Perioc			
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Mailing Address 9 RIMROCK Image: City State Zip Code Image: City Amount of Each Receipt FEC ID number of contributing federal political committee. Occupation VP Network Contracting P/R Deduction (\$25.00 Bi-N) Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Bi-N) B. JOHN D JONES Date of Receipt Date of Receipt Mailing Address 3562 REDWOOD City State Zip Code Image: City IRVINE CA 92606 PR211 Amount of Each Receipt FEC ID number of contributing federal political committee. City State Zip Code Image: City IRVINE CA 92606 PR211 Amount of Each Receipt Image: City Image: C	16 17 ing contributions uch committee. Y Y 2012 19479128399 this Period 50.00
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from superson for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from superson for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from superson for the purpose of solicit or for solicit contributions from superson for the purpose of solicit contributing federal political committee. Name of Employer Occupation Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Date of Receipt B. JOHN D JONES Date of Receipt Mailing Address 3662 REDWOOD C City State Zip Code FEC ID number of contributing federa	ing contributions uch committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. BRIAN JEFFREY Mailing Address 9 RIMROCK City State Zip Code IRVINE CA 92603 FEC ID number of contributing federal political committee. C Transaction ID : PR211 Name of Employer Occupation VP Network Contracting Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Bi-A B. JOHN D JONES John D JONES Date of Receipt Mailing Address 3662 REDWOOD C Image: C Image: C City State Zip Code Image: C Image: C Mailing Address 3562 REDWOOD C Image: C Image: C Image: C City State Zip Code Image: C Image: C Image: C Name of Employer Occupation Occupation Image: C Image: C Image: C Image: C Image: C Name of Employer Occupation VP Govt Rel P/R Deduction (\$96.00 Bi-V P/R Deduction (\$96.00 Bi-V </th <th>2012 2012 19479128399 this Period 50.00</th>	2012 2012 19479128399 this Period 50.00
UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. BRIAN JEFFREY Mailing Address 9 RIMROCK City State Zip Code IRVINE CA 92603 FEC ID number of contributing federal political committee. C Transaction ID : PR211 Name of Employer Occupation P/R Deduction (\$25.00 Bi-N United HealthCare Services Inc VP Network Contracting P/R Deduction (\$25.00 Bi-N Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Bi-N B. JOHN D JONES Date of Receipt Mailing Address 3562 REDWOOD C 31 City State Zip Code IRVINE CA 92606 FEC ID number of contributing federal political committee. Date of Receipt Mailing Address 3562 REDWOOD C 0000 City State Zip Code IRVINE CA 92606 FEC ID number of contributing federal political committee. C Name of Employer Occupation VP Govt Rel P/R Deduction (\$96.00 Bi-N Receipt For: Aggr	2012 19479128399 this Period 50.00
A. BRIAN JEFFREY Date of Receipt Mailing Address 9 RIMROCK 08 31 City State Zip Code IRVINE CA 92603 FEC ID number of contributing federal political committee. C Amount of Each Receipt Name of Employer Occupation VP Network Contracting United HealthCare Services Inc VP Network Contracting P/R Deduction (\$25.00 Bi-N Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Bi-N Other (specify) ▼ State Zip Code City State Zip Code Gity State Zip Code City State Zip Code Gity State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation United HealthCare Services Inc VP Govt Rel Receipt For: Occupation United HealthCare Services Inc VP Govt Rel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	2012 19479128399 this Period 50.00
City State Zip Code IRVINE CA 92603 FEC ID number of contributing federal political committee. C Name of Employer Occupation United HealthCare Services Inc VP Network Contracting Receipt For: Other (specify) ▼ Primary General Other (specify) Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Bi-N B. JOHN D JONES Mailing Address 3562 REDWOOD Date of Receipt City State Zip Code IRVINE CA 92606 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation VP Govt Rel Aggregate Year-to-Date ▼ P/R Deduction (\$96.00 Bi-N P/R Deduction (\$96.00 Bi-N	2012 19479128399 this Period 50.00
IRVINE CA 92603 FEC ID number of contributing federal political committee. C Amount of Each Receipt Name of Employer Occupation P/R Deduction (\$25.00 Bi-N United HealthCare Services Inc VP Network Contracting P/R Deduction (\$25.00 Bi-N Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Bi-N Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Bi-N B. JOHN D JONES Date of Receipt Date of Receipt City State Zip Code Transaction ID : PR211 IRVINE CA 92606 Amount of Each Receipt FEC ID number of contributing federal political committee. C Occupation Name of Employer Occupation Occupation P/R Deduction (\$96.00 Bi-N United HealthCare Services Inc VP Govt Rel P/R Deduction (\$96.00 Bi-N Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$96.00 Bi-N	this Period 50.00 Weekly)
federal political committee. U Name of Employer Occupation United HealthCare Services Inc VP Network Contracting Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name (Last, First, Middle Initial) Date of Receipt Date of Receipt 08 / 31 City State Zip Code IRVINE CA 92606 FEC ID number of contributing federal political committee. C Name of Employer Occupation United HealthCare Services Inc VP Govt Rel Receipt For: Ofther (specify) ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Weekly)
United HealthCare Services Inc VP Network Contracting Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name (Last, First, Middle Initial) Date of Receipt JOHN D JONES Date of Receipt Mailing Address 3562 REDWOOD 731 City State Zip Code IRVINE CA 92606 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation United HealthCare Services Inc VP Govt Rel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	
B. JOHN D JONES Date of Receipt Mailing Address 3562 REDWOOD City State Zip Code IRVINE CA 92606 Transaction ID : PR211 FEC ID number of contributing federal political committee. C Amount of Each Receipt Name of Employer Occupation VP Govt Rel Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$96.00 Bi-W	YYYYY
City State Zip Code Transaction ID : PR211 IRVINE CA 92606 Amount of Each Receipt FEC ID number of contributing federal political committee. C Amount of Each Receipt Name of Employer Occupation VP Govt Rel Name of Employer Occupation VP Govt Rel Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$96.00 Bi-V) Other (specify) ▼ 1728.00 P/R Deduction (\$96.00 Bi-V)	
FEC ID number of contributing federal political committee. C Imount of Each necespt Name of Employer Occupation VP Govt Rel Name of Employer Occupation VP Govt Rel Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$96.00 Bi-V) Other (specify) ▼ 1728.00 P/R Deduction (\$96.00 Bi-V)	
United HealthCare Services Inc VP Govt Rel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1728.00	192.00
Primary General Other (specify) ▼ P/R Deduction (\$96.00 Bi-V	
	Veekly)
Full Name (Last, First, Middle Initial) C. MARK C KNUTSON Date of Receipt	
Mailing Address 13102 PALOMAR WAY 08 31	2012
CityStateZip CodeTransaction ID : PR211NORTH TUSTINCA92705Amount of Each Receipt	
FEC ID number of contributing federal political committee.	30.00
Name of Employer Occupation	
United HealthCare Services Inc VP Customer Service	
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00	Weekly)
SUBTOTAL of Receipts This Page (optional)	272.00

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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.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)	
Α.	Full Name (Last, First, Middle Initial) SANDY M LUEDKE			Date of Receipt
	Mailing Address 1208 COPRINUS DR		7.0.1	M = M / D = D / Y = Y = Y = Y Y 08 31
	City GREEN BAY	State WI	Zip Code 54313	Transaction ID : PR2119482228399
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation IT Database Aggregate		P/R Deduction (\$15.00 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) HEATHER M MACE-MEADOR			Date of Receipt
	Mailing Address 13531 CARLTON OAKS			08 31 2012
	City SAN ANTONIO	State TX	Zip Code 78232	Transaction ID : PR2119482528399 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 Dir Medical		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
С.	Full Name (Last, First, Middle Initial) JEFFREY S MASON	l		Date of Receipt
	Mailing Address 5670 SHEMIRAN ST			08 31 2012
	City LA VERNE	State CA	Zip Code 91750	Transaction ID : PR2119483028399
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	United HealthCare Services Inc	Sr Medical	Director	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00	P/R Deduction (\$15.00 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			100.00

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check onl	y one)					
ILIVIIZED NECEIPIS		for each category of the Detailed Summary Page	X 11a	11b	11c	12			
Any information copied from such Reports a	and Statements ma	w not be sold or used by any p	erson for the	purpose of s	15 solicitina	16 contribut	17 tions		
or for commercial purposes, other than usin									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	Jnited for Health)							
Full Name (Last, First, Middle Initial) BENITO M MIRANDA			Date o	f Receipt					
Mailing Address PO BOX 1522			м - м 08	/ D D 31	/ Y	ү ү 2012	Y		
City	State	Zip Code	Trans	saction ID : I	PR21194	8422839	9		
LOMITA	CA	90717	Amoun	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C				7	24	.00		
Name of Employer	Occupation								
United HealthCare Services Inc	Medicare In	dividual Sales Rep							
Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 216.00	P/R Deduction (\$12.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) B. KEITH E NYGARD			Date o	f Receipt					
Mailing Address 1139 E OCEAN BOULE #106			08	/ D D 31	/ Y	у у 2012	Y		
	State CA	Zip Code		action ID : F			9		
	CA	90802	Amoun	t of Each Re	eceipt thi	s Period			
FEC ID number of contributing federal political committee.	C					40.	.00		
Name of Employer United HealthCare Services Inc	Occupation Compliance								
Receipt For:	· _ ·	Year-to-Date ▼							
Primary General Other (specify) ▼		360.00	P/R Ded	uction (\$20.0	0 Bi-We	ekly)			
Full Name (Last, First, Middle Initial) C. TRACY L OLLMANN-WAGNE	ER		Date o	f Receipt					
Mailing Address 2839 TIMBER LANE			08	/ D D 31	/ Y	y y 2012	Y		
City	State	Zip Code	Trans	saction ID : I	PR21194	8522839	9		
GREEN BAY	WI	54313	Amoun	t of Each Re	eceipt thi	s Period			
FEC ID number of contributing federal political committee.	C				7	30	.00		
Name of Employer	Occupation								
United HealthCare Services Inc	Mgr Traffic/	Workforce							
	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		270.00	P/R Dec	duction (\$15.0	00 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (option: TOTAL This Period (last page this line nur	,	•		· · · · ·		94.	00		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports a	and Statements ma	ay not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions						
or for commercial purposes, other than usin	ig the name and a	ddress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	Jnited for Health)							
Full Name (Last, First, Middle Initial) CYNTHIA ANN OTTO			Date of Receipt						
Mailing Address 1855 O LEARY ROAD			08 31 2012						
City NEENAH	State WI	Zip Code 54956	Transaction ID : PR2119485428399 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		30.00						
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Assoc Dir C Aggregate	Case Mgmt Year-to-Date ▼	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) B. LYNDA A PAXSON	L	270.00							
Mailing Address 3924 E GARNET PL			Date of Receipt						
City HIGHLANDS RANCH	State CO	Zip Code 80126	Transaction ID : PR2119485828399 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		50.00						
Name of Employer United HealthCare Services Inc	Occupation Sr Field Acc	count Manager							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	P/R Deduction (\$25.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) C. DIANA S PETE			Date of Receipt						
Mailing Address 9010 MORNINGSTAR E	DRIVE		08 31 2012						
City SUGAR LAND	State TX	Zip Code 77479	Transaction ID : PR2119486328399 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		24.00						
Name of Employer	Occupation	I							
United HealthCare Services Inc	Dir Utilizatio	on Mgmt	_						
Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 216.00	P/R Deduction (\$12.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)		104.00						
TOTAL This Period (last page this line nur	mber only)								

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	an using the name and at		
UnitedHealth Group Inc	corporated PAC (L	Inited for Health)	
Full Name (Last, First, Middle Init A. MICHELLE LYNN PETERS			Date of Receipt
Mailing Address 1128 COUNTRY	SIDE DR		M M / D D / Y Y Y Y Y 08 31 2012
City	State	Zip Code	Transaction ID : PR2119486428399
DE PERE	WI	54115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer	Occupation		
United HealthCare Services Inc	Dir Actuarial	Services	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		270.00	P/R Deduction (\$15.00 Bi-Weekly)
Other (specify)		270.00	1
Full Name (Last, First, Middle Init B. AUSTIN T PITTMAN	jal)		Date of Receipt
Mailing Address 14 LOCH RIDGE	DRIVE		08 31 2012
City	State	Zip Code	Transaction ID : PR2119486728399
GREENSBORO	NC	27408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		270.00
Name of Employer	Occupation		
United HealthCare Services Inc	President Ne	etworks	
Receipt For:	Aggregate `	Year-to-Date ▼	
Other (specify) ▼		, 2430.00	P/R Deduction (\$135.00 Bi-Weekly)
Full Name (Last, First, Middle Initi CYNTHIA L POLICH	ial)		Date of Receipt
Mailing Address 3401 E VIA PALC	DMITA		M M / D D / Y Y Y Y 08 31 2012
City	State	Zip Code	Transaction ID : PR2119486828399
TUCSON	AZ	85718	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer	Occupation		
United HealthCare Services Inc	M&R Presid	ent	
Receipt For:	Aggregate	Year-to-Date 🔻	
Other (specify)		1800.00	P/R Deduction (\$100.00 Bi-Weekly)
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
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Any information copied from such Reports an or for commercial purposes, other than using			erson for t	X 11a 11b 11c 12 13 14 15 16 1						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora										
Full Name (Last, First, Middle Initial) A. SHARON A RICCIUTI			Date	e of F	Receipt					
Mailing Address 55 PERENNIAL										
City IRVINE	State CA	Zip Code 92603			tion ID	: PR21194	48792839			
FEC ID number of contributing federal political committee.	С				7		40	0.00		
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Clinical									
Primary General Other (specify) ▼		360.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. MARILYNN D STYERS			Date	e of F	Receipt					
Mailing Address 6485 WAYFINDERS CT	01-1-1	7. 0.4						Y		
City CARLSBAD	State CA	Zip Code 92009						-		
FEC ID number of contributing federal political committee.	С							_		
Name of Employer United HealthCare Services Inc	Occupation VP, Medica	I & Clinical Ops								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R [Deduc	tion (\$20	0.00 Bi-We	∍ekly)			
Full Name (Last, First, Middle Initial) C. CHERYL TANIGAWA MD			Date	e of F	Receipt					
Mailing Address 5598 NAPLES CANAL								Y		
City LONG BEACH	State CA	Zip Code 90803				-		-		
FEC ID number of contributing federal political committee.	С			ount o	ir Each i	Receipt th				
Name of Employer United HealthCare Services Inc	Occupation	n prise Health Svcs								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 900.00	P/R I	Deduc	tion (\$50	0.00 Bi-We	eekly)			
SUBTOTAL of Receipts This Page (optional)					7		180.	.00		
TOTAL This Period (last page this line numb	per only)				7					

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ITEMIZED REC			Use separate schedule(s)	(check	only o	one)					
			for each category of the Detailed Summary Page			11b	11c	12			
Any information copie	d from such Reports ar	nd Statements ma	y not be sold or used by any	-	13 14 15 16 for the purpose of soliciting contribulions from such comm Date of Receipt M 31 2012 Transaction ID : PR21194916283 Amount of Each Receipt this Period Date of Receipt M 13 15 P/R Deduction (\$15.00 Bi-Weekly) Date of Receipt M 31 2012 Transaction ID : PR21194920283 Amount of Each Receipt this Period 08 31 2012 Transaction ID : PR21194920283 Amount of Each Receipt this Period 16 9/R Deduction (\$96.00 Bi-Weekly) 16 Date of Receipt 16 08 31 2012 Transaction ID : PR21194920283 Amount of Each Receipt this Period 08 31 2012 Transaction ID : PR21194926283 Amount of Each Receipt this Period 08 31 2012 Transaction ID : PR21194926283 Amount of Each Receipt this Period 08 31 2012 Transaction ID : PR21194926283 Amount of Each Receipt this Period <		-	17 tions			
or for commercial pur	poses, other than using										
NAME OF COMMI		ated PAC (l	Jnited for Health)								
Full Name (Last, F CHERYL A TH				Date	e of F	leceipt					
Mailing Address 2	22 FOREST DR							2012	Y		
City SOBIESKI		State WI	Zip Code 54171						9		
FEC ID number of federal political cor	Ũ	C				7			.00		
Name of Employer United HealthCare		Occupation Dir Complia	nce								
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 270.00	P/R [P/R Deduction (\$15.00 Bi-Weekly)						
Full Name (Last, F B. STEVEN M TI		·		Date	e of F	leceipt					
	2331 COUNTRY LANE	21.1						у у 2012	Y		
City SANTA ANA		State CA	Zip Code 92705						-		
FEC ID number of federal political cor	Ũ	C			ount o	T Each I	Receipt ti	192.			
Name of Employer United HealthCare		Occupation VP Regulate									
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 1728.00	P/R [)educ	tion (\$96	5.00 Bi-W	eekly)			
Full Name (Last, F C. SUSAN VAN				Date	e of F	leceipt					
Mailing Address M	/313 GOLDEN GLOW R	D						2012	Y		
City KAUKAUNA		State WI	Zip Code 54130								
FEC ID number of federal political cor	Ũ	С				7			0.00		
Name of Employer United HealthCare		Occupation Site Dir Mee	dicare Inside Sales								
Receipt For: Primary Other (specif	General y) ▼		Year-to-Date ▼ 720.00	P/R I	Deduc	tion (\$40).00 Bi-W	eekly)			
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	tor each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using th	Statements may not be sold or used by an e name and address of any political commi	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. SCOTT B WESTPHAL		Date of Receipt
Mailing Address 4536 ROCKY RUN LN		08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OCONTO	State Zip Code WI 54153	Transaction ID : PR2119493228399
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation Dir Actuarial Services	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 207.72	P/R Deduction (\$11.54 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. LINDA D DAUGHERTY		Date of Receipt
Mailing Address 15442 NORTH 19TH WAY		08 31 2012
City PHOENIX	StateZip CodeAZ85022	Transaction ID : PR2119493528399 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 Associate General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 13901 MAUVE DRIVE		08 31 2012
City SANTA ANA	State Zip Code CA 92705	Transaction ID : PR2119494128399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
United HealthCare Services Inc	VP Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$25.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this 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
	y information copied from such Reports and S for commercial purposes, other than using the			
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
Α.	Full Name (Last, First, Middle Initial) GEORGE M YOUNG			Date of Receipt
	Mailing Address 36296 N 98TH WAY			M = M / D = D / Y = Y = Y = Y Y 08 31 2012
	City SCOTTSDALE	State AZ	Zip Code 85262	Transaction ID : PR2119494428399
	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 Regional Ex Aggregate		_
	Primary General Other (specify) ▼		270.00	P/R Deduction (\$15.00 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 380 LEAF STREET			08 31 2012
	City ORONO	State MN	Zip Code 55356	Transaction ID : PR2133132428399 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 President P	S Labor & Trust	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1800.00	P/R Deduction (\$100.00 Bi-Weekly)
с.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 831 RATLEY ROAD			08 31 2012
	City WEST SUFFIELD	State CT	Zip Code 06093	Transaction ID : PR2133132528399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.00
	Name of Employer	Occupation		
	United HealthCare Services Inc	Dir Claims		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 216.00	P/R Deduction (\$12.00 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			254.00

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	or commercial purposes, other than using the vame of COMMITTEE (In Full) UnitedHealth Group Incorporate Full Name (Last, First, Middle Initial) DANIEL M CUMMINGS Mailing Address 1929 FAIRMOUNT AVE City SAINT PAUL FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) BROR O HULTGREN Mailing Address 408 22ND ST City GOLDEN FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc Receipt For: City GOLDEN FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc Receipt For: City GOLDEN FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc Receipt For: City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc City City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc City City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc City City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc City City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc Receipt For: City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc Receipt For: City EDINA FEC ID number of contributing ederal political committee. Vame of Employer United HealthCare Services Inc Receipt For: City EDINA FEC ID number of contributing EDINA FEC ID number o		for each category of the Detailed Summary Page		K 11a		11b	11c	12	<u> </u>
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	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)							
Α.	Full Name (Last, First, Middle Initial) DANIEL M CUMMINGS				Date of	Re	ceipt			
	Mailing Address 1929 FAIRMOUNT AVE				м м 08	/	D D D	/ Y	2012	Y
	City SAINT PAUL	State MN	Zip Code 55105	_					13262839 iis Period	9
	FEC ID number of contributing federal political committee.	С					,	7	30	.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Account								
		Aggregate	Year-to-Date ▼ 270.00]	P/R Dedu	uctic	on (\$15.0	0 Bi-We	eekly)	
	Full Name (Last, First, Middle Initial) BROR O HULTGREN				Date of	Re	ceipt			
	Mailing Address 408 22ND ST	01.1	7.0.1		M M 08	/	D D 31	/ Y	2012	Y
		State CO	Zip Code 80401				-		13322839	9
	FEC ID number of contributing federal political committee.	C			Amount	or	Each Re	ceipt th	iis Period 76	92
	Name of Employer United HealthCare Services Inc	Occupation VP Operation								
		Aggregate	Year-to-Date ▼ 692.28] f	P/R Dedu	uctio	n (\$38.4	6 Bi-We	ekly)	
	Full Name (Last, First, Middle Initial) ALLEN D MILLER				Date of	Re	ceipt			
	Mailing Address 6209 CRESCENT DRIVE				м м 08	/	D D 31	/ Y	у у 2012	Y
	City EDINA	State MN	Zip Code 55436						13362839 iis Period	9
	FEC ID number of contributing federal political committee.	С					,	7	70	.00
	Name of Employer United HealthCare Services Inc	Occupation Regional Ex	kecutive Director							
	Primary General	Aggregate	Year-to-Date ▼ 630.00] '	P/R Dedi	uctio	on (\$35.0	00 Bi-We	eekly)	
s	JBTOTAL of Receipts This Page (optional)			•			7		176.	92
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Use separate schedule(s)

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for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any p the name and address of any political committe								
		e to solicit contributions from such committee.							
	ated PAC (United for Health)								
Full Name (Last, First, Middle Initial) SUSAN C MORISATO		Date of Receipt							
Mailing Address 238 ARDMORE ROAD		M = M / D = D / Y = Y = Y Y 08 31 2012							
City DES PLAINES	State Zip Code IL 60016	Transaction ID : PR2133133828399							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period							
Name of Employer United HealthCare Services Inc	Occupation President Insurance Solutions								
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3044.00	P/R Deduction (\$193.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) KIMBERLY ALLENE NETTLETO	N	Date of Receipt							
Mailing Address 5003 DARNELL		08 31 2012							
City HOUSTON	StateZip CodeTX77096	Transaction ID : PR2133133928399 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	30.00							
Name of Employer United HealthCare Services Inc	Occupation Dir General Management								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	P/R Deduction (\$15.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial)		Date of Receipt							
Mailing Address 303 ELMWOOD PLACE V		08 31 2012							
City MINNEAPOLIS	State Zip Code MN 55419	Transaction ID : PR2133134228399							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 384.60							
Name of Employer	Occupation								
United HealthCare Services Inc	SVP Financial Plng & Analysis								
Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify)	3461.40								
UBTOTAL of Receipts This Page (optional)	800.60							

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

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			Detailed Summary Page		1 1a		11b	11c		12	_
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	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)								
	Full Name (Last, First, Middle Initial) DIANE M SCHIMMELBUSCH				Data af						
Α.	Mailing Address 2203 RIVER FALLS DRIVE				Date of			/ Y	Y	Y	Y
					08		31		2	012	
	City	State	Zip Code		Trans	acti	ion ID : I	PR2133	134(62839	9
	KINGWOOD	ТХ	77339	_	Amount	of	Each Re	eceipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С				_	7	7		50	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Dir Medical	& Clinical Ops								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		450.00] F	P/R Ded	uctio	on (\$25.0	00 Bi-We	eekl	y)	
	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt				
	Mailing Address 6069 WEATHERED OAK CT				м м 08	/	31	/ Y		y)12	Y
	City	State	Zip Code		Trans	acti	on ID : F	PR2145	7284	128399)
	WESTERVILLE	OH	43082		Amount	of	Each Re	eceipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С						7		76.	92
	Name of Employer United HealthCare Services Inc	Occupation Health Plan									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.28	P	/R Ded	uctio	on (\$38.4	6 Bi-We	eekly	<i>y</i>)	
	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt				
	Mailing Address PO BOX 704				м м 08	1	D D 31	/ Y)12	Y
	City	State NY	Zip Code	_			ion ID : I				9
	HUNTINGTON		11743	_	Amount	of	Each Re	eceipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С				_	,	7		76	.92
	Name of Employer	Occupation									
	United HealthCare Services Inc	Dir IT Proje	ct Mgmt								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify) ▼		692.28] ^F	P/R Ded	ucti	on (\$38.4	46 Bi-W	eekl	y)	
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PAGE 54 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check on	y one)			
ILWIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	
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or for commercial purposes, other than us							
NAME OF COMMITTEE (In Full)							
> UnitedHealth Group Incorp	orated PAC (I	United for Health)					
Full Name (Last, First, Middle Initial)							
A. WAYNE MILLER				f Receip			
Mailing Address 19521 SIERRA SOTO	RD		08		31 / Y	2012	Y
City	State	Zip Code			D : PR2145		3
IRVINE	CA	92603	Amoun	t of Eacl	h Receipt th	nis Period	
FEC ID number of contributing federal political committee.	С					40.	00
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Name of Employer	Occupation	ı t Relationships					
United HealthCare Services Inc Receipt For:		Year-to-Date ▼					
Primary General	Aggregate		P/R Dec	luction (\$	20.00 Bi-W	eekly)	
Other (specify)		360.00					
Full Name (Last, First, Middle Initial)							
B. LEAH C RUMMEL			Date o	f Receip	t		
Mailing Address 12100 TRAUTWEIN R	OAD		M			Y Y	Y
City	State	Zip Code	08		31	2012	
AUSTIN	TX	78737			<u>D : PR2145</u> h Receipt th		,
FEC ID number of contributing federal political committee.	С				· · ·	30.	00
Name of Employer	Occupation	1					
United HealthCare Services Inc	Dir Govt Re	el se					
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		270.00	P/R Dec	luction (\$	15.00 Bi-We	∍ekly)	
Full Name (Last, First, Middle Initial) C. MICHAEL P SCHWARZ			Date o	f Receip	t		
Mailing Address 13935 WOODRIDGE F	PATH		08		D / Y 31	2012	Y
City	State MN	Zip Code			D : PR2145		9
SAVAGE	IVIIN	55378	Amoun	t of Eacl	h Receipt th	nis Period	
FEC ID number of contributing federal political committee.	C			,		70.	.00
Name of Employer	Occupation						
United HealthCare Services Inc Receipt For:	I	I Management	_				
Primary General	Aggregate	Year-to-Date ▼	P/R Dec	luction (§	35.00 Bi-W	eekly)	
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PAGE 55 OF

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ILWIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a		11b	11c	12				
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor											
Full Name (Last, First, Middle Initial) A. DANNETTE L SMITH			Date	of Re	ceipt						
Mailing Address 5414 BYSCANE LANE			08	08 31 _ 2012 _							
City MINNETONKA	State MN	Zip Code 55345					72992839 is Period	9			
FEC ID number of contributing federal political committee.	С				7	7	386	.00			
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		General Counsel Year-to-Date ▼ 3474.00	P/R De	eductio	on (\$193	3.00 Bi-W	/eekly)				
Full Name (Last, First, Middle Initial) B. RANDALL SMITH Mailing Address 20607 BROADWATER DF	RIVE		Date	M /	ceipt	/ Y	y y 2012	Y			
City LAND O LAKES	State FL	Zip Code 34638	Trar	nsacti	on ID :		2012 2002839 is Period	9			
FEC ID number of contributing federal political committee.	С				J	, eceipt in		.08			
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		Management Year-to-Date ▼ 207.72	P/R De	ductio	on (\$11.:	54 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) C. MARGARET W WEAR			Date	of Re	ceipt						
Mailing Address 44 TOPANGA			08		31	/ Y	2012	Y			
City IRVINE	State CA	Zip Code 92602					73022839 is Period	9			
FEC ID number of contributing federal political committee.	С				7	7	100	.00			
Name of Employer United HealthCare Services Inc	Occupation VP Actuary										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	P/R De	educti	on (\$50.	.00 Bi-We	ekly)				
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SCHEDULE A (FEC Form 3X) _ _ _ _ _ _

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	II Name (Last, First, Middle Initial) DAVID A SPIVACK ailing Address 37 HIDDEN TRAIL ty ty Stress CID number of contributing deral political committee. ame of Employer other (specify) Primary General Other (specify) II Name (Last, First, Middle Initial) URT C LEWIS ailing Address 961 RIVER FOREST DRIVE ty St AINEVILLE OC C ID number of contributing deral political committee. ailing Address 961 RIVER FOREST DRIVE ty St AINEVILLE OC C ID number of contributing deral political committee. ame of Employer ited HealthCare Services Inc KA N Acceipt For: Primary General Other (specify) II Name (Last, First, Middle Initial) CHRISTINE W GIBSON ailing Address 8516 29TH AVE N ty St EW HOPE M C ID number of contributing deral political committee. ailing Address 8516 29TH AVE N		Detailed Summary Page		11a 13		11b	11c		Г	17
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
A.	Full Name (Last, First, Middle Initial) DAVID A SPIVACK			[Date o	of Re	eceipt				
	Mailing Address 37 HIDDEN TRAIL				м м 08	/	D D 31	/ Y	201		
	City IRVINE	State CA	Zip Code 92603				i <mark>on ID : I</mark> Each Re				
	FEC ID number of contributing federal political committee.	С					7	,		384.6	0
	Name of Employer United HealthCare Services Inc	Occupation SVP Busine	ess Operations								
	Primary General	Aggregate	Year-to-Date ▼ 3461.40	P	/R Dec	ductio	on (\$192	30 Bi-V	Veekly))	
в.	Full Name (Last, First, Middle Initial) KURT C LEWIS			[Date o	of Re	eceipt				
	Mailing Address 961 RIVER FOREST DRIVE				M M 08	/	D D 31	/ Y	y 2012		
	City MAINEVILLE	State OH	Zip Code 45039				i on ID : I Each Re				
	FEC ID number of contributing federal political committee.	С						7		23.0	8
	Name of Employer United HealthCare Services Inc	Occupation KA VP Sale	s and Account Mgmt								
		Aggregate	Year-to-Date ▼ 207.72	P/	'R Dec	ductio	on (\$11.5	54 Bi-We	∍ekly)		
с.	Full Name (Last, First, Middle Initial) CHRISTINE W GIBSON				Date o	of Re	eceipt				
	Mailing Address 8516 29TH AVE N				м м 08	/	D D 31	/ Y	2012		1
	City NEW HOPE	State MN	Zip Code 55427	A			ion ID : Each Re				-
	FEC ID number of contributing federal political committee.	С					5			230.7	6
	Name of Employer	Occupation VP Strategi									
	Receipt For: Primary General Other (specify) ▼	-	Year-to-Date ▼ 2076.84	Р.	/R Dec	ducti	on (\$115	i.38 Bi-V	Veekly)	
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NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (Jnited for Health)						
Full Name (Last, First, Middle Initial) A. ANDREW M SLAVITT			Date	of Re	ceipt			
Mailing Address 5125 MIRROR LAKES DR	IVE		08	M /	31	/ Y	2012	Y
City	State	Zip Code		nsact		R22251	67428399	•
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Name of Employer	Occupation	l						
United HealthCare Services Inc	Business S	egment CEO						
	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		4500.00	P/R De	ductio	on (\$250.0	00 Bi-W	/eekly)	
Full Name (Last, First, Middle Initial) B. JEAN-FRANCOIS BEAULE			Date	of Re	ceipt			
Mailing Address 7 STRATFORD RD	_		08		D D 31	/ Y	y y 2012	Y
City	State CT	Zip Code					13628399)
FARMINGTON	U	06032	Amou	nt of	Each Re	ceipt th	is Period	
FEC ID number of contributing federal political committee.	C				y		115.	40
Name of Employer United HealthCare Services Inc	Occupation							
		Management	_					
Receipt For:	Aggregate	Year-to-Date ▼				D' M/-	-1.1.3	
Other (specify)		, 1038.60	P/R De	ductio	on (\$57.70) Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. NANCY S MACK			Date	of Re	ceipt			
Mailing Address 10140 26TH AVENUE NO	RTH		08		31	/ Y	2012	Y
City	State	Zip Code	Trai	nsact	ion ID : P	R22258	31842839	Э
PLYMOUTH	MN	55441	Amou	nt of	Each Re	ceipt th	is Period	
FEC ID number of contributing federal political committee.	С				7	7	30	00
Name of Employer	Occupation	1						
United HealthCare Services Inc	Dir IT							
Receipt For:	Aggregate	Year-to-Date ▼				_		
Other (specify)		270.00	P/R De	ducti	on (\$15.0	0 Bi-W€	ekly)	
SUBTOTAL of Receipts This Page (optional)							645.4	40
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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			erson for the purpose of soliciting contributions to solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	United for Health)	
Α.	Full Name (Last, First, Middle Initial) MICHAEL MCGUIRE			Date of Receipt
	Mailing Address 437 DRURY LANE	State	Zip Code	08 31 2012
	WYCKOFF	NJ	07481	Transaction ID : PR2225818828399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation Health Plar Aggregate		_
	Primary General Other (specify) ▼		360.00	P/R Deduction (\$20.00 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) ERIC S RANGEN			Date of Receipt
	Mailing Address 15348 RED OAKS ROAD SE			08 31 2012
	City PRIOR LAKE	State MN	Zip Code 55372	Transaction ID : PR2225819328399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer United HealthCare Services Inc	Occupation SVP Chief	n Accounting Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40	P/R Deduction (\$192.30 Bi-Weekly)
С.	Full Name (Last, First, Middle Initial) JOHN D RYAN			Date of Receipt
	Mailing Address 45 WESTMORELAND LN			08 31 2012
	City NAPERVILLE	State IL	Zip Code 60540	Transaction ID : PR2225819628399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.92
	Name of Employer	Occupation	1	
	United HealthCare Services Inc	RVP Client	Mgmt & Svc	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$38.46 Bi-Weekly)
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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 (l	United for Health)	
Α.	Full Name (Last, First, Middle Initial) ROY THOMAS SAILOR			Date of Receipt
	Mailing Address 276 COYOTE WILLOW DRIV			08 / D D / Y Y Y Y Y 08 31 2012
	City COLORADO SPRINGS	State CO	Zip Code 80921	Transaction ID : PR2225819728399
	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) ▼		ivc Acct Mgt Year-to-Date ▼ 1384.56	P/R Deduction (\$76.92 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) MICHAEL LEE CORNE			Date of Receipt
	Mailing Address 12642 CHIEFS COURT			08 31 2012
	City FISHERS	State IN	Zip Code 46037	Transaction ID : PR2231346928399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer Golden Rule Financial Corp.	Occupation VP Regulat		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
с.	Full Name (Last, First, Middle Initial) KAREN A DIPALMO			Date of Receipt
	Mailing Address 7533 PRAIRIE VIEW DR			08 31 2012
	City INDIANAPOLIS	State IN	Zip Code 46256	Transaction ID : PR2231347228399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer	Occupation	1	
	Golden Rule Financial Corp.	Dir Network	k Programs	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 540.00	P/R Deduction (\$30.00 Bi-Weekly)
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			Detailed Summary Page	X	11a		11b		11c		12	
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)									
	Full Name (Last, First, Middle Initial) SUSAN A FOWLER			1	Date of	Re	eceip	t				
	Mailing Address 4396 CREEKSIDE PASS				м м 08	/		D 31	/ Y	Y 20	ү 12	Y
	City	State	Zip Code		Trans	acti	ion I	D : P	R2231:	3497	28399)
	ZIONSVILLE	IN	46077	/	Amount	t of	Eac	h Re	ceipt th	is Pe	eriod	
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	Name of Employer	Occupation										
	Golden Rule Financial Corp.	VP UHO Sa	lles									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify)		270.00	P.	/R Ded	uctio	on (\$	515.0	0 Bi-We	ekly)	
	Full Name (Last, First, Middle Initial) DONALD M MUDGETT				Date of	Re	ceip	t				
	Mailing Address 8131 LAKE POINT WAY				м м 08	/		31	/ Y	20 ⁻		Y
	City	State	Zip Code		Trans	acti	on I	D : P	R22313	35192	28399)
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	FEC ID number of contributing federal political committee.	С					7		7		28.	00
	Name of Employer Golden Rule Financial Corp.	Occupation Assoc Dir G	eneral Management									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/	'R Dedi	uctio	on (\$	514.0) Bi-We	ekly)	
).	Full Name (Last, First, Middle Initial) MICHAEL R CONNLY				Date of	Re	eceip	t				
	Mailing Address 570 MONTCALM PL				м м 08	1		о 31	/ Y	ү 20	ү 12	Y
	City SAINT PAUL	State MN	Zip Code 55116						R2247 ceipt th			•
	FEC ID number of contributing federal political committee.	С					7				200.	00
	Name of Employer	Occupation		_								
	United HealthCare Services Inc	Chief Tech	nology Officer									
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		1800.00	P	/R Ded	ucti	on (\$	\$100.	00 Bi-V	/eek	y)	
s	JBTOTAL of Receipts This Page (optional)						7		7		258.0	00

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	y information copied from such Reports and for commercial purposes, other than using the			erson for	the p		ose of	soliciti		ontribut	tions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) JOSEPH R CARCIONE JR			Da	ite of	Ree	ceipt				
	Mailing Address 11 CARRIAGE WAY				08	/	31) /		y y 2012	Y
	City WHITE PLAINS	State NY	Zip Code 10605	Transaction ID : PR2247626 Amount of Each Receipt this							9
	FEC ID number of contributing federal political committee.	С					,	. ,		115	.40
	Name of Employer United HealthCare Services Inc Receipt For:	ector									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1038.60	P/R	Dedu	ictic	on (\$57	.70 Bi-\	Veeł	dy)	
в.	Full Name (Last, First, Middle Initial) KEVIN DAVID KANTOLA			Da	ite of	Ree	ceipt				
	Mailing Address 7031 HALSTEAD DRIVE	Otata	7. 0.1		08	/	31) /		2012	Y
	City MINNETRISTA	State MN	Zip Code 55364				-	PR224 Receipt			9
	FEC ID number of contributing federal political committee.	С		iount		,	,	tino		.00	
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation VP, IT									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	P/R	Dedu	ctio	n (\$39	.00 Bi-V	Veek	ly)	
	Full Name (Last, First, Middle Initial) DENNIS P O'BRIEN			Da	ite of	Ree	ceipt				
	Mailing Address 61 LOUGHLIN AVE				08	/	31			2012	Y
	City COS COB	State CT	Zip Code 06807					PR224 Receipt			9
	FEC ID number of contributing federal political committee.	С					,	. ,		115	.40
	Name of Employer United HealthCare Services Inc	Occupation RVP Netwo									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1038.60	P/R	Dedu	uctic	on (\$57	7.70 Bi-\	Veel	dy)	
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check o	only o	ne)	<u> </u>					
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NAME OF COMMITTEE (In Full)	prated PAC (I	United for Health)									
Full Name (Last, First, Middle Initial) A. JEFFERY RICHARD VERNEY			Date	of Re	eceipt						
Mailing Address 266 WESTLEDGE ROA	D		08		31	/ Y	2012	Y			
City WEST SIMSBURY	State CT	Zip Code 06092	Tra	nsact	tion ID : F		62742839				
FEC ID number of contributing federal political committee.	C				7		11:	5.40			
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		I Management Year-to-Date ▼ 1038.60	 P/R D	educt	ion (\$57.7	′0 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) B. DARRELL BROOKS Mailing Address 425 QUEENSLAND LAN	NE NORTH		Date	M /	eceipt	/ Y	Y Y	Ŷ			
City PLYMOUTH	State Zip Code MN 55447				31 ion ID : P						
FEC ID number of contributing federal political committee.	С	33447	Amo	unt of	Each Re	ceipt th		5.40			
Name of Employer United HealthCare Services Inc Receipt For: Primary General		tion Technology Year-to-Date ▼	 	educti	on (\$57.7	0 Bi-We	eklv)				
C. SANJAY GARODIA	L	1038.60	Data	of P	eceipt						
Mailing Address 282 MIDDAUGH				M	31	/ Y	2012	Y			
City CLARENDON HILLS	State IL	Zip Code 60514			tion ID : F		62782839				
FEC ID number of contributing federal political committee.	С			unt of	Each Re	ceipt th		6.92			
Name of Employer United HealthCare Services Inc Receipt For:	Occupation COO, IBS										
Primary General Other (specify)	Aggregate Year-to-Date ▼ 692.28				P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nu					т. т. т.	7	307	7.72			

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TEMIZED RECEIPTS	Use separate schedule(s)	(check only one)	
ILEWIIZED KECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 verson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	-		
UnitedHealth Group Incorport	orated PAC (l	Jnited for Health)	
Full Name (Last, First, Middle Initial) A. DANIEL L OHMAN			Date of Receipt
Mailing Address 8970 MOOR PARK RUI	N		08 31 2012
City	State	Zip Code	Transaction ID : PR2247628028399
DULUTH	GA	30097	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		53.84
Name of Employer	Occupation		
United HealthCare Services Inc	Region CEC)	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		484.56	P/R Deduction (\$26.92 Bi-Weekly)
		7 7 7	1
Full Name (Last, First, Middle Initial) B. JEFFREY J CRUMBAUGH			Date of Receipt
Mailing Address 226 25TH ST DR SE			08 31 2012
City	State	Zip Code	Transaction ID : PR2259635228399
CEDAR RAPIDS	IA	52403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer United HealthCare Services Inc	Occupation M&R Sales		
Receipt For:		Year-to-Date ▼	
Primary General	Aggregate		P/R Deduction (\$14.00 Bi-Weekly)
Other (specify)		252.00	
Full Name (Last, First, Middle Initial) C. JOHN M PRINCE			Date of Receipt
Mailing Address 546 HARRINGTON RO	AD		M M / D D / Y Y Y Y 08 31 2012
City	State	Zip Code	Transaction ID : PR2259738428399
WAYZATA	MN	55391	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	Market Gro	up CFO	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		1746.00	P/R Deduction (\$97.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (option			275.84
TOTAL This Period (last page this line nu	mber only)		

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		Use separate schedule(s)	(check only one)								
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NAME OF COMMITTEE (In Full)	,										
UnitedHealth Group Incorpor	rated PAC (United for Health)									
Full Name (Last, First, Middle Initial) CHRISTOPHER L CRONN			Date	of R	eceipt						
Mailing Address 507 PRESSLER #3128			M - 08		31) / Y	ү ү 2012	Y			
City AUSTIN	State TX	Zip Code 78703				PR2270					
		10100	Amou	int of	Each F	Receipt th	iis Period				
FEC ID number of contributing federal political committee.	C			-	7	7	76	6.92			
Name of Employer	Occupation										
United HealthCare Services Inc	Govt Rel D		_								
Receipt For:	Aggregate	Year-to-Date ▼			· (\$00	40 D' M/	I. I. A				
Other (specify) ▼		692.28		educt	ion (\$38	.46 Bi-We	еекіу)				
Full Name (Last, First, Middle Initial) B. SIMON L STEVENS			Date	of R	eceipt						
Mailing Address 1716 EMERSON AVENU		Zip Code	08		31) / Y	у у 2012	Y			
	State MN	Transaction ID : PR2364863228399 Amount of Each Receipt this Period									
MINNEAPOLIS					Each F	leceipt th	iis Period				
FEC ID number of contributing federal political committee.	С			_	7	- J	217	.40			
Name of Employer United HealthCare Services Inc	Occupation										
Receipt For:		Health Group									
Primary General	Aggregate	Year-to-Date ▼		duct	on (\$10)						
Other (specify) ▼		4130.52	P/R De	auci	юп (ф 104	8.70 Bi-W	(eekiy)				
Full Name (Last, First, Middle Initial) C. JEANNE M DE SA			Date	of R	eceipt						
Mailing Address 3000 TILDEN STREET N	W #204-1		08		31) / Y	y y 2012	Y			
City	State	Zip Code	Tra	nsac	tion ID :	PR24023	31592839	99			
WASHINGTON	DC	20008	Amou	unt of	Each F	Receipt th	is Period				
FEC ID number of contributing federal political committee.	C				7	7	100).00			
Name of Employer	Occupatior	1									
United HealthCare Services Inc	VP Resear	ch									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		900.00	P/R D	educt	ion (\$50	.00 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optiona	l)				5	- 7	394	.32			
TOTAL This Period (last page this line num	ber only)				7						

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Any information copied from such Reports and a or for commercial purposes, other than using th	Statements may not be sold of any p	or used by any pe political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (United for H	lealth)	
Full Name (Last, First, Middle Initial) ANGELA DAWN KEPLEY CARRIER			Date of Receipt
Mailing Address 3219 PENINSULA DRIVE			08 / D D / Y Y Y Y 08 31 2012
City JAMESTOWN	State Zip Code NC 27282		Transaction ID : PR2402317728399
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation Dir Case Mgmt		_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	360.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. MARILYN LEVI-BAUMGARTEN			Date of Receipt
Mailing Address 4800 W 27TH ST			08 31 2012
City SAINT LOUIS PARK	StateZip CodeMN55416		Transaction ID : PR2402317928399 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 Dir General Management		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	360.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. JAKE LOGAN			Date of Receipt
Mailing Address 4826 EAST CALLE REDONI			08 31 2012
City PHOENIX	StateZip CodeAZ85018		Transaction ID : PR2402318228399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		-
United HealthCare Services Inc	Govt Rel Dir		
Receipt For:	Aggregate Year-to-Date ▼		
Other (specify)		450.00	P/R Deduction (\$25.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		•••••	130.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the puppose of soliciting contributions from such committee Solicit contributions from such committee NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial)	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b		11c	12	17			
VInitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) AMARA MCCAULEY Mailing Address 15916 MARSHFIELD DRIVE City State Zip Code TAMPA FL 33624 FEC. ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation Project Manager II Name of Employer Occupation Project Manager II Receipt For: Optimary General P/R Deduction (\$20.00 Bi-Weekly) Full Name (Last, First, Middle Initial) State Zip Code 31 2012 Full Name (Last, First, Middle Initial) State Zip Code 9 31 2012 Full Name (Last, First, Middle Initial) State Zip Code 9 31 2012 Full Name (Last, First, Middle Initial) State Zip Code 9 31 2012 Receipt For: Occupation Dir Business Process Propect Toate ▼ 9 31 2012 Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Printap 20000 7 2012	or for commercial purposes, other than using				or the		pose		soliciting	g contrib	utions			
A. MARIA MCCAULEY Date of Receipt Mailing Address 15916 MARSHFIELD DRIVE 08 31 2012 City State Zip Code Transaction ID : PR24023184289 FEC ID number of contributing federal political committee. C 40 Name of Employer Occupation P/R Deduction (\$20.00 Bi-Weekly) Primary General Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi-Weekly) Primary General Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi-Weekly) State Zip Code 31 2012 City State Zip Code 31 2012 City State Zip Code 31 2012 City State Zip Code 30 31 2012 City State Zip Code 30 31 2012 City State Zip Code 31 2012 Transaction ID : PR240231852839 Name of Employer Occupation Dir Business Process Proceipt 30 31 2012 Transaction ID : PR240231852839 Aggregate Year-to-Date ▼ P/R Deduction (\$15.00 Bi-Weekly)		ated PAC (I	Jnited for Health)											
City State Zip Code TAMPA FL 33624 FEC ID number of contributing federal political committee. C amount of Each Receipt this Period Name of Employer Occupation P/R Deduction (\$20.00 Bi-Weekly) United HealthCare Services Inc Sr Project Manager II Receipt For: Agregate Year-to-Date ▼ Primary General Other (specify) ▼ State State X MCGRATH Date of Receipt Mailing Address 5625 CHOWEN AVE S C City State Zip Code PR Deduction (\$15.00 Bi-Weekly) Transaction ID : PR240231852839 Amount of Each Receipt this Period 30 Name of Employer Occupation United HealthCare Services Inc Dir Business Process Receipt For: Aggregate Year-to-Date ▼ Pril Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Pril Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Pril Name (Last, First, Middle Initial) C City State Zip Code City State Zip Code Naming Address 360 STANLEY DRIVE				Date of Receipt										
TAMPA FL 33624 FEC 10 mumber of contributing federal political committee. C 40 Name of Employer Occupation Frencet Manager II Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Date of Receipt for: P/R Deduction (\$20.00 Bi-Weekly) STACY S MCGRATH Date of Receipt for: Primary General Occupation State Zip Code Transaction ID : FR240231852839 Amount of Each Receipt this Period Other (specify) ▼ State Zip Code Transaction ID : FR240231852839 Mailing Address 5625 CHOWEN AVE S Occupation Dir Business Process Primary Aggregate Year-to-Date ▼ Primary General Occupation Dir Business Process Primary Date of Receipt Primary General C Aggregate Year-to-Date ▼ Primary Date of Receipt Other (specify) ▼ State Zip Code Transaction ID : PR240232002839 Amount of Each Receipt this Period Primary General C General C Trans		IVE				1	D		/ Y		Y			
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GLASTONBURY CT 06033 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation CEO Specialty Benefits United HealthCare Services Inc CEO Specialty Benefits P/R Deduction (\$192.30 Bi-Weekly) Primary General P/R Deduction (\$192.30 Bi-Weekly)	Mailing Address 360 STANLEY DRIVE					/	D		/ Y		Y			
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Any information copied from such Reports and	Statements ma	ay not be sold or used by any pe	erson	13 for the	pur	14 pose	e of s	15 oliciting	g cont	6 ributi	ons			
or for commercial purposes, other than using th	ne name and a	ddress of any political committee	e to so	olicit co	ntrib	outio	ons fro	om such	h com	mitte	e.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	United for Health)												
Full Name (Last, First, Middle Initial) A. LORI SWEERE LILIENTHAL				Date o	f Re	eceip	pt							
Mailing Address 11826 GERMAINE TERRAC	E		M = M / D = D / Y = Y = Y Q 08 31 2012 1											
City	State	Zip Code		Trans	sact	ion	ID : P	R24023	32022	8399				
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Full Name (Last, First, Middle Initial) B. SHELLEY WIKE CRANLEY	1			Date o	f Re	eceip	pt							
Mailing Address 3801 MAURICE COURT				м м 08			31	/ Y	201		Y			
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LAS VEGAS	NV	89108		Amoun	t of	Ead	ch Re	ceipt th	nis Pe	riod				
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Name of Employer United HealthCare Services Inc	Occupation Dir Regulat													
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Full Name (Last, First, Middle Initial) C. DANIEL J WEAVER	<u>I</u>			Date o	f Re	eceip	pt							
Mailing Address 618 VILLA DRIVE 2026				м м 08	/	D	31	/ Y	y 201		Y			
City CASTLE PINES	State CO	Zip Code 80108						R2402)			
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Name of Employer	Occupation	1	-											
United HealthCare Services Inc		I Management												
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 252.00	P	P/R Dec	ducti	on ((\$14.0	0 Bi-We	eekly)					
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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) A. JAY M ANLIKER			Date	e of R	eceipt						
Mailing Address 4306 MOUNTAIN LANE				M 8	/ D 31		у у 2012	Y			
City WAUSAU	State WI	Zip Code 54401				PR2402 Receipt th					
FEC ID number of contributing federal political committee.	С				7		40	0.00			
Name of Employer United HealthCare Services Inc	Occupation CEO TPA	1									
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Full Name (Last, First, Middle Initial) B. JAMES H BECKER			Date	e of R	eceipt						
Mailing Address 378 FERNDALE ROAD WE		7. 0.1	0	8	31		2012	Y			
City WAYZATA	State MN	Zip Code 55391	Transaction ID : PR2402445128399 Amount of Each Receipt this Period								
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Name of Employer United HealthCare Services Inc	Occupation SVP Opera										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R D	educt	ion (\$15	3.85 Bi-W	/eekly)				
Full Name (Last, First, Middle Initial) C. JAMES C COLEMAN			Date	e of R	eceipt						
Mailing Address 4135 ETHAN DRIVE			М		/ 31		2012	Y			
City EAGAN	State MN	Zip Code 55123				: PR2402					
FEC ID number of contributing federal political committee.	C	33123	Amo	unt o	f Each F	Receipt th	nis Period 200				
Name of Employer United HealthCare Services Inc	Occupation	n byee Relations									
Receipt For: Primary General Other (specify) V		Year-to-Date ▼ 1800.00	P/R [Deduc	tion (\$10	00.00 Bi-V	Veekly)				
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or for commercial purposes, other than using t								
NAME OF COMMITTEE (In Full)	ited PAC (I	Inited for Health)						
Full Name (Last, First, Middle Initial) A. JAMES D DONOVAN			Date o	f Receipt				
Mailing Address 2816 MONTREAUX DRIVE			08	/ D 31		2012	Y	
City	State	Zip Code		saction ID :			9	
FRISCO	TX	75034	Amoun	t of Each F	Receipt th	is Period		
FEC ID number of contributing federal political committee.	С					130	.00	
Name of Employer	Occupation	1						
United HealthCare Services Inc	SVP Bus D	ev and Marketing						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify)		1170.00	P/R Dec	luction (\$65	5.00 Bi-We	ekly)		
Other (specity) ▼		7 7 7	1					
Full Name (Last, First, Middle Initial)	1							
B. JOHN L LARSEN			Date o	f Receipt				
Mailing Address 11688 TANGLEWOOD DRI	VE		M M			2012	Y	
City	State	Zip Code	08 Trans	31 saction ID :		2012	_	
EDEN PRAIRIE	MN	55347		t of Each F			5	
FEC ID number of contributing federal political committee.	С					386.	.00	
Name of Employer	Occupation	1						
United HealthCare Services Inc	Business S	egment CEO						
Receipt For:	Aggregate	Year-to-Date V						
Primary General Other (specify) ▼		, 3474.00	P/R Ded	luction (\$19	3.00 Bi-W	eekly)		
Full Name (Last, First, Middle Initial) C. JOY O HIGA			Date o	f Receipt				
Mailing Address 2208 ELM AVENUE			08	/ D 31		2012	Y	
City	State	Zip Code		saction ID			9	
MANHATTAN BEACH	CA	90266	Amoun	t of Each F	Receipt th	is Period		
FEC ID number of contributing federal political committee.	С				7	60	.00	
Name of Employer	Occupation	1						
United HealthCare Services Inc	Dir Regulat	tory Affairs						
Receipt For:	Aggregate	Year-to-Date V						
Primary General Other (specify) ▼		540.00	0 P/R Deduction (\$30.00 Bi-Weekly)					
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. SOHINI G JINDAL		Date of Receipt
Mailing Address 9300 IVY TREE LANE		M = M / D = D / Y = Y = Y = Y Y Y Y = Y = Y Y Y Y = Y = Y Y Y Y = Y = Y Y </td
City GREAT FALLS	State Zip Code VA 22066	Transaction ID : PR2402446328399
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 Govt Rel Dir Aggregate Year-to-Date ▼ 1800.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. RUSSELL C PETRELLA		Date of Receipt
Mailing Address 4612 MOORLAND AVEN	IUE	M M / D D / Y Y Y Y 08 31 2012
City EDINA	StateZip CodeMN55424	Transaction ID : PR2402446428399 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 President C&S	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. CORY ALEXANDER		Date of Receipt
Mailing Address 4203 BRADLEY LANE		08 31 2012
City CHEVY CHASE	State Zip Code MD 20815	Transaction ID : PR2405428828399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 384.60
Name of Employer	Occupation	
United HealthCare Services Inc	VP Gov't Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3461.40	P/R Deduction (\$192.30 Bi-Weekly)
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	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)													
Α.	Full Name (Last, First, Middle Initial) JOSEPH R STEVENS			Date of Receipt												
	Mailing Address 1621 BERKSHIRE RD			M M / D D / Y												
	City	State	Zip Code		Trans	act	tion	ID : P	R24054	1291 :	28399)				
	COLUMBUS	OH	43221	/	Amoun	t of	Eac	ch Re	ceipt th	is Pe	eriod					
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	Primary General Other (specify)		856.80] P.	/R Ded	luctio	ion (\$47.6	0 Bi-We	ekly)					
в.	Full Name (Last, First, Middle Initial) RODNEY CHARLES ARMSTEAD				Date of	f Re	eceip	pt								
	Mailing Address 406 LEWELEN CIRCLE				м м 08	/	D	31	/ Y	۲ 20	ү 12	Y				
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	ENGLEWOOD	NJ	07631	/	Amoun	t of	Eac	ch Re	ceipt th	is Pe	eriod					
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	Name of Employer United HealthCare Services Inc	Occupation VP Operation														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00	P	/R Ded	uctio	on (\$	\$40.00) Bi-We	ekly))					
с.	Full Name (Last, First, Middle Initial) KAREN ANN SAELENS				Date of	f Re	eceip	pt								
	Mailing Address 105 N FLORENCE AVE				м м 08	/	D	31	/ Y	20 ⁻	12 12	Y				
		State	Zip Code						R2408							
	LITCHFIELD PARK	AZ	85340	/	Amoun	t of	Eac	ch Re	ceipt th	is Pe	eriod					
	FEC ID number of contributing federal political committee.	С					7		,		40.	00				
	Name of Employer	Occupation	I	\neg												
	United HealthCare Services Inc	Executive D	Director													
	Receipt For:	Aggregate	Year-to-Date ▼													
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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 the		person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. KATHLYN G WEE		Date of Receipt
Mailing Address 4118 38TH ST NW		08 31 / Y Y Y Y Y
City WASHINGTON	State Zip Code DC 20016	Transaction ID : PR2408545028399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00
Name of Employer United HealthCare Services Inc	Occupation Govt Rel Dir	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. GAIL KOZIARA KOZIARA BOUDF	REAUX	Date of Receipt
Mailing Address 841 HOLDEN COURT		08 31 2012
City LAKE FOREST	StateZip CodeIL60045	Transaction ID : PR2437119528399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.62
Name of Employer United HealthCare Services Inc	Occupation EVP & Gr Pres UHC	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3461.58	P/R Deduction (\$192.31 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. JEFFREY SEAN CORZINE		Date of Receipt
Mailing Address 7649 EARLINGTON PARK	NAY	08 31 2012
City DUBLIN	StateZip CodeOH43017	Transaction ID : PR2437119728399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
United HealthCare Services Inc	Dir Marketing Bus Dev	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
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or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (Jnited for Health)									
Full Name (Last, First, Middle Initial) A. RITA FAYE JOHNSON-MILLS				Date of	Re	ecei	pt				
Mailing Address 9727 SKY LANE				м м 08	/		31	/ Y		012	Y
City	State	Zip Code		Trans	acti	ion	ID : F	PR2437	1201	2839	•
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United HealthCare Services Inc	VP Operati	ons									
Receipt For:	Aggregate	Year-to-Date V									
Primary General Other (specify) ▼		270.00		P/R Ded	uctio	on ((\$15.0	00 Bi-W	eekly	/)	
Full Name (Last, First, Middle Initial) B. DAVID K LIVINGSTON				Date of	Re	ecei	pt				
Mailing Address 24570 RIDGE POLE COUF	RT			м м 08	/		31	/ Y) 12	Y
City	State	Zip Code		Trans	acti	ion	ID : F	R2437	<u>1202</u>	28399)
SOUTH LYON	MI	48178	_	Amount	t of	Ea	ch Re	eceipt th	nis P	eriod	
FEC ID number of contributing federal political committee.	С					3		7	_	194.	00
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Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1746.00	P	/R Ded	uctio	on ((\$97.0	0 Bi-We	эekly	/)	
Full Name (Last, First, Middle Initial) C. JACK S WEISS				Date of	Re	ecei	pt				
Mailing Address 6245 NORTH 75 STREET				м м 08	1		31	/ Y)12	Y
City	State AZ	Zip Code	_					PR2437			9
SCOTTSDALE	AZ	85250	_	Amount	t of	Ea	ch Re	eceipt th	nis P	eriod	
FEC ID number of contributing federal political committee.	С				_	7		7	_	50	00
Name of Employer	Occupation	l									
United HealthCare Services Inc	Natl Medica	al Director/CMO									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 450.00	I F	P/R Ded	ucti	on	(\$25.0)0 Bi-W	eekly	y)	
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ar for commercial purposes, other than using the name and address of any political committee to solicit contributions from such commit NAME OF COMMITTEE (in Full) 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 MN 55443 Receipt for contributing federal political committee. Primary General Occupation United HealthCare Services Inc Receipt For City General City State Zip Code Receipt For City State Zip Code Re	Δ	, information populat from such Departs and	Ptotomonte an	w not be cold or used by some								-	1
VunitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initia) A, PAUL JOSEPH BALTHAZOR Mailing Address 9013 FARSWORTH AVENUE NORTH City BROOKLYN PARK Mailing Address 1015 FRAS/X1207233 Amount of Each Receipt Incorporated PAC (United for Health) Preceipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initia) KELLY L CLARK Mailing Address 13540 BIRCHWOOD AVENUE City City City State City City State City State City State City	or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to so	or the olicit co	purp ntrib	pose outio	e of s ons fro	oniciting	cont com	mitte	ons e.
Full Name (Last, First, Middle Initial) A, PALL JOSEPH BALTHAZOR Mailing Address 9013 FARNSWORTH AVENUE NORTH City BROOKLNN PARK MN State Zip Code BRORICAN PARK MN State Zip Code BRORICAN PARK MN State Zip Code BRORICAN PARK Maing Address 9013 FARNSWORTH AVENUE NORTH Maing Address 19540 BIRCHWOOD AVENUE City General Other (specify) ♥ State Zip Code ROSEMOUNT MN State Zip Code ROBUNT MN Name of Employer Occupation United HealthCare Services Inc Business Segment CIO Receipt For: Primary General Occupation Maing Address 10550 PINNACLE WAY General Occupation <	\backslash												
A, PAUL JOSEPH BALTHAZOR Mailing Address 9013 FARNSWORTH AVENUE NORTH City Mailing Address 9013 FARNSWORTH AVENUE NORTH City State Zip Code BROOKLNN PARK MN S5443 Amount of Each Receipt His Period Precipition Cocupation Durated HealthCare Services Inc Business Segment CFO FEC ID rumber of contributing C Precipition Preci	/	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
City State Zip Code BROOKLYN PARK MN 56443 FEC ID number of contributing C 12 Name of Employer Occupation United HealthCare Services inc Business Segment CFO Receipt For: Aggregate Year-to-Date ▼ Other (specify) General Other (specify) General Other (specify) State Zip Code 7 RosEMOUNT MN State Zip Code RosEMOUNT State Mailing Address 13540 BIRCHWOOD AVENUE City State RosEMOUNT MN State Zip Code RosEMOUNT MN State Zip Code Name of Employer Occupation United HealthCare Services inc Business Segment CIO Receipt For: Aggregate Year-to-Date ▼ Primary General Occupation United HealthCare Services inc Business Segment CIO Receipt For: Aggregate Year-to-Date ▼ Prift Arany General Occupation	-					Date o	f Re	eceip	ot				
BROOKLYN PARK MN 55443 FEC ID number of contributing federal political committee. C 120 Name of Employer United HealthCares Services Inc Receipt For: Chr Aggregate Year-to-Date ▼ P/R Deduction (\$60.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$60.00 Bi-Weekly) Full Name (Last, First, Middle Initial) State Zip Code ROSEMOUNT MN 55068 FEC ID number of contributing federal political committee. Rosemotics Inc Business Segment CIO Receipt for: Ditted HealthCares Services Inc Name of Employer Occupation Business Segment CIO P/R Deduction (\$38.46 Bi-Weekly) FC ID number of contributing federal political committee. Occupation Business Segment CIO P/R Deduction (\$38.46 Bi-Weekly) Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$38.46 Bi-Weekly) Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$38.46 Bi-Weekly) Full Name (Last, First, Middle Initial) C Transaction DI: FR24371215283 Mailing Address 10550 PINNACLE WAY Occupation WN 55129 Date of Receipt this Perioc FC ID number of contributing federal political committee. C Transaction DI: FR24371215283 Mailing Address 10550 PINNACLE WAY C 7		Mailing Address 9013 FARNSWORTH AVEN	JE NORTH				/	D		/ Y			Y
FEC ID number of contributing federal political committee. C 120 Name of Employer United HealthCare Services Inc Business Segment CFO P/R Deduction (\$60.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$60.00 Bi-Weekly) Full Name (Last, First, Middle Initial) State Zip Code Mailing Address 13540 BIRCHWOOD AVENUE MN 55068 City State Zip Code Name of Employer Occupation Date of Receipt Init Period Inted HealthCare Services Inc Business Segment CIO Receipt For: Primary General Occupation United HealthCare Services Inc Business Segment CIO P/R Deduction (\$38.46 Bi-Weekly) P/R Deduction (\$38.46 Bi-Weekly) MN 55129 Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$38.46 Bi-Weekly) City State Zip Code MN 55129 Mailing Address 10500 PINNACLE WAY Git Git Git City State Zip Code MN S5129 Amount of Each Receipt Inits Period Receipt For: Occupation		City				Trans	sacti	ion	ID : P	R24371	2072	8399)
federal political committee. V <t< td=""><td></td><td>BROOKLYN PARK</td><td>MN</td><td>55443</td><td></td><td>Amoun</td><td>t of</td><td>Eac</td><td>ch Re</td><td>ceipt th</td><td>is Pe</td><td>riod</td><td></td></t<>		BROOKLYN PARK	MN	55443		Amoun	t of	Eac	ch Re	ceipt th	is Pe	riod	
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check onl	y one)			
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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 (United for Health)					
Full Name (Last, First, Middle Initial) A. JOHN W COSGRIFF			Date o	f Receipt			
Mailing Address 1837 SUMMIT LANE			м м 08	/ D D 31	/ Y	2012	Y
City MENDOTA HEIGHTS	State MN	Zip Code 55118		saction ID : F			•
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Name of Employer United HealthCare Services Inc	Occupatior Dir Genera	n I Management					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	P/R Ded	duction (\$20.0)0 Bi-We	eekly)	
Full Name (Last, First, Middle Initial) B. PETER W RAINEY	·		Date o	f Receipt			
Mailing Address 3115 WEST 47 STREET	2:		08	/ D D 31	/ Y	y y 2012	Y
City MINNEAPOLIS	State MN	Zip Code 55410		saction ID : F It of Each Re	-)
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Full Name (Last, First, Middle Initial) C. ROBIN E LIPPERT			Date o	f Receipt			
Mailing Address 522 4 STREET SOUTH E	EAST		08	/ D D 31	/ Y	y y 2012	Y
City WASHINGTON	State DC	Zip Code 20003		saction ID : I It of Each Re			9
FEC ID number of contributing federal political committee.	C				- 7	384	.62
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re						
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	United for Health)								
Α.	Full Name (Last, First, Middle Initial) STEPHEN M HEYMAN				Date of	Re	eceip	t			
	Mailing Address 5300 SHERRILL AVENUE				м м	/		31	/ Y	y y 2012	Y
	City	State	Zip Code		Trans	acti	ion I	D : P	R24442	26572839	9
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	United HealthCare Services Inc	VP Govt Re	91								
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	Primary General Other (specify) ▼		1800.00	P/	R Ded	uctio	on (\$	5100.0	00 Bi-W	(eekly)	
В.	Full Name (Last, First, Middle Initial) DANNA L MEZIN				Date of	Re	eceip	t			
	Mailing Address 1059 HIGHWAY 12				м м 08	/		о 31	/ Y	ү ү 2012	Y
	City	State	Zip Code							6152839	9
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	Mailing Address 19705 LAKEVIEW AVENUE				м м 08	1		31	/ Y	y y 2012	Y
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	United HealthCare Services Inc	CEO - UM	/S								
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	and Statements may r g the name and addr wrated PAC (Un	ess of any political committee ited for Health) Zip Code 77494 ar-to-Date ▼ 360.00	13 14 15 16 1 erson for the purpose of soliciting contributions from such committee. Date of Receipt 08 31 2012 Transaction ID : PR2445015428399 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly) Date of Receipt 08 31 20.00 Bi-Weekly
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7379 DEVIN LANE	State		
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5781 RUBY DRIVE			08 / D D / Y Y Y Y Y 08 31 2012
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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 from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	Jnited for Health)	
Full Name (Last, First, Middle Initial) A. EILEEN J LIVERANI			Date of Receipt
Mailing Address 100 BOSTOCK ROAD			M M / D D / Y Y Y Y Y 08 31 _ 2012 _
City SHOKAN	State NY	Zip Code 12481	Transaction ID : PR2460167228399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		55.40
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation Dir Custom Aggregate		P/R Deduction (\$27.70 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. DANIEL KRAJNOVICH Mailing Address 9958 BUTTONDOWN LA	ANE		Date of Receipt
City ZIONSVILLE	State IN	Zip Code 46077	Transaction ID : PR2460167328399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation Health Plan Aggregate		P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. JUNE THIELEN			Date of Receipt
Mailing Address 6245 WAKEFIELD COU	RT		M / D / Y
City SHAKOPEE	State MN	Zip Code 55379	Transaction ID : PR2460167528399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		27.60
Name of Employer United HealthCare Services Inc Receipt For:	Occupation SVP Huma		
Primary General Other (specify) ▼		248.40	P/R Deduction (\$13.80 Bi-Weekly)
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Any information copied from such Reports and or for commercial purposes, other than using th	Statements mane and a	ay not be sold or used by any p ddress of any political committed	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	Jnited for Health)								
Full Name (Last, First, Middle Initial) A. KARIN KEITEL			Date of Receipt							
Mailing Address 3918 HAVEN ROAD			08 31 2012							
City MINNETONKA	State MN	Zip Code 55345	Transaction ID : PR2460167628399 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		100.00							
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Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	P/R Deduction (\$50.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. SHELBY P SOLOMON			Date of Receipt							
Mailing Address 5702 BLAKE ROAD			08 31 2012							
City _EDINA	State MN	Zip Code 55436	Transaction ID : PR2460167928399 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 President G									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2070.00	P/R Deduction (\$115.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. JELKA S PETROVIC			Date of Receipt							
Mailing Address 4454 PEPPER MILL LANE			M = M / D = D / Y = Y = Y = Y Y O O O O O O O Y Y = Y = Y Y							
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FEC ID number of contributing federal political committee.	С		40.00							
Name of Employer United HealthCare Services Inc	Occupation Health Plar									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			370.00							

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. LARRY C RENFRO		Date of Receipt
Mailing Address 5 DOVE LANE	-	08 31 / Y Y Y Y Y
City ANDOVER	State Zip Code MA 01810	Transaction ID : PR2460168128399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation EVP, UHG and CEO, Optum	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3461.40	P/R Deduction (\$192.30 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. DAVID B ORBUCH		Date of Receipt
Mailing Address 3370 SYCAMORE LANE		08 31 2012
City PLYMOUTH	StateZip CodeMN55441	Transaction ID : PR2460168228399 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 Compliance Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 693.00	P/R Deduction (\$38.50 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. ERIC J WEXLER		Date of Receipt
Mailing Address 7220 WILLOW OAK DR		08 31 2012
City WEST BLOOMFIELD	State Zip Code MI 48324	Transaction ID : PR2463723128399
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 64.00
Name of Employer	Occupation	
United HealthCare Services Inc	Deputy General Counsel (Mgr)	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	576.00	P/R Deduction (\$32.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		525.60
TOTAL This Period (last page this line number	only)	

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	-	Use separate schedule(s)	(check only one)							
II EIVIIZED KEUEIPIS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b	11c	12			
Any information copied from such Reports a or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	Jnited for Health)								
Full Name (Last, First, Middle Initial) A. KAREN L WALKOWSKI			Date	of R	eceipt					
Mailing Address 6359 COUNTRY ROAD					31	/ Y	2012	Y		
City EDEN PRAIRIE	State MN	Zip Code 55346	Tra	insact	tion ID :		72342839 is Period	9		
FEC ID number of contributing federal political committee.	С				3		40	.00		
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Dir Busines Aggregate		P/R D	educt	ion (\$20.	00 Bi-We	eekly)			
Full Name (Last, First, Middle Initial) B. Susan Schick Mailing Address 319 BERKLEY ROAD			Date	M	eceipt 31	/ Y	2012	Y		
City MERION STATION	State PA	Zip Code 19066	Tra	nsact	ion ID :		2012 320528399)		
FEC ID number of contributing federal political committee.	С				1	,	250.	00		
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Health Plan Aggregate				(0.4.0.5		,			
Other (specify) ▼		2250.00		educti	on (\$125	5.00 Bi-W	еекіу)			
Full Name (Last, First, Middle Initial) CHRISTOPHER MARK ABBO	тт		Date	of R	eceipt					
Mailing Address W154N6076 HICKORY H	IOLLOW CT		M 0		31	/ Y	y y 2012	Y		
City MENOMONEE FALLS	State WI	Zip Code 53051					5 4152839 is Period	9		
FEC ID number of contributing federal political committee.	С				7			.00		
Name of Employer	Occupation									
United HealthCare Services Inc Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00	P/R D	educt	ion (\$14.	00 Bi-We	eekly)			
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num					7 I 7 I	· · ·	318.	00		

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	-	Use separate schedule(s)				(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12					
Any information copied from such Reports and or for commercial purposes, other than using	nd Statements ma the name and a	Ay not be sold or used by any p ddress of any political committe	erson for e to soli	13 or the icit cor	purp ntrib	14 bose of utions 1	15 soliciting from suc	16 g contribu h commit	tions ee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor													
Full Name (Last, First, Middle Initial) A. JO ANNE M ANDERSON				Date of	Re	ceipt							
Mailing Address 6236 KNOLL DRIVE			11	м м	/	31) / Y	2012	Y				
City EDINA	State MN	Zip Code 55436	A					54162839 nis Period	9				
FEC ID number of contributing federal political committee.	С					7		194	.00				
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation VP Integrat Aggregate			R Dedu	uctio	on (\$97	.00 Bi-W	eekly)					
Full Name (Last, First, Middle Initial) B. JAMES F COPPENS Mailing Address 5965 LAKE LINDEN COU	IRT			Date of	Re /	ceipt	у / Т	Y Y	Y				
City	State MN	Zip Code				-		2012 54192839	9				
SHOREWOOD FEC ID number of contributing		55331	A	mount	of	Each F	leceipt th	nis Period					
federal political committee.	Occupation		_ I			7	7	126	.30				
United HealthCare Services Inc		Compensation											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1136.70	P/I	R Dedu	uctic	on (\$63.	15 Bi-We	eekly)					
Full Name (Last, First, Middle Initial) C. LILLIAN R HECKMAN				Date of	Re	ceipt							
Mailing Address 552 DEER LAKE CIRCLE	E			м м 08	1	31) / Y	y y 2012	Y				
City BLUE BELL	State PA	Zip Code 19422						54212839 nis Period	9				
FEC ID number of contributing federal political committee.	С				U				.00				
Name of Employer	Occupation												
United HealthCare Services Inc Receipt For:		Management											
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00	P/	R Ded	uctio	on (\$30	.00 Bi-W	eekly)					
SUBTOTAL of Receipts This Page (optiona	I)					,		380	30				
TOTAL This Period (last page this line num	ber only)					,							

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
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or for commercial purposes, other than using	g the name and a	ddress of any political committee	person for the purpose of soliciting contributions be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	rated PAC (I	Inited for Health)								
Full Name (Last, First, Middle Initial) A. MARK A PHILLIPS			Date of Receipt							
Mailing Address 1760 LUCY RIDGE CT			M = M / D = D / Y = Y = Y							
City	State	Zip Code	08 31 2012 Transaction ID : PR2484542628399							
CHANHASSEN	MN	55317	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	SVP Sales									
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		624.00	P/R Deduction (\$39.00 Bi-Weekly)							
			-							
Full Name (Last, First, Middle Initial) B. JERI G KUBICKI			Date of Receipt							
Mailing Address 7659 COLDSTREAM DR			M = M / D = D / Y = Y = Y = Y Y 08 31 2012 1							
City	State OH	Zip Code	Transaction ID : PR2486697828399							
	OH	45255	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									
Receipt For:	VP Govt Re	·								
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$50.00 Bi-Weekly)							
Other (specify) ▼		900.00								
Full Name (Last, First, Middle Initial) C. THOMAS B MANDERFELD			Date of Receipt							
Mailing Address 4835 PENN AVENUE SC	DUTH		M = M / D = D / Y = Y = Y = Y							
City	State	Zip Code	08 31 2012 Transaction ID : PR2486697928399							
MINNEAPOLIS	MN	55419	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		80.00							
Name of Employer	Occupation									
United HealthCare Services Inc	VP General	Management								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		720.00	P/R Deduction (\$40.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	l)		258.00							
TOTAL This Period (last page this line num	nber only)		I. I. I. M. I. I. M. I. I. M. I.							

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check or	ıly or	ne)	L		
		for each category of the Detailed Summary Page	X 11a		11b	11c	12	
Any information copied from such Rep								
or for commercial purposes, other than	n using the name and a	address of any political committe	e to solicit co	ontrib	outions f	rom such	n committ	ee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Inco	orporated PAC (United for Health)						
Full Name (Last, First, Middle Initia DIRK C MCMAHON)		Date o	of Re	eceipt			
Mailing Address 1608 SUMMIT OA	KS CT		08	VI /	31	/ Y	2012	Y
City BURNSVILLE	State MN	Zip Code 55337					45702839 iis Period	9
FEC ID number of contributing federal political committee.	C				7		200	.00
Name of Employer United HealthCare Services Inc Receipt For:		egment CEO						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1800.00	P/R De	ducti	on (\$10(0.00 Bi-W	/eekly)	
Full Name (Last, First, Middle Initia CHRISTOPHER S Stanley)		Date of	of Re	eceipt			
Mailing Address 12934 W 81ST AV			08		31	/ Y	у у 2012	Y
City ARVADA	State CO	Zip Code 80005				-	15742839 iis Period	9
FEC ID number of contributing federal political committee.	С				7		50	.00
Name of Employer United HealthCare Services Inc	Occupation Sr Medical							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 850.00	P/R Dec	ductio	on (\$50.	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initia c. KATHRYN M SULLIVAN)		Date o	of Be	eceint			
Mailing Address 530 N LAKE SHOP	RE DR # 2309		08	M /	31) / Y	2012	Y
City CHICAGO	State IL	Zip Code 60611					45752839 iis Period	9
FEC ID number of contributing federal political committee.	C				7	3	194	.00
Name of Employer	Occupation	1						
United HealthCare Services Inc	Region CE	0						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1746.00	P/R De	ducti	ion (\$97	.00 Bi-We	eekly)	
SUBTOTAL of Receipts This Page (o	. ,	,		-	т. Т.		444.	00
TOTAL THIS FERIOU (last page this lift				_	7		1	

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			Detailed Summary Page		-		11b		11c		12	<u> </u>		
An	y information copied from such Reports and	Statements ma	l ay not be sold or used by any p	erson fe	13 or the	purp	14 pose of	f sc	15 bliciting	cor	16 ntribut	17 ions		
or	for commercial purposes, other than using th	e name and a	ddress of any political committee	e to sol	icit coi	ntrib	utions	fror	m such	CO	mmitte	ee.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) MICHAEL SCOTT HARTLEY	Date of Receipt												
	Mailing Address 4313 MORNINGSIDE ROAD)			08 31 2012									
	City	State	Zip Code		Trans	acti	ion ID :	PF	R25386	413	2839	•		
	EDINA	MN	55416-5031	A	mount	t of	Each F	Rec	eipt th	is P	eriod			
	FEC ID number of contributing federal political committee.	С					7		7	_	1500.	00		
	Name of Employer	Occupation	1											
	United HealthCare Services Inc	VP Operation	ons											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		2500.00	P/	R Ded	uctio	on (\$15	600.	.00 Bi-\	Nee	kly)			
в.	Full Name (Last, First, Middle Initial) MARTIN C TOOMB	I			Date of Receipt									
	Mailing Address 4 STANLEY TERRACE				м м 08	/	31		/ Y)12	Y		
	City	State	Zip Code		Trans	acti	on ID :	PF	25386	415	28399)		
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	FEC ID number of contributing federal political committee.	С					,		7	_	30.	00		
	Name of Employer United HealthCare Services Inc													
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 270.00	P/R Deduction (\$15.00 Bi-Weekly)											
с.	Full Name (Last, First, Middle Initial) KARA V SMITH	1			Date of	f Re	ceipt							
	Mailing Address 3 14 STREET NORTH EAST	Г			08 31 2012									
	City	State	Zip Code		Trans	acti	ion ID :	: PF	R25401	753	32839	9		
	WASHINGTON	DC	20002	A	mount	t of	Each F	Rec	eipt th	is P	eriod			
	FEC ID number of contributing federal political committee.	С					,		7	_	307.	.70		
	Name of Employer	Occupation	l											
	United HealthCare Services Inc	Dir Govt Re	91											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼		2769.30	P/	'R Ded	luctio	on (\$15	53.8	85 Bi-W	'eek	ly)			
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т	OTAL This Period (last page this line number	r only)		. [,							

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NAME (Unite A. HYLL Mailing	ation copied from such Reports and mercial purposes, other than using th OF COMMITTEE (In Full) edHealth Group Incorporat me (Last, First, Middle Initial) IUS R EDWARDS Address PO BOX 44246	e name and a	ddress of any political committee							, con		
or for com NAME (Unite A. Full Nar HYLL Mailing	mercial purposes, other than using th OF COMMITTEE (In Full) edHealth Group Incorporat me (Last, First, Middle Initial) IUS R EDWARDS	e name and a	ddress of any political committee									
Full Nar Full Nar A. HYLL Mailing	edHealth Group Incorporat me (Last, First, Middle Initial) IUS R EDWARDS	ed PAC (L	Jnited for Health)									e.
A. HYLL Mailing	IUS R EDWARDS											
	Address BO BOX 44246			[Date of	Re	ceip	t				
0.1	Addie33 FO BOX 44240				м м 08	/		31	/ Y	ү 20	ү 12	Y
City		State	Zip Code				-		R2541			
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Name o	f Employer	Occupation										
	HealthCare Services Inc	Dir Govt Re										
Receipt		Aggregate	Year-to-Date ▼									
	rimary General ther (specify) v		900.00	P/	P/R Deduction (\$50.00 Bi-Weekly)							
	Full Name (Last, First, Middle Initial) MATTHEW A KING					Re	ceip	t				
Mailing	Address 1112 LORME COURT				м м 08	/		31	/ Y	201		Y
City		State	Zip Code		Trans	acti	on I	D : P	R25413	30052	28399	
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	Name of Employer Occupation United HealthCare Services Inc Dir Govt Rel											
	For: rimary General ther (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	P/	'R Dedi	uctic	on (\$	50.0	0 Bi-We	ekly))	
	me (Last, First, Middle Initial) N VERSAGGI	1			Date of	Re	ceip	t				
Mailing	Address 800 ALBANY AVENUE				м м 08	/		D 31	/ Y	201	ү 12	Y
City		State	Zip Code		Trans	acti	ion I	D : F	R2541	3008	28399)
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FEC ID number of contributing federal political committee.		С									192.	32
Name o	f Employer	Occupation		-								
United I	HealthCare Services Inc	Dir Govt Re	I									
Receipt	For:	Aggregate	Year-to-Date ▼									
	rimary General ther (specify) ▼		1730.88	P	/R Ded	uctio	on (\$	\$96.1	6 Bi-We	ekly)	
SUBTOT/	AL of Receipts This Page (optional)			•			7		7		392.3	12

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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				or the		pose of	soliciting	g contrib					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	Jnited for Health)											
Full Name (Last, First, Middle Initial) A. JOHN F DOHERTY				ate of	f Re	eceipt							
Mailing Address 5338 SPILMAN AVENUE				м м 08	/	31) / Y	у у 2012	Y				
City SACRAMENTO	State CA	Zip Code 95819	A				PR25420 Receipt th						
FEC ID number of contributing federal political committee.	С					,		10	00.00				
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Dir Govt Re Aggregate		 P/	R Ded	lucti	on (\$50	.00 Bi-We	eekly)					
Full Name (Last, First, Middle Initial)	L	900.00						, ,					
B. MATTHEW D ONSTOTT Mailing Address 2324 LA SENDA STREET				Date of		eceipt 31) / Y	2012	Y				
City SANTA FE	State NM	Zip Code 87505					PR25420 Receipt th	0246283					
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Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Dir Govt Re Aggregate		 P/	R Ded	uctio	on (\$20.	00 Bi-We	eekly)					
Full Name (Last, First, Middle Initial) C. BRENDAN HOSTETLER				Date of	f Re	eceipt							
Mailing Address 3643 N SEELEY AVENUE #2				м м 08	/	31) / Y	2012	Y				
City CHICAGO	State IL	Zip Code 60618	A				PR2542 Receipt th						
FEC ID number of contributing federal political committee.	С					7		6	60.00				
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Govt Rel D	ir											
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00	P/	R Ded	lucti	on (\$30	.00 Bi-We	eekly)					
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Any Information copied from such Reports and Statements may not be sold or used by any previous of solicit contributions from such committee. NAME OF COMMITTEE (in Full) VInitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) JENNIFER L MCMULLEN Mailing Address 857 GLENBROOK DRIVE City State ATLANTA GA Satistical committee Committee All Inter (Last, First, Middle Initial) Date of Receipt JENNIFER L MCMULLEN Date of Receipt Mailing Address 557 GLENBROOK DRIVE Common of Engloyer City State Zip Code ATLANTA GA 30318 FEC ID number of contributing federal political committee. Source of Contributing federal political committee. Source of Contributing federal political committee. City Aggregata Year-to-Date ▼ PiR Deduction (\$25.00 Bi-Weekly) PiR Deduction (\$25.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Aggregata Year-to-Date ▼ PiR Deduction (\$25.00 Bi-Weekly) PiR Deduction (\$25.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Aggregata Year-to-Date ▼ PiR Deduction (\$50.00 Bi-Weekly) PiR Deduction (\$50.00 Bi-Weekly) Fuil N		3	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$							
✓ UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. JENNIFER L MCMULLEN Maining Address 8/7 GLENBROOK DRIVE City State ZPC Drumber of contributing federal political committee. City Gat 30318 FEC ID number of contributing federal political committee. City Aggregate Year-to-Date ▼ PIR Deduction (\$25.00 Bi-Weekly) Full Name (Last, First, Middle Initial) 3. RICHARD E RAMSAY Mailing Address 543 E LURAY AVE City State Zip Code AlEXANDRIA VA 22301 FEC ID number of contributing federal political committee. City Alexandria VA 22301 FEC ID number of contributing federal political committee. City Alexandria VA 22301 FEC ID number of contributing federal political committee. City Alexandria VA 22301 FEC ID number of contributing federal political committee. Pir Primary General Drive (specify) ▼	or for commercial purposes, o	other than using the name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions							
L. JENNIFER L MCMULLEN Date of Receipt Mailing Address 857 GLENBROOK DRIVE 08 31 2012 City Transaction DI: PR254254213399 ATLANTA GA 30318 FEC ID number of contributing tederal political committee. Occupation Name of Employer Occupation Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Name of Employer Occupation United HeathCare Services Inc Gort Rel Dir City Address 543 E LURAY AVE City State Zip Code ALEXANDRIA VA 22301 FEC ID number of contributing tederal political committee. Occupation Name of Employer Occupation Mailing Address 4226 407H STREET NORTH City Aggregate Year-to-Date ▼ Pirensection (\$50.00 Bi-Weekly) Piransetical Committee. Occupation Mailing Address 4226 407H STREET NORTH City State Zip Code Anount of Each Receipt this Period Mailing Address 4226 407H STREET NORTH Occupation			Jnited for Health)								
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SCHEDULE A (FEC Form 3X)

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				13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)										
	Full Name (Last, First, Middle Initial) ANNE YAU			Date of Receipt									
	Mailing Address 9905 WOODLAND DRIVE			M M / D D / Y Y Y Y 08 31 _ 2012 _									
	City SILVER SPRING	State MD	Zip Code 20902	Transaction ID : PR2543582528399 Amount of Each Receipt this Period									
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	Name of Employer United HealthCare Services Inc Receipt For:	Occupation Govt Rel M											
	Primary General Other (specify) ▼		270.00	P/R Deduction (\$15.00 Bi-Weekly)									
	Full Name (Last, First, Middle Initial) CHANTA G COMBS			Date of Receipt									
	Mailing Address 4229 SUMMERTREE DRIV	Ξ		08 31 2012									
	City TALLAHASSEE	State FL	Zip Code 32311	Transaction ID : PR2552313528399 Amount of Each Receipt this Period									
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	Name of Employer United HealthCare Services Inc	Occupation Govt Rel Di											
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	Full Name (Last, First, Middle Initial) RICHARD N BAER			Date of Receipt									
	Mailing Address 6356 SMITHTOWN ROAD			08 31 2012									
	City EXCELSIOR	State MN	Zip Code 55331	Transaction ID : PR2552960528399									
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	United HealthCare Services Inc	EVP, Gene	ral Counsel										
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Mailing Address 2750 FOUNTAIN LANE NORTH City State Zip Code PLYMOUTH MN 55447 FEC ID number of contributing federal political committee. C Amount of Each Receipt Name of Employer Occupation Dir Marketing/Product DB Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$14.00 Bi-V) Full Name (Last, First, Middle Initial) First, Middle Initial) P/R Deduction (\$14.00 Bi-V)	2012 2961028399					
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Full Name (Last, First, Middle Initial) C. JEREMY VAUGHN BRYANT Date of Receipt						
Mailing Address 11700 ARBORHILL DRIVE	2012					
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)			
Full Name (Last, First, Middle Initial) A. MICHAEL A EHLMAN		Date of Receipt		
Mailing Address 10051 VALLEY RIDGE COUR		08 31 2012		
City	State Zip Code NV 89148	Transaction ID : PR2552962228399		
LAS VEGAS FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
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Full Name (Last, First, Middle Initial) 3. SCOTT F FLANNERY		Date of Receipt		
Mailing Address 8508 TRELADY CT		08 31 2012		
City PLANO	State Zip Code TX 75024	Transaction ID : PR2552962328399 Amount of Each Receipt this Period		
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Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address 11515 FRIARS WALK TERR	ACE	08 31 2012		
City GLEN ALLEN	State Zip Code VA 23059	Transaction ID : PR2552962528399 Amount of Each Receipt this Period		
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)			
Full Name (Last, First, Middle Initial) A. WILLIAM W GWINN JR		Date of Receipt		
Mailing Address 9302 CENTURY OAK COURT		08 31 2012		
City	State Zip Code TN 37027	Transaction ID : PR2552962628399		
BRENTWOOD FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer United HealthCare Services Inc	Occupation Dir Project Research Mgmt			
Receipt For: Primary General Other (specify) v	P/R Deduction (\$14.04 Bi-Weekly)			
Full Name (Last, First, Middle Initial) B. CLAIRE L HANNAN		Date of Receipt		
Mailing Address 25932 PORTAFINO DRIVE		08 31 2012		
City MISSION VIEJO	StateZip CodeCA92691	Transaction ID : PR2552962728399 Amount of Each Receipt this Period		
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Mailing Address 7705 WALDEN BLVD		08 31 2012		
City WAUSAU	StateZip CodeWI54401	Transaction ID : PR2552962828399 Amount of Each Receipt this Period		
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> UnitedHealth Group Incor	porated PAC (United for Health)										
Full Name (Last, First, Middle Initial)												
A. GREGORY J JAMES			Date of Receipt									
Mailing Address 2323 KINGS POINT I	DRIVE		08 31 _ 2012 _									
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Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		702.00	P/R Deduction (\$39.00 Bi-Weekly)									
		· · · · · · · · · · · · · · · · · · ·	·									
Full Name (Last, First, Middle Initial) B. JARRETT T JEDLICKA			Date of Receipt									
Mailing Address 13852 BIRCHWOOD	AVE											
			08 31 2012									
City	State	Zip Code	Transaction ID : PR2552963328399									
ROSEMOUNT	MN	55068	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		80.00									
Name of Employer United HealthCare Services Inc	Occupatior											
Receipt For:	Dir Traffic/V											
Primary General	Aggregate	Year-to-Date ▼	P/P Doduction (\$40.00 Pi Machin)									
Other (specify)		720.00	P/R Deduction (\$40.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) C. BRADLEY C JOHNSON			Date of Receipt									
Mailing Address 6705 SOUTHCREST	DRIVE		M = M / D = D / Y = Y = Y = Y									
0.1	01-11-	7. 0.4	08 31 2012									
City EDINA	State MN	Zip Code 55435	Transaction ID : PR2552963428399 Amount of Each Receipt this Period									
FEC ID number of contributing												
federal political committee.	C		28.00									
Name of Employer	Occupatior	1										
United HealthCare Services Inc	Dir Busines											
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General		252.00	P/R Deduction (\$14.00 Bi-Weekly)									
Other (specify)		, , , , , , , , , , , , , , , , , , , ,	1									
SUBTOTAL of Receipts This Page (opti	onal)		186.00									
TOTAL This Period (last page this line	number only)											

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11c	12						
Any information copied from such Reports a or for commercial purposes, other than usin				purpose of so								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	Jnited for Health)										
Full Name (Last, First, Middle Initial) BENJAMIN T KEHL			Date of	Receipt								
Mailing Address 19619 CALUMET COUR	Т		08									
City FARMINGTON	State MN	Zip Code 55024	Trans	action ID : PR of Each Rece		3528399)					
FEC ID number of contributing federal political committee.	С				7	80.0	00					
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		I Management Year-to-Date ▼ 720.00	P/R Dedu	uction (\$40.00	Bi-Wee	kly)						
Full Name (Last, First, Middle Initial) B. NARASIMHAN KIDAMBI Mailing Address 18477 85TH AVE N	NARASIMHAN KIDAMBI Mailing Address 18477 85TH AVE N					y y 2012	Y					
City MAPLE GROVE	State MN	Zip Code 55311		action ID : PR of Each Rece)					
FEC ID number of contributing federal political committee.	С				7	40.0	00					
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		u Business Analysis Year-to-Date ▼ 360.00	P/R Dedu	uction (\$20.00	Bi-Wee	kly)						
Full Name (Last, First, Middle Initial) C. JULIE K MACLEOD			Date of	Beceint								
Mailing Address 15314 JEFFERS PASS I	NW											
City PRIOR LAKE	State MN	Zip Code 55372		action ID : PR of Each Rece)					
FEC ID number of contributing federal political committee.	С				,	28.	00					
Name of Employer United HealthCare Services Inc	Occupation Human Ca	n pital Partner (Mgr)										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Ded	uction (\$14.00	Bi-Wee	kly)						
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num	,	•		7	5	148.0	00					

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	IMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1'						
or	or commercial purposes, other than using the			erson for the purpose of soliciting contributions						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)							
	Full Name (Last, First, Middle Initial) MICHELLE MARTO			Date of Receipt						
	Mailing Address 149 WILLIAMSBURG COURT			08 31 Y Y Y Y Y Y Y						
	City ALBANY	State NY	Zip Code 12203	Transaction ID : PR2552964728399						
	FEC ID number of contributing iederal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re		_						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)						
	Full Name (Last, First, Middle Initial) CARL A MATTSON			Date of Receipt						
	Mailing Address 405 ELIZABETH COURT			08 31 2012						
	City SCHENECTADY	State NY	Zip Code 12303	Transaction ID : PR2552964828399 Amount of Each Receipt this Period						
	FEC ID number of contributing rederal political committee.	ů – Elektrik – Elektri								
	Name of Employer Jnited HealthCare Services Inc	Occupation Dir Client Sv		_						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)						
	Full Name (Last, First, Middle Initial) REBECCA BALLARD MCCABE			Date of Receipt						
	Mailing Address 111 CONNORS CIRCLE			08 31 2012						
	City CARY	State NC	Zip Code 27511	Transaction ID : PR2552964928399						
	FEC ID number of contributing	C	2/311	Amount of Each Receipt this Period 28.00						
	Name of Employer	Occupation								
	United HealthCare Services Inc	KA Sr Sales	s Executive							
	Receipt For: Primary General		Year-to-Date ▼	P/R Deduction (\$14.00 Bi-Weekly)						
	Other (specify)	L	252.00	· · · · · · · · · · · · · · · · · · ·						
s	JBTOTAL of Receipts This Page (optional)			84.00						

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	
			Dotailog Outilitiary 1 age		13		14		15		16	1
or	y information copied from such Reports and for commercial purposes, other than using t											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)									
	Full Name (Last, First, Middle Initial) LESLIE K PAULUS			1	Date of	Re	eceip	ot				
	Mailing Address 305 E TUCKEY LN			08 31 2012								Y
	City	State	Zip Code		Trans	acti	ion l	D : P	R2552	9652	28399)
	PHOENIX	AZ	85012	/	Amount	of	Eac	h Re	ceipt th	is Pe	eriod	
	FEC ID number of contributing federal political committee.	С					7		y		28.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	Medical Dir	ector									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi-Weekly)								
	Full Name (Last, First, Middle Initial) GARY W PEKA				Date of	Re	eceip	ot				
	Mailing Address 1122 FALLS CURVE				м м 08	/	D	31	/ Y	۲ 202		Y
	City	State	Zip Code		Trans	acti	ion I	D : P	R25529	96532	28399	
	CHASKA	MN	55318	/	Amount	t of	Eac	h Re	ceipt th	is Pe	eriod	
	FEC ID number of contributing federal political committee.	ů l								_	28.0	00
	Name of Employer United HealthCare Services Inc											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/	R Ded	uctio	on (\$	\$14.0	0 Bi-We	ekly))	
с.	Full Name (Last, First, Middle Initial) DONALD W POTTER JR				Date of	Re	eceip	ot				
	Mailing Address 116 FULLER LANE				м м 08	1	D	31	/ Y	20 ⁻	ү 12	Y
	City	State	Zip Code		Trans	act	ion	ID : F	R2552	9654	28399)
	WINNETKA	IL	60093	/	Amount	t of	Eac	h Re	ceipt th	is Pe	eriod	
	FEC ID number of contributing federal political committee.	С			28.00							00
	Name of Employer	Occupation										
	United HealthCare Services Inc	NA VP, Clie	ent Relationships									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		252.00	P.	/R Ded	ucti	on (S	\$14.0	0 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)			►			7		y		84.0	00

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using th		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. KRISTINE G SAMSEL		Date of Receipt
Mailing Address 91 WAVERLY RD		08 / D D / Y F Y F Y F Y 08 31 2012
City HUNTINGTON	State Zip Code CT 06484	Transaction ID : PR2552965728399
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 28.00
Name of Employer United HealthCare Services Inc	Occupation Dir Provider Data	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. THOMAS D SCIUTO		Date of Receipt
Mailing Address 160 ACORN LANE		08 31 2012
City MILFORD	State Zip Code CT 06461	Transaction ID : PR2552966128399 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 KA Dir Acct Mgmt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. BARRY R STREIT	1	Date of Receipt
Mailing Address 5421 KELLOGG AVENUE		08 31 2012
City EDINA	State Zip Code MN 55424	Transaction ID : PR2552966728399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
United HealthCare Services Inc	RVP Medicare Field Sales	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		

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	ZED RECEIPTS		Use separate schedule(s)	(check or	nly one)			
			for each category of the Detailed Summary Page	X 11a	11b	11c	12	17
	ormation copied from such Reports and sommercial purposes, other than using the			erson for the	e purpose	of solicitin	g contribut	tions
	ie of COMMITTEE (In Full) itedHealth Group Incorporat	ed PAC (l	Jnited for Health)					
	Name (Last, First, Middle Initial) IN R TINKER			Date	of Receip	t		
	ng Address 2125 SPURS COURT			08		31 / Y	2012	Y
City LAS	VEGAS	State NV	Zip Code 89135		96682839 his Period	9		
	ID number of contributing ral political committee.	С					28	5.00
Unite	e of Employer ed HealthCare Services Inc		Affairs Sr Cnslt					
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.00	P/R De	eduction (\$	\$14.00 Bi-W	eekly)	
	Name (Last, First, Middle Initial) OMAS C VANDERHEYDEN			Date	of Receip	t		
	ng Address 534 WAYZATA BLVD E			08		31 [/]	2012	Y
City WAN	YZATA	State MN	Zip Code 55391			D : PR2552 h Receipt tl		
	ID number of contributing ral political committee.	С			7		28	.00
	e of Employer ed HealthCare Services Inc	Occupation VP, Produc						
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R De	duction (\$	614.00 Bi-W	eekly)	
	Name (Last, First, Middle Initial)			Date	of Receip	t		
Maili	ng Address 4704 CAVAN ROAD			M 08		31 / Y	2012	Y
City MO	UND	State MN	Zip Code 55364			I D : PR2552 h Receipt tl		
	ID number of contributing ral political committee.	C				J	28	3.00
	e of Employer ed HealthCare Services Inc	Occupation	ations Dvlpmnt					
	Primary General Other (specify)		Year-to-Date ▼ 252.00	P/R De	eduction (\$	\$14.00 Bi-W	eekly)	
SUBTO	DTAL of Receipts This Page (optional)						84.	.00
ΤΟΤΑΙ	- This Period (last page this line number	only)			9			

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	Jnited for Health)	
Full Name (Last, First, Middle Initial) A. WILLIAM OWEN WILLIAMS II			Date of Receipt
Mailing Address 12419 BELLINGRATH ST	REET	Zip Code	08 31 2012
CARMEL	IN	46032	Transaction ID : PR2552967128399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		80.00
Name of Employer Golden Rule Insurance Company Receipt For: Primary General		eeneral Counsel Year-to-Date ▼	P/R Deduction (\$40.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)	L	720.00	
B. MARK W HENRY			Date of Receipt
Mailing Address 2237 REGAL COURT			08 31 2012
	State TN	Zip Code	Transaction ID : PR2553474428399
MURFREESBORO FEC ID number of contributing federal political committee.	С	37129	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation Assoc Dir N	etwork Programs	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. SCOTT A NAASZ			Date of Receipt
Mailing Address 14327 BLUEBIRD TRAIL	NE		M = M / D = D / Y = Y = Y = Y Y O8 31 2012 O8 O9 O9
City PRIOR LAKE	State MN	Zip Code 55372	Transaction ID : PR2553474728399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		28.00
Name of Employer	Occupation		—
United HealthCare Services Inc	VP Custom	er Service	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		252.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			136.00
TOTAL This Period (last page this line numb	per only)		

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		Use separate schedule(s)	(check onl	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12						
			13	11b 11c 12 14 15 16 purpose of soliciting contributions from such committee. Receipt / 31 2012 action ID : PR2553475128399 of Each Receipt this Period 78.00 78.00 uction (\$39.00 Bi-Weekly)								
Any information copied from such Reports and or for commercial purposes, other than using	I Statements mather the name and a	ay not be sold or used by any p address of any political committee	erson for the e to solicit co	purpose of ntributions f	soliciting rom suct	contribut	ions ee.					
NAME OF COMMITTEE (In Full)												
> UnitedHealth Group Incorpora	ated PAC (United for Health)										
Full Name (Last, First, Middle Initial)												
			Date of	f Receipt								
Mailing Address 688 WEST SYCAMORE			08		/ Y		Y					
City	State	Zip Code			PR25534		9					
VERNON HILLS	IL	60061	Amoun	t of Each R	eceipt th	is Period						
FEC ID number of contributing federal political committee.	С					78	.00					
·	Occupation		_									
Name of Employer United HealthCare Services Inc	Occupatior Dir Claims	1										
Receipt For:	I	Year-to-Date ▼										
Primary General	Aggregate		P/R Ded	luction (\$39.	00 Bi-We	ekly)						
Other (specify)		702.00										
Full Name (Last, First, Middle Initial)												
B. ANDREW J SULLIVAN			Date of	f Receipt								
Mailing Address 1101 ROSEWOOD DRIVE			M		/ Y		Y					
City	State	Zip Code	08 Trans		PR2553/		2					
ATLANTA	GA	30306					,					
FEC ID number of contributing federal political committee.	C					28.	00					
Name of Employer	Occupation	1	_									
United HealthCare Services Inc	SVP Optum	nInsight Consulting										
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		, 252.00	P/R Ded									
Full Name (Last, First, Middle Initial) C. RICHARD D THOMAS			Date o	f Receipt								
Mailing Address 5121 DUPONT AVENUE S	OUTH		M M	/ D D	/ Y	Y Y Y	Y					
City	State	Zip Code	08 Trans	31 saction ID :	PR25534	2012 47542839	9					
MINNEAPOLIS	MN	55419		t of Each R			-					
FEC ID number of contributing federal political committee.	C				7	194	.00					
Name of Employer	Occupation	1										
United HealthCare Services Inc	VP Genera	I Management										
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify)		1746.00	P/R Dec	luction (\$97.	.00 Bi-We	eekly)						
SUBTOTAL of Receipts This Page (optional).					7	300.	00					
TOTAL This Period (last page this line numb	er only)				7							

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports a	nd Statements ma	ay not be sold or used by any p	13 14 15 16 erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	y the name and a										
UnitedHealth Group Incorpo	rated PAC (I	United for Health)									
Full Name (Last, First, Middle Initial) A. DENEEN VOJTA			Date of Receipt								
Mailing Address 5201 KELLOGG AVENU	E		08 31 2012								
City EDINA	State MN	Zip Code 55424	Transaction ID : PR2553475528399								
	IVIIN	33424	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		386.00								
Name of Employer	Occupation	1									
United HealthCare Services Inc	SVP Bus In	itiatives & Clin Aff									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		3474.00	P/R Deduction (\$193.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) B. DANIEL J ZERAFA			Date of Receipt								
Mailing Address 61234 ADMIRAL DRIVE			08 31 2012								
City	State	Zip Code	Transaction ID : PR2553475728399								
WASHINGTON TOWNSHIP	MI	48094	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.00								
Name of Employer United HealthCare Services Inc	Occupation VP, IT	I									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. COLLEEN C COHAN			Date of Receipt								
Mailing Address 17402 SAINT THERESA	DRIVE		08 31 2012								
City	State	Zip Code	Transaction ID : PR2554012728399								
OLNEY	MD	20832	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.00								
Name of Employer	Occupation	1	-								
United HealthCare Services Inc	Associate C	General Counsel									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)	······)	442.00								
TOTAL This Period (last page this line num	ber only)										

Use separate schedule(s)

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			for 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			erson for the purpose of soliciting contributions to solicit contributions from such committee.
\ \	ME OF COMMITTEE (In Full) hitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
	Name (Last, First, Middle Initial)			Date of Receipt
	iling Address 23314 EVAN COURT NORTH			08 31 / Y - Y - Y - Y - Y
City	/ W BOSTON	State MI	Zip Code 48164	Transaction ID : PR2554012828399
FE	C ID number of contributing eral political committee.	С	40104	Amount of Each Receipt this Period
	ne of Employer ted HealthCare Services Inc	Occupation VP, IT		
Red	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
	Name (Last, First, Middle Initial) HELLY A ESPINOSA			Date of Receipt
Ma	iling Address 4060 WHITE OAK LANE			08 31 2012
City EX	/ CELSIOR	State MN	Zip Code 55331	Transaction ID : PR2554012928399 Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		28.00
	ne of Employer ted HealthCare Services Inc	Occupation Dir Found/S		
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
	Name (Last, First, Middle Initial)			Date of Receipt
Ma	iling Address 13420 JAY ST NW			08 31 2012
City	/ IDOVER	State MN	Zip Code 55304	Transaction ID : PR2554013028399
FE	C ID number of contributing eral political committee.	C	55504	Amount of Each Receipt this Period 78.00
Na	ne of Employer	Occupation		
	ited HealthCare Services Inc		tion Technology	
Ree	Primary General	Aggregate	Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi-Weekly)
	Other (specify)		1	1
	FOTAL of Receipts This Page (optional)			134.00

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					—						
	y information copied from such Reports and S for commercial purposes, other than using the					14 15 16 purpose of soliciting contribution committee. f Receipt / 2012 / 31 2012 iaction ID : PR2554013128399 t of Each Receipt this Period 28.00 28.00 uction (\$14.00 Bi-Weekly) f Receipt										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate															
۹.	Full Name (Last, First, Middle Initial) PATRICK J MEYER			[Date of	Re	eceipt									
	Mailing Address 20676 HAZELWOOD TRAIL				м м 08		D D	/ Y			Y					
	City	State	Zip Code		Trans	acti	ion ID :	PR2554	013 [,]	128399	•					
	LAKEVILLE	MN	55044	/	Amount	t of	Each R	eceipt t	his F	Period						
	FEC ID number of contributing federal political committee.	С					7			28.	00					
	Name of Employer	Occupation														
	United HealthCare Services Inc	Assoc Dir Ir	ntl Aud & Adv Svcs													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Primary General Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi-Weekly)												
	Full Name (Last, First, Middle Initial) THOMAS W MOORE			Date of Receipt												
	Mailing Address 10733 TAVISTOCK DRIVE			08 31 2012												
	City	State	Zip Code													
	ТАМРА	FL	33626	/	Amount	t of	Each R	eceipt t	his F	Period						
	FEC ID number of contributing federal political committee.	С					7			28.	00					
	Name of Employer United HealthCare Services Inc	Occupation PS VP Sale														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/	R Dedu	uctio	on (\$14.(00 Bi-W	eekly	y)						
с.	Full Name (Last, First, Middle Initial) GREGORY D REIDY			[Date of	Re	eceipt									
	Mailing Address 1016 BLAKEFIELD DRIVE				м м 08	1		/ 7			Y					
		State TN	Zip Code								9					
	BRENTWOOD	IIN	37027	/	Amount	t of	Each R	eceipt t	his F	Period						
	FEC ID number of contributing federal political committee.	С					,			28	00					
	Name of Employer	Occupation														
	United HealthCare Services Inc	Health Plar	CEO													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Other (specify)		252.00	P/	/R Ded	ucti	on (\$14.	00 Bi-W	/eekl	y)						
s	UBTOTAL of Receipts This Page (optional)						,			84.	00					
т	OTAL This Period (last page this line number	only)					, .									

FOR LINE NUMBER:

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Any information copied from such Reports and Statements may not be sold or used by any period for the purpose of soliciting contributions from such committee Date of Receipt NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) Date of Receipt NAME OF COMMITTEE (In Full) Date of Receipt Date of Receipt Full Name (Last, First, Middle Initial) A. ASIR U AHMAD Date of Receipt Mailing Address 1935 HILLWOOD DRIVE City State Zip Code BLOOMFIELD HILLS Mi 48304 Transaction ID : PR256006422399 Anse of Employer Occupation City State Zip Code Pirinary General Occupation Medical Director Pirasection ID : PR256006422399 Receipt For: Other (specify) v Aggregate Year-to-Date v P/R Deduction (S14.00 Bi-Weekly) Date of Receipt B. JOY L ALEXANDER Mailing Address 7624 HASKELL FLATS DRIVE Date of Receipt Date of Receipt City State Zip Code Nv B9128 P/R Deduction (S14.00 Bi-Weekly) FEC ID number of contributing tederal political committee. Occupation Aggregate Year-to-Date v P/R Deduction (S14.00 Bi-Weekly) Pirinary General Occupation		FIL 12		for each category of the Detailed Summary Page		X 11a 11b 11c 12 13 14 15 16					17			
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Full Name (Last, First, Middle Initial) CRAIG W GAGE				Date of	Re	ceipt			
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NAME OF COMMITTEE (In Full)	ated PAC (Unite	ed for Health)								
Full Name (Last, First, Middle Initial) A. DONALD J GIANCURSIO			Date of Receipt							
Mailing Address 72 MIDNIGHT RIDGE DR										
City LAS VEGAS		ip Code 39135								
FEC ID number of contributing federal political committee.	C									
Name of Employer Health Plan of Nevada	Occupation Health Plan CEO									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 3474.00	P/R Deduction (\$193.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) 3. STEVEN G HOLM			Date of Receipt							
Mailing Address 9369 GLACIER ROAD										
City MINNETRISTA		ïp Code 5375								
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City PHOENIX		/ip Code 35021	Transaction ID : PR2560065128399							
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (United for Health)											
Full Name (Last, First, Middle Initial) A. KEVIN MICHAEL MARONEY				Date of	Re	ceipt							
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	City	State MD	Zip Code						00662283					
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Α.	Full Name (Last, First, Middle Initial) DEBRA C COLLINS				Date of	f Re	eceipt												
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В.	Full Name (Last, First, Middle Initial) KRISTA J DICKMAN				Date of	f Re	eceipt												
	Mailing Address 2533 ONYX DRIVE			08 31 2012 Transaction ID : PR2560398128399															
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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.									
NAME OF COMMITTEE (In Full)	-											
UnitedHealth Group Incorport	orated PAC (I	United for Health)										
Full Name (Last, First, Middle Initial) A. BRIAN W LUND			Date of Receipt									
Mailing Address 464 EAST NORTH AVE			08 31 2012									
City GRANTSBURG	State WI	Zip Code 54840	Transaction ID : PR2561457628399 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:	Occupation Mgr Tax Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		452.00	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			08 31 2012									
City FORT LAUDERDALE	State FL	Zip Code 33305	Transaction ID : PR2563211028399 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		78.00									
Name of Employer United HealthCare Services Inc	Occupation Spec Ben G	Govt Dental Sales Mgr										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) C. KATHLEEN R CRAMPTON			Date of Receipt									
Mailing Address 2335 SOUTH OCEAN B	LVD B5		08 31 2012									
City PALM BEACH	State FL	Zip Code 33480	Transaction ID : PR2563211128399									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer	Occupation	1										
United HealthCare Services Inc Receipt For:	Plan Presid											
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1800.00	P/R Deduction (\$100.00 Bi-Weekly)									
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	Jnited for Health)									
Full Name (Last, First, Middle Initial) JACQULYN M BARTON			Date of Receipt								
Mailing Address 1587 112 TH COURT WES			M = M / D = D / Y = Y = Y Y 08 31 2012 1								
City INVER GROVE HEIGHTS	State MN	Zip Code 55077	Transaction ID : PR2563211228399								
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Name of Employer United HealthCare Services Inc	Occupation VP, Human	ı ı Capital Partner									
Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) 3. JENNIFER F WALSH			Date of Receipt								
Mailing Address 3116 4TH STREET NORTH	ł		08 31 2012								
City ARLINGTON	State VA	Zip Code 22201	Transaction ID : PR2564296828399 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		194.00								
Name of Employer United HealthCare Services Inc	1										
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Full Name (Last, First, Middle Initial)			Date of Receipt								
Mailing Address 5009 ASHINGTON LANDIN			M M / D / Y								
City TAMPA	State FL	Zip Code 33647	Transaction ID : PR2564296928399								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 333.34								
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/	UnitedHealth Group Incorporate	ea PAC (l	United for Health)									
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B	Full Name (Last, First, Middle Initial) STEPHEN E SWANSON				Date of	Be	coint					
υ.	Mailing Address 3001 HUNTINGTON COURT					110		/ Y	Y Y	Y		
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	Other (specify) ▼		702.00	P/R Deduction (\$39.00 Bi-Weekly)								
<u>с</u>	Full Name (Last, First, Middle Initial) HARVEY J BALTHASER				Date of	Be	ceint					
J .	Mailing Address 11417 ARCHSTONE DR			\neg		/		/ Y	YY	Y		
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	City AUSTIN	State TX	Zip Code	\vdash					29752839	9		
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	United HealthCare Services Inc	Medical Dir	ector									
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (United for Health)							
Full Name (Last, First, Middle Initial) A. STEVEN C WALLI		Date of Receipt						
Mailing Address 18615 CHARLEVOIX LANE		08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City CHESTERFIELD	State Zip Code MO 63005	Transaction ID : PR2564297628399						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
Name of Employer United HealthCare Services Inc	Occupation Health Plan CEO							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) B. ELLEN L DAMATO		Date of Receipt						
Mailing Address 1300 DALHART DRIVE		08 31 2012						
City ALLEN	State Zip Code TX 75013	Transaction ID : PR2564802228399 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	28.00						
Name of Employer United HealthCare Services Inc								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) C. JOSH A WILLSON	1	Date of Receipt						
Mailing Address 704 SUELLEN CIR		08 31 2012						
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Full Name (Last, First, Middle Initial) A. MARK BELLMAN			Date of Receipt										
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	FEC ID number of contributing federal political committee.				7		7		194.	00				
	Name of Employer United HealthCare Services Inc													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1746.00	P/R Deduction (\$97.00 Bi-Weekly)										
	Full Name (Last, First, Middle Initial) BARRY HOFER				Date o	f Re	ecei	pt						
	Mailing Address 10464 SHELTER GROVE				08	/		31	/)12	Y		
		State MN	Zip Code						PR2564			9		
	EDEN PRAIRIE	IVIIN	55347		Amoun	t of	Ea	ch Re	eceipt t	his F	eriod			
	FEC ID number of contributing federal political committee.	С					,				28	.00		
	Name of Employer	Occupation												
	United HealthCare Services Inc	VP Finance												
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi-Weekly)										
S	J BTOTAL of Receipts This Page (optional)			<u> </u>							300.	00		

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170	TEMIZED RECEIPTS		Use separate schedule(s)	(cł	neck only									
116			for each category of the Detailed Summary Page		X 11a		11b	11c	12					
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	for commercial purposes, other than using the													
\backslash	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporate		United for Health)											
Α.	Full Name (Last, First, Middle Initial) KATHRYN S RUBIN				Date of	Re	ceipt							
	Mailing Address 310 SYCAMORE LANE				M M	/	DD	/ Y	Y Y	Y				
		<u></u>	7.0.1	08 31 2012										
	City PLYMOUTH	State MN	Zip Code 55441						80432839	9				
	FEC ID number of contributing			_	Amount	01		ceipt tr	iis Period	_				
	federal political committee.	С			L		7	7	194	.00				
	Name of Employer	Occupation												
	United HealthCare Services Inc		Resp/Pres Foundation	_										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		P/R Dedu	Ictic	n (¢07 (okly)					
	Other (specify)		1746.00		F/R Deul	uctic	JII (\$97.0	JU DI-116	eekiy)					
				<u> </u>										
	Full Name (Last, First, Middle Initial) MELISSA A EASON				Date of	Re	ceipt							
	Mailing Address 2501 COLBY COVE				м м 08	/	D D D 31	/ Y	y y 2012	Y				
	City	State	Zip Code		Transa	acti	on ID : F	R25648	30442839	Ð				
	AUSTIN	ТХ	78723	_	Amount	of	Each Re	eceipt th	is Period					
	FEC ID number of contributing federal political committee.	С					7	7	28	.00				
	Name of Employer	Occupation												
	United HealthCare Services Inc	Dir Regulate	bry Affairs											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				(6 · · · 6							
	Other (specify) ▼		, 252.00] '	P/R Dedu	uctio	on (\$14.0	0 Bi-We	ekly)					
	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt							
	Mailing Address 2121 PARK FOREST DRIVE				M M	/	D D	/ Y	Y Y	Y				
	Cit.	Ctoto	Zin Codo	_	08	١.	31		2012					
	City CHESTERFIELD	State MO	Zip Code 63017						80452839 iis Period	9				
	FEC ID number of contributing				Amount	U				_				
	federal political committee.	С			L		7	7	80	.00				
	Name of Employer	Occupation												
	United HealthCare Services Inc	Dir Govt Re												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				··· (\$40.0							
	Other (specify)		720.00		P/R Ded	UCTIC	on (\$40.0	00 BI-VV	еекіу)					
s	JBTOTAL of Receipts This Page (optional)								302.	00				
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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 the name and address of any political committe	person for the purpose of soliciting contributions see to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. DONNA M CRAIG		Date of Receipt
Mailing Address 10761 INDEPENDENCE V		08 / D D / Y Y Y Y Y 2012
City CARMEL	State Zip Code IN 46032	Transaction ID : PR2565448828399
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation Regional Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. NORINE YUKON		Date of Receipt
Mailing Address 4904 BALCONES DRIVE		08 31 2012
City AUSTIN	State Zip Code TX 78731	Transaction ID : PR2565449028399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer United HealthCare Services Inc	Occupation Plan President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. NEIL A MANSUKHANI		Date of Receipt
Mailing Address 4215 LAUREL RIDGE CIR		08 31 2012
City WESTON	State Zip Code FL 33331	Transaction ID : PR2567129428399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer	Occupation	
United HealthCare Services Inc	SB Dir PEO Sales	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	252.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		84.00
TOTAL This Period (last page this line numb	per only)	

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (U	Inited for Health)	
Δ.	Full Name (Last, First, Middle Initial) DENISE V ZAMORE			Date of Receipt
	Mailing Address 12 NOLAN CIRCLE	Ctata	Zia Cada	08 / D D / Y Y Y Y Y 08 31 2012
	City MANCHESTER	State CT	Zip Code 06042	Transaction ID : PR2567129528399 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) ▼		eneral Counsel Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi-Weekly)
в.	Full Name (Last, First, Middle Initial) ROBERT EDWARD CLARK			Date of Receipt
	Mailing Address 3220 XANTHUS LANE NORTH	4		08 31 2012
	City PLYMOUTH	State MN	Zip Code 55447	Transaction ID : PR2567129628399 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Marketing	g Bus Dev	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi-Weekly)
<u>с.</u>	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address N62W13531 SUNBRUST DRI	VE		08 31 Y Y Y Y 2012
	City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID : PR2568900528399 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	Health Plan	CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	P/R Deduction (\$50.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			206.00
Т	OTAL This Period (last page this line number of	only)	••••••	•

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NAME OF COMMITT	EE (In Full) Group Incorporated	d PAC (U	nited for Healt	h)					
Full Name (Last, Firs A. KENDALL B MA					Date of	Receipt			
	W24078 CRAVEN DR	01-11-	Zie Ostie		08	31		ү ү 2012	
City SUSSEX		State WI	Zip Code 53089			action ID			
FEC ID number of co federal political comm	0	С				of Each I			.00
Name of Employer United HealthCare Se	rvices Inc	Occupation SB Dir Accou	unt Mgmt						
Receipt For: Primary Other (specify)	General ▼	Aggregate Y	′ear-to-Date ▼	702.00	P/R Ded	uction (\$39	0.00 Bi-We	ekly)	
Full Name (Last, Firs B. MATTHEW H S					Date of	Receipt			
Mailing Address 513	I MASSACHUSETTS AVEN	NUE			M M 08	/ D 31		ү ү 2012	Y
City BETHESDA		State MD	Zip Code 20816			action ID : of Each I			
FEC ID number of co federal political comm	0	С				- 7		78	.00
Name of Employer United HealthCare Se	rvices Inc	Occupation Dir Communi	cations		-				
Receipt For: Primary Other (specify)	General ▼	Aggregate Y	′ear-to-Date ▼	624.00	P/R Dedu	uction (\$39	.00 Bi-We	ekly)	
Full Name (Last, Firs					Date of	Receipt			
	1 WEXCROFT DRIVE				м м 08	/ D 31		ү ү 2012	Y
City BRENTWOOD		State TN	Zip Code 37027			action ID of Each I			
FEC ID number of configuration federal political comm	0	С				,	,		8.00
Name of Employer		Occupation			-				
United HealthCare Se	ervices Inc	Dir Network	Contracting						
Receipt For: Primary Other (specify)	General ▼	Aggregate Y	′ear-to-Date ▼	224.00	P/R Ded	uction (\$14	I.00 Bi-₩e	ekly)	
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			for each category of the Detailed Summary Page		11a 13		11b 14		11c 15	12 16	17
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 po ddress of any political committee	erson fo e to solid	or the p cit con	purp Itribi	oose utions	of s s fro	oliciting	contribu commit	itions tee.
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) BRUCE E MOYER			Di	ate of	Re	ceipt				
	Mailing Address 18426 MAGENTA BAY				м м 08	/	D 3	D 1	/ Y	ү ү 2012	Y
	City EDEN PRAIRIE	State MN	Zip Code 55347-1051							7832839	
	FEC ID number of contributing federal political committee.	C		Ar	mount	of	Each	Re	ceipt th	is Perioc 28	1 3.00
	Name of Employer United HealthCare Services Inc	Occupation VP Finance									
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 224.00	P/F	R Dedu	uctic	on (\$1	4.0	0 Bi-We	ekly)	
В.	Full Name (Last, First, Middle Initial) JAMES E BAKER			D	ate of	Re	ceipt				
	Mailing Address 215 FORREST LAKE ROAD				м м 08	/	D 3	D 1	/ Y	ү ү 2012	Y
	City ALPHARETTA	State GA	Zip Code 30022				-			8872839 is Perioc	-
	FEC ID number of contributing federal political committee.	С					7		Ţ	28	3.00
	Name of Employer United HealthCare Services Inc	Occupation KA Sr Sales									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R	R Dedu	ıctio	on (\$1	4.0	0 Bi-We	ekly)	
	Full Name (Last, First, Middle Initial)			Di	ate of	Re	ceipt				
	Mailing Address 715 WOODSCAPE TRAIL				м м 08	/	D 3	D 81	/ Y	y y 2012	Y
	City ALPHARETTA	State GA	Zip Code 30022							5888283	
	FEC ID number of contributing federal political committee.	C		Ar	mount	of	Each	Re	ceipt th	is Perioc 7	I 3.00
	Name of Employer	Occupation		_							
	United HealthCare Services Inc	Health Plan	CEO								
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 585.00	P/F	R Dedu	uctio	on (\$3	39.0	0 Bi-We	ekly)	
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ITEMIZED RECEIPTS	tor each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)	
Full Name (Last, First, Middle Initial) MARCUS A ROBINSON		Date of Receipt
Mailing Address 595 JEFFERSON CHASE ST		M = M / D = D / Y = Y = Y = Y Y 08 31 2012
	State Zip Code GA 30354	Transaction ID : PR2572588928399
ATLANTA FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation SB Mgr Sales - Producing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. SHAUN R JACQUET		Date of Receipt
Mailing Address 4332 FOREST RIDGE DRIVE		08 31 Y Y Y Y Y Y
City GREEN BAY	State Zip Code WI 54313	Transaction ID : PR2572589328399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer United HealthCare Services Inc	Occupation Dir Customer Service	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. JEFFREY P DEAN		Date of Receipt
Mailing Address W5912 DEAN ROAD		08 / D D / Y Y Y Y Y 02012
City TOMAHAWK	StateZip CodeWI54487	Transaction ID : PR2572589428399 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	80.00
Name of Employer	Occupation	
United HealthCare Services Inc	Assoc Dir Finance	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	600.00	P/R Deduction (\$40.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		136.00
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)	
Α.	Full Name (Last, First, Middle Initial) THOMAS E SMITH			Date of Receipt
	Mailing Address 1502 EAST AVENUE NORTH	01-1-	7	08 / D D / Y Y Y Y 08 31 2012
	City ONALASKA	State WI	Zip Code 54650	Transaction ID : PR2572589528399
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		Management Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) JOSEPH A GRAY Mailing Address 19480 ELBERT POINT			Date of Receipt
	City	State	Zip Code	08 31 2012 Transaction ID : PR2572589828399
	SHOREWOOD FEC ID number of contributing federal political committee.	MN C	55331	Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc	Occupation Human Cap	ital Partner	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
с.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 4909 WEST SUNNYSLOPE R	OAD		08 31 2012
	City EDINA	State MN	Zip Code 55424	Transaction ID : PR2572590028399
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	United HealthCare Services Inc	Chief of Sta	ff	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional)			134.00

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

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(che	eck only	or or	ie)			
			for each category of the Detailed Summary Page		11a		11b	11c	12	
	ny information copied from such Reports and									
or	for commercial purposes, other than using th	ie name and a	ddress of any political committee	e to so	licit con	itrib	utions	from suc	h commit	tee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (l	Jnited for Health)							
A.	Full Name (Last, First, Middle Initial) CHARLES WACKER				Date of	Re	ceipt			
	Mailing Address 2747 WEST VIEW DRIVE				м м 08	/	31	D / Y	2012	Y
	City NEW PRAGUE	State MN	Zip Code 56071						59012839 his Period	
	FEC ID number of contributing federal political committee.	C					7			3.00
	Name of Employer United HealthCare Services Inc Receipt For:		el Ex OptumInsight Year-to-Date ▼							
	Primary General Other (specify) ▼		, 210.00		/R Dedu	uctio	on (\$14	.00 Bi-W	eekly)	
В.	Full Name (Last, First, Middle Initial) CHRISTINE OBRIEN				Date of	Re	ceipt			
	Mailing Address 764 TOPAZ STREET				м м 08	/	31		2012	Y
	City NEW ORLEANS	State LA	Zip Code 70124				-		59062839 nis Period	-
	FEC ID number of contributing federal political committee.	С						, , , , , , , , , , , , , , , , , , ,		.00
	Name of Employer United HealthCare Services Inc	Occupation KA Dir Sale	s and Acct Mgmt							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/	/R Dedu	ıctic	on (\$14	.00 Bi-We	eekly)	
с.	Full Name (Last, First, Middle Initial) JAMES R HARGIS				Date of	Re	ceipt			
	Mailing Address 1820 ROSEDALE				м м 08	/	D 31		2012	Y
	City EDMOND OKLAHOMA	State OK	Zip Code 73013						59072839 nis Period	
	FEC ID number of contributing federal political committee.	C					9		30	0.00
	Name of Employer	Occupation								
	United HealthCare Services Inc Receipt For:	Mgr Pharma								
	Primary General Other (specify)		Year-to-Date ▼ 225.00	P	P/R Ded	uctio	on (\$15	i.00 Bi-W	eekly)	
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	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)										
	Full Name (Last, First, Middle Initial) THERESA M CLARKE				Date of	Re	ceipt						
l	Mailing Address 16644 GRAND AVE				м – м 08	/	31)12	Y		
(City	State	Zip Code			acti		PR257					
-	BELLFLOWER	CA	90706		Amount	of	Each F	Receipt	this P	eriod			
	FEC ID number of contributing rederal political committee.	С					,			78.0	00		
Ī	Name of Employer	Occupation											
	United HealthCare Services Inc	Assoc Dir U	tilization Mgmt										
I	Receipt For:	Aggregate	Year-to-Date ▼										
		Primary General 585.00							Veekly	/)			
				1.									
	Full Name (Last, First, Middle Initial) KIMBERLEY S MILLER	I			Date of	Re	ceipt						
I	Mailing Address 16 CELONOVA PLACE				м м 08	/	D 31			12	Y		
(City	State	Zip Code		Transa	acti	on ID :	PR257	25912	28399			
-	FOOTHILL RANCH	CA	92610		Amount	of	Each F	Receipt	this P	eriod			
	FEC ID number of contributing rederal political committee.	С				_	9			28.0	00		
	Name of Employer	Occupation											
	Jnited HealthCare Services Inc	Dir Underwi	iting										
I	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		, 210.00] ^P	P/R Dedu	uctic	on (\$14	.00 Bi-V	Veekly	')			
	Full Name (Last, First, Middle Initial) WEI SUN				Date of	Re	ceipt						
-	Mailing Address 7049 FIRENZA PL				м м 08	/				12	Y		
(City	State	Zip Code		Trans	acti		: PR257)		
-	DUBLIN	OH	43016		Amount	of	Each F	Receipt	this P	eriod			
	FEC ID number of contributing rederal political committee.	С				_	,			28.0	00		
Ī	Name of Employer	Occupation											
	United HealthCare Services Inc	Dir Actuaria	I Services										
I	Receipt For:	Year-to-Date ▼											
	Primary General Other (specify) ▼]	P/R Ded	uctio	tion (\$14.00 Bi-Weekly)								
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			Detailed Summary Page		-		11b	11c	12	
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	y information copied from such Reports and for commercial purposes, other than using t									
	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorpora	ted PAC (I	United for Health)							
٩.	Full Name (Last, First, Middle Initial) THOMAS P WIFFLER				Date of	f Re	eceipt			
	Mailing Address 1421 SOMERFIELD DRIVE				м м 08	/	D D 31	/ Y	у у 2012	Y
	City	State	Zip Code		Trans	acti	ion ID : I	PR25729	99272839	9
-	BOLINGBROOK	IL	60490		Amoun	t of	Each Re	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					7	7	194	.00
	Name of Employer	Occupation	1							
	United HealthCare Services Inc	Health Plar	CEO							
		Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		1358.00		P/R Ded	uctio	on (\$97.(00 Bi-We	eekly)	
	Full Name (Last, First, Middle Initial) MICHAEL J MCGINNITY				Date of	f Re	eceipt			
	Mailing Address 903 MCINDOE ST				08	/	D D 31	/ Y	у у 2012	Y
	City	State	Zip Code		Trans	acti	ion ID : I	PR25735	51902839	9
-	WAUSAU	WI	54403	_	Amoun	t of	Each Re	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					7	7	78	.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Client S	ı vc Acct Mgt							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P	/R Ded	uctio	on (\$39.()0 Bi-We	eekly)	
	Full Name (Last, First, Middle Initial) JOHN C SICKELS				Date of	f Re	eceipt			
	Mailing Address 1706 TALL OAKS				м м 08	/	D D 31	/ Y	у у 2012	Ŷ
	City	State WI	Zip Code						51912839	
-	WAUSAU	VVI	54403		Amoun	t of	Each Re	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					,		78	3.00
	Name of Employer	Occupation	1	\neg						
	United HealthCare Services Inc	TPA Nation	nal VP Sales & AM							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		507.00	F	P/R Ded	lucti	on (\$39.)	00 Bi-W€	eekly)	
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	1713	for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied fr	om such Reports and Statements r	nay not be sold or used by any p	13 14 15 16 17 person for the purpose of soliciting contributions
			e to solicit contributions from such committee.
NAME OF COMMITTE	er (In Full) Froup Incorporated PAC	(United for Health)	
Full Name (Last, First, ANITA Q MESSA			Date of Receipt
Mailing Address 1693	5 41ST AVE N		08 31 2012
City PLYMOUTH	State MN	Zip Code 55446	Transaction ID : PR2573877028399 Amount of Each Receipt this Period
FEC ID number of cor federal political commi	ŝ.		250.00
Name of Employer United HealthCare Ser Receipt For:	vices Inc VP Gener	on al Management	
Primary Other (specify)	General	e Year-to-Date ▼ 1500.00	P/R Deduction (\$125.00 Bi-Weekly)
Full Name (Last, First, CARY J MCCAR			Date of Receipt
Mailing Address 8800			M = M / D = D / Y = Y = Y = Y Q 08 31 _2012
City NORTH RICHLAND H	State TX	Zip Code 76182	Transaction ID : PR2575059428399 Amount of Each Receipt this Period
FEC ID number of con federal political commi	ntributing		78.00
Name of Employer United HealthCare Serv	vices Inc VP Gener	on al Management	
Receipt For: Primary Other (specify)	General	e Year-to-Date ▼ 390.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, SCOTT THOMA			Date of Receipt
Mailing Address 2 PL	OWBOY PATH		08 31 2012
City COMMACK	State NY	Zip Code 11725-1410	Transaction ID : PR2575122228399 Amount of Each Receipt this Period
FEC ID number of con federal political commi	ŝ.		728.00
Name of Employer United HealthCare Ser	vices Inc KA Dir Ac		
Receipt For: Primary Other (specify)	General	e Year-to-Date ▼ 1820.00	P/R Deduction (\$364.00 Bi-Weekly)
SUBTOTAL of Receipts			1056.00

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	y information copied from such Reports and for commercial purposes, other than using th				r the		pose o							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) DEBORAH A WHEELER			D	ate o	f Re	eceipt							
	Mailing Address 11046 ZAROD ROAD			1	M M									
	City LAS VEGAS	State NV	Zip Code 89135											
	FEC ID number of contributing federal political committee.	С					, .			78	3.00			
	Name of Employer Health Plan of Nevada	Occupation Dir Clinical												
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/f	R Ded	lucti	on (\$39).00 Bi-'	Wee	kly)				
	Full Name (Last, First, Middle Initial) SCOTT G CASSANO			D	ate o	f Re	eceipt							
	Mailing Address 8113 BANDOLEER CT	01-1-1-	7. 0.4	_ [м м 08	/	31			ү ү 2012	Y			
	City LAS VEGAS	State NV	Zip Code 89131					Receipt						
	FEC ID number of contributing federal political committee.	С					,).00			
	Name of Employer Health Plan of Nevada	Occupation Dir Provider												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/F	2 Ded	uctio	on (\$10	0.00 Bi	-We	ekly)				
	Full Name (Last, First, Middle Initial) MICHAEL PATRICK STAMM	L		D	ate o	f Re	eceipt							
	Mailing Address 10640 ECHO LAKE DRIVE				м м 08	/	D 31			у у 2012	Y			
	City ODESSA	State FL	Zip Code 33556					: PR25 [.] Receipt						
	FEC ID number of contributing federal political committee.	С					7			80	0.00			
	Name of Employer United HealthCare Services Inc	Occupation VP, Claims												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00	P/I	R Dec	lucti	on (\$4().00 Bi-	Wee	kly)				
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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 Incorpor														
Full Name (Last, First, Middle Initial) A. HOWARD CHARLES GILPIN JR				Date of	Re	ceipt								
Mailing Address 1210 SHEPARD DRIVE			11	м м	/	31) / Y	2012	Y					
City BLUE BELL	State PA	Zip Code 19422	A	Trans		ion ID :		22492839 nis Period	9					
FEC ID number of contributing federal political committee.	С					7		78	.00					
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		ctuarial Consulting Year-to-Date ▼ 312.00	P/	R Ded	uctio	on (\$39	.00 Bi-W	eekly)						
Full Name (Last, First, Middle Initial) B. JOHN J ESSLINGER Mailing Address 4944 W 151ST TERRACE		7:0.1		Date of	Re	ceipt 31) / Y	y y 2012	Ŷ					
City LEAWOOD	State Zip Code KS 66224			Transaction ID : PR2575288928399 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С					7			.00					
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Sr Medical Aggregate		 P/I	R Dedu	uctio	on (\$39.	.00 Bi-We	eekly)						
Full Name (Last, First, Middle Initial) C. JEFFREY A GOLDBERG				Date of	Be	ceipt								
Mailing Address 3410 BRADLEY LANE				M M 08	/	31) / Y	2012	Y					
City CHEVY CHASE	State MD	Zip Code 20815	A					32692839 nis Period	9					
FEC ID number of contributing federal political committee.	С					7		78	.00					
Name of Employer	Occupation													
United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		Rel Ex OptumInsight Year-to-Date ▼ 312.00	P/	R Ded	ucti	on (\$39	.00 Bi-W	eekly)						
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	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	United for Health)									
A.	Full Name (Last, First, Middle Initial) MICHAEL J TELESKY				Date of	Re	eceipt					
	Mailing Address 2602 PENNINGTON PLACE				м м 08	1	3		/ Y		у 012	Y
	City	State	Zip Code		Trans	acti	ion ID	: P	R2575	3509	92839	•
	VALPARAISO	IN	46383		Amount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С					,		7	_	78.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	Spec Ben,	KA & SB RVP Sales									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		351.00	P.	/R Ded	uctio	on (\$3	9.0	0 Bi-We	∍ekly	y)	
В.	Full Name (Last, First, Middle Initial) PAUL B HEBERT				Date of	Re	eceipt					
	Mailing Address 54 GREENWOOD DRIVE				м м 08	/	D 3		/ Y	ү 20)12	Y
	City	State	Zip Code		Trans	acti	ion ID	: P	R25755	5223	328399	
	SOUTH WINDSOR	СТ	06074	/	Amount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С					7		7	_	250.	00
	Name of Employer United HealthCare Services Inc	Occupation CEO Specia	alty Benefits -Dental									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	P/	'R Dedi	uctio	on (\$1:	25.(00 Bi-W	/eek	ly)	
С.	Full Name (Last, First, Middle Initial) MICHAEL PETEROY				Date of	Re	eceipt					
	Mailing Address 1952 NORTHSTAR WAY APT 325				м м 08	1	D 3		/ Y)12	Y
	City	State	Zip Code		Trans	act	ion ID	: P	R2575	5856	62839	9
	SAN MARCOS	CA	92078	/	Amount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С					Ţ		7	_	78	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	Dir Busines	s Process									
	Receipt For:	Aggregate	Year-to-Date ▼									
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(cheo	ck only	y on	e)	L									
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NAME OF COMMITTEE (In Full)	-															
UnitedHealth Group Incorport	orated PAC (I	Jnited for Health)														
Full Name (Last, First, Middle Initial) A. NANCY J SUBLETTE			D	ate of	Re	ceipt										
Mailing Address 445 CLARA #24			1	м м 08	1	31	/ Y	2012	Y							
City	State	Zip Code			acti		PR2575	5469283	99							
ST LOUIS	MO	63112	A	mount	of	Each R	eceipt th	is Period	ł							
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Name of Employer	Occupation	1														
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Other (specify)		250.00		R Dedi	uctio	on (\$50.0	00 Bi-We	ekly)								
Full Name (Last, First, Middle Initial) B. CARL E ALLEN			D	ate of	Re	ceipt										
Mailing Address 8675 AZURE SKY DRI						08 31 2012 Transaction ID : PR2575669328399										
City LAS VEGAS	State NV				-											
FEC ID number of contributing federal political committee.	С	89129		mount	U		eceipt in	is Perioc 78	3.00							
Name of Employer Southwest Medical Assoc. Inc.	Occupation															
Receipt For:	Physician D															
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 273.00	P/F	R Dedu	uctic	on (\$39.0	00 Bi-We	ekly)								
Full Name (Last, First, Middle Initial) C. CARLOS E ADAME			D	ate of	Re	ceipt										
Mailing Address 42584 WHISTLE COUF	RT			м м 08	/	31	/ Y	y y 2012	Y							
City	State CA	Zip Code		Trans	acti	on ID :	PR2575	7554283	99							
TEMECULA	CA	92592	A	mount	of	Each R	eceipt th	is Period	ł							
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Name of Employer	IthCare Services Inc Human Capital Partner (Mgr)															
United HealthCare Services Inc Receipt For:																
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			ddress of any political committee							
	COMMITTEE (In Full) lealth Group Incorpor	ated PAC (l	Jnited for Health)							
	Last, First, Middle Initial) A FARKUS			Da	ite of	Re	ceipt			
Mailing Add	ress 15 WHITE OAK DRIVE			N	о8	/	31	D / Y	2012	Y
City ASBURY		State NJ	Zip Code 08802						79752839 nis Period	
	nber of contributing ical committee.	С					7	7	78	3.00
Name of En United Healt Receipt For	thCare Services Inc	Occupation Dir Bus Dvl	p							
Prima		Aggregate	Year-to-Date ▼ 234.00	P/R	Dedu	uctio	on (\$39	.00 Bi-We	eekly)	
	Last, First, Middle Initial) ERIN RUSSELL			Da	ite of	Re	ceipt			
	ress 3108 SONIA DRIVE					/	31) / Y	2012	Y
City LAS VEGAS	5	State NV	Zip Code 89107				-		81212839 nis Period	-
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Name of En United Healt	nployer hCare Services Inc	Occupation Govt Rel Di								
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Full Name (C. RONAL	Last, First, Middle Initial) D M ILLER			Da	ite of	Re	ceipt			
	ress 801 N FAIRWAY RD				08	/	31		y y 2012	Y
City GLENSIDE		State PA	Zip Code 19038						89152839	
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Name of En	nployer	Occupation		_						
	thCare Services Inc	Data/Res A	nlyt Cnslg Assoc Dir							
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 273.00	P/R	Dedu	uctio	on (\$39	0.00 Bi-W	eekly)	
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or for commercial purposes, other than using the														
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorporate	ed PAC (I	United for Health)												
Full Name (Last, First, Middle Initial)			[Date of	Re	eceipt								
Mailing Address 1630 ROCK RIDGE DRIVE				м м	1	31) / Y	2012	Y					
City	State	Zip Code		Trans	act	ion ID :	PR2575	96792839	9					
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FEC ID number of contributing federal political committee.	С					7	7	78	3.00					
Name of Employer	Occupation													
United HealthCare Services Inc Receipt For:		Management	_											
Primary General	Aggregate	Year-to-Date ▼	P/	R Ded	ucti	on (\$39	.00 Bi-We	eekly)						
Other (specify)	L	234.00				(1-5		,,						
Full Name (Last, First, Middle Initial) 3. JUDITH GAGER PERLMAN				Date of	Re	eceipt								
Mailing Address 116 CANTERBURY LANE				M M	/	DE) / Y	YY	Y					
PO BOX 2108 City	State	Zip Code	- Instant Instant Instants					2012						
VINEYARD HAVEN	MA	02568	Transaction ID : PR257596892 Amount of Each Receipt this Pe											
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federal political committee.	С			7				78	8.00					
Name of Employer United HealthCare Services Inc	Occupation	Management												
Receipt For:		Year-to-Date ▼	_											
Primary General	, ,991 09410		P/	R Dedu	uctio	on (\$39.	.00 Bi-We	ekly)						
Other (specify)	L	234.00				•		• •						
Full Name (Last, First, Middle Initial) C. RESTOR JOHNSON				Date of	Re	eceipt								
Mailing Address 2700 CRESCENT RIDGE RC	DAD			м м 08	1	31) / Y	2012	Y					
City MINNETONKA	State MN	Zip Code 55305						05162839						
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FEC ID number of contributing federal political committee.	С					,		78	3.00					
Name of Employer	Occupation	1												
United HealthCare Services Inc	VP Enterpr	ise Real Estate Svcs												
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼		234.00	P/	R Ded	ucti	on (\$39	.00 Bi-W	eekly)						
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor							
Full Name (Last, First, Middle Initial) A. CHANDRA LUE TORGERSON			Date o	f Receipt			
Mailing Address 5433 10TH AVENUE SOL	JTH		08	/ D 31		2012	Y
City MINNEAPOLIS	State MN	Zip Code 55417	Trans	saction ID	: PR2576'	2862839	9
FEC ID number of contributing federal political committee.	С					78.	.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		I & Clinical Ops Year-to-Date ▼ 234.00	P/R Dec	duction (\$3	9.00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) B. TERRI M JACQUE Mailing Address 10508 MORNING DROP A	AVE		M M			2012	Y
City LAS VEGAS	State NV	Zip Code 89129		3 ² saction ID	: PR25761)
FEC ID number of contributing federal political committee.	С			it of Each		78.	00
Name of Employer Health Plan of Nevada Receipt For:		Itilization Mgmt Year-to-Date ▼ 273.00	P/R Dec	luction (\$39	9.00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. DAVID W BROWN		, ,	Date o	f Receipt			
Mailing Address 553 CAMBRIDGE ROAD						2012	Y
City TURNERSVILLE	State NJ	Zip Code 08012		saction ID			9
FEC ID number of contributing federal political committee.	С				7		.00
Name of Employer United HealthCare Services Inc	Occupation Dir Marketi						
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17											
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	United for Health)												
Full Name (Last, First, Middle Initial) A. DANIEL J KENIRY			Date of Receipt											
Mailing Address 5553 LITTLE FALLS ROAD			08 31 2012											
City	State VA	Zip Code	Transaction ID : PR2577379328399											
ARLINGTON	VA	22207	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 Gov't R	elations												
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼		679.00	P/R Deduction (\$97.00 Bi-Weekly)											
Full Name (Last, First, Middle Initial) B. LAURA A GROSCHEN	1		Date of Receipt											
Mailing Address 3872 KENNET CIRCLE			08 31 2012											
City	State	Zip Code	Transaction ID : PR2595230928399											
EAGAN	MN	55123-3952	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		2500.00											
Name of Employer United HealthCare Services Inc	Occupation VP, IT	I	_											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	P/R Deduction (\$2500.00 Bi-Weekly)											
Full Name (Last, First, Middle Initial) C.	L		Date of Receipt											
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City	State	Zip Code	Amount of Each Receipt this Period											
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			Detailed Summary Page		11a		11b		11c	12		_			
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	E OF COMMITTEE (In Full) tedHealth Group Incorporated	I PAC (l	Jnited for Health)												
	lame (Last, First, Middle Initial) d for Congress Committee				Date o	f Re	ecein	ot							
	g Address 205 5th Avenue South				M M M		D	22	/ Y	2012					
City		State	Zip Code			sacti			52949						
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	y information copied from such Reports and Staten for commercial purposes, other than using the nam																	
\square	NAME OF COMMITTEE (In Full)																	
	UnitedHealth Group Incorporated F	PAC (Un	ited for Hea	lth)														
Α.	Full Name (Last, First, Middle Initial) Making Business Excel Political Ac	tion Cor	nmittee					Date o						Y	- Y -			
	Mailing Address PO Box 3241							08	<i>'</i>	D 1	10	/		012				
	Cheyenne	State WY	Zip Code 82003					Trans	sacti	ion ID)::	351191	49					
	Purpose of Disbursement Contribution			0	11			Amoun	t of	Each	Di	isburse	emen	t this	Period			
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— B	State: District: Full Name (Last, First, Middle Initial) Priority PAC							Date o	f Die	shurse	em	ent						
υ.	FIGHTY FAC											_	Y Y	Y	Y			
	Mailing Address PO Box 3683					08 / 10 / Y Y Y Y 2012												
	Little Rock	State AR	Zip Code 72203					Trans	sacti	ion IE):	35119	241					
	Purpose of Disbursement Contribution			0	11			Amoun	t of	Each	Di	isburse	emen	t this	Period			
	Priority PAC			Cate T\	egoi /pe									250	0.00			
	Office Sought: House Disbursen Senate	nent For: Primary Other (spec	General cify) ▼		/pc			Contrib	utior	1								
— c.	Full Name (Last, First, Middle Initial)							Date o	f Dis	sburse	em	ent						
-	Mailing Address 1088 Bishop Street, Suite 1009						_	M M 08	/	D 1	D 0	1		012	Y			
	-	State	Zip Code					Trans	sacti	ion ID)::	351192	242					
	Honolulu Purpose of Disbursement Contribution	HI	96813	0	11			Amoun	t of	Fach		ioburo	mon	t thio	Doriod			
	Candidate Name DANPAC			Cate				Amoun		Each		ISDUISE	inen		0.00			
		nent For: Primary Other (spec	General cify) ▼					Contrib	utior	1								
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S	CHEDULE B (FEC Form 3X)			F	OR	LINE	NUI	MBER:				PA	GE	142 (DF 155			
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		Detailed	Summary Page			27		28a	H	28b	┢	28c		29				
	y information copied from such Reports and Stater for commercial purposes, other than using the nan																	
\setminus	NAME OF COMMITTEE (In Full)																	
	UnitedHealth Group Incorporated F	PAC (Ur	ited for Hea	lth)														
Α.	Full Name (Last, First, Middle Initial) Kurt Schrader For Congress						[Date of	Dis	sburse	em	ient						
	Mailing Address PO Box 3314							м м 08	/	D 1	0	/)12	Y			
	,	State	Zip Code					Trans	acti	on ID		351192	94					
	Oregon City	OR	97045					TTanis	acti			551152	34					
	Purpose of Disbursement Contribution			C)11		A	Amount	of	Each	D	isburse	ment	this	Period			
	Candidate Name			Cate										5000	0.00			
	Rep. Kurt Schrader Office Sought: V House Disburser	ment For:	2012	Т	ype				-	7								
	Senate President	Primary Other (spe	K General				C	Contribu	ution	1								
	State: OR District: 05																	
в.	Full Name (Last, First, Middle Initial) Mike Thompson For Congress						[Date of	Dis	burse	əm	ient						
								M M	/		D	/		Y	Y			
	Mailing Address 5429 Madison Avenue	ddress 5429 Madison Avenue						08 10 2012										
	Sacramento	State CA	Zip Code 95841					Trans	acti	ion ID	351193	87						
	Purpose of Disbursement Contribution			(011		A	Amount	of	Fach	D	isburse	ment	this	Period			
	Candidate Name			Cate		n//	ĺ											
	Rep. Mike Thompson				ype					7				250	0.00			
	Office Sought: House Disburser Senate President State: CA District: 01	nent For: Primary Other (spe	X General				C	Contribu	utior	١								
_	Full Name (Last, First, Middle Initial)																	
C.	Friends Of Dennis Ross						1	Date of	Dis									
	Mailing Address PO Box 7310							08	/	1	0	/)12	Y			
	City Lakeland	State FL	Zip Code 33807					Trans	acti	on ID):	351193	89					
	Purpose of Disbursement Contribution																	
	Candidate Name)11		A	Amount	of	Each	D	isburse	ment	this	Period			
	Rep. Dennis Ross			Cate T	egoi ype									2000	0.00			
	Office Sought: X House Disburser Senate President X	ment For: 2 Primary Other (spe	General				С	Contribu	ution	,								
_	State: FL District: 12																	
s	UBTOTAL of Disbursements This Page (optional)					•				,				9500	.00			
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SCHEDULE B (FEC Form 3X)		FOR LINE	
ITEMIZED 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
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or us me and address of any politic	ed by any perso al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporated	PAC (United for Hea	lth)	
Full Name (Last, First, Middle Initial) A. Friends Of John Boehner			Date of Disbursement
Mailing Address 7908 Cincinnati Dayton Road, Su	te		M M / D D / Y
City West Chester	StateZip CodeOH45069		Transaction ID : 35119390
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. John A. Boehner		Category/ Type	5000.00
Office Sought: House Disburse Senate President State: OH District: 08	ement For: 2012 Primary X General Other (specify) ▼		Contribution
Full Name (Last, First, Middle Initial) B. Kevin McCarthy For Congress Mailing Address PO Box 12667			Date of Disbursement
City Bakersfield	State Zip Code CA 93389		Transaction ID : 35119391
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Rep. Kevin McCarthy		Туре	
Office Sought: House Disburse Senate President State: CA District: 23	ement For: 2012 Primary X General Other (specify) ▼		Contribution
Full Name (Last, First, Middle Initial) C. Reclaim America PAC			Date of Disbursement
Mailing Address 228 S Washington Street, Suite 1	15		M M / D D / Y
City Alexandria	StateZip CodeVA22314		Transaction ID : 35119392
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Reclaim America PAC		Category/ Type	2500.00
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		Contribution
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only		F	11500.00

S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 144 OF 155
	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	check only 21b 27	r one) 22 X 23 24 25 26 28a 28b 28c 29 30b
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may not be sold or u me and address of any polit	sed by any personal committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated	PAC (United for Hea	alth)	
Α.	Full Name (Last, First, Middle Initial) Kristi For Congress			Date of Disbursement
	Mailing Address PO Box 852			08 10 2012
	Sioux Falls	StateZip CodeSD57101		Transaction ID : 35119513
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	2000.00
	Rep. Kristi Lynn Noem	ment Fem. 2010	Туре	2000.00
	Senate President	ment For: 2012 Primary X General Other (specify) ▼		Contribution
	State: SD District: 00			
В.	Full Name (Last, First, Middle Initial) Next Century Fund			Date of Disbursement
	Mailing Address 116 S Royal Street			08 10 2012
	City Alexandria	StateZip CodeVA22314		Transaction ID : 35119514
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	1000.00
	Next Century Fund Office Sought: House Disburse	ment For:	Туре	7 7
	State: District:	Primary General Other (specify)		Contribution
	Full Name (Last, First, Middle Initial)			
C.	People For Patty Murray			Date of Disbursement
	Mailing Address PO Box 3662			08 10 2012
	City Seattle	StateZip CodeWA98124		Transaction ID : 35119515
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	1500.00
	Sen. Patty Murray Office Sought: House Disburse	ment For: 2016	Туре	7 7
	X Senate President	Primary General Other (specify)		Contribution
	State: WA District:			
s	UBTOTAL of Disbursements This Page (optional).		····· ►	4500.00
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SCHEDULE B (FEC Form 3X)							NUMBER				PA	GE	145 ()F 155			
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan					perso	n for the		pose		solicitin		ntribut	tions			
$\left \right\rangle$	NAME OF COMMITTEE (In Full)																
$ \rangle$	UnitedHealth Group Incorporated F	AC (U	nited for Hea	lth)													
Α.	Full Name (Last, First, Middle Initial) Cummings for Congress Campaign	n Comm	nittee				Date o	_	sburse		_	Y	Y	Y			
	Mailing Address PO Box 1631						08 10 2012										
	Baltimore	State MD	Zip Code 21203				Transaction ID : 35119516										
	Purpose of Disbursement Contribution			0)11		Amount of Each Disbursement this Period										
	Candidate Name Rep. Elijah Cummings			Cate T	egor ype	ry/							1000	.00			
		ment For: Primary Other (spe	X General				Contrik	outior	1								
в.	Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn Mailing Address PO Box 12567					Date o		D)12	Y				
									12								
	Columbia	State SC	Zip Code 29211				Transaction ID : 35119517										
	Purpose of Disbursement Contribution Candidate Name									Amount of Each Disbursement this Per							
	Rep. James E. Clyburn			Cate T	egor ype	y/								0.00			
	Office Sought: House Disburser Senate President State: SC District: 06	nent For: Primary Other (spe	General				Contrib	outio	า								
C.	Full Name (Last, First, Middle Initial) Moderate Democrats PAC						Date o		sburse				V -	V			
	Mailing Address 303 Massachusetts Ave. NE						08	1		10	Í)12	Ť			
	City Standard Stand	State DC	Zip Code 20002				Tran	sact	ion ID):	351195	18					
	Purpose of Disbursement Contribution			0)11		Amour	nt of	Each	Di	isburseı	ment	this I	Period			
	Candidate Name Moderate Democrats PAC	Cate T	egor ype	ry/				1			5000	_					
	Office Sought: House Disburser Senate President District:	ment For: Primary Other (spe	General ecify) ▼				Contribution										
s	UBTOTAL of Disbursements This Page (optional)					•		-	7		· ·		7500	.00			
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IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(c	heck	k only 21b 27	one) 22 28a	25 26 9 30b										
	y information copied from such Reports and Stater for commercial purposes, other than using the nan																	
\setminus	NAME OF COMMITTEE (In Full)																	
	UnitedHealth Group Incorporated F	PAC (Ur	nited for Hea	alth)														
<u>ــــــــــــــــــــــــــــــــــــ</u>	Full Name (Last, First, Middle Initial)						Date of Disbursement											
А.	Moderate Democrats PAC								D		Y	V V						
	Mailing Address 303 Massachusetts Ave. NE						08 10 2012 Transaction ID : 35119520											
	,	State DC	Zip Code 20002															
	Washington Purpose of Disbursement	DC	20002	_	_													
	Void - check dated 03.23.2012			C)11		Amour	nt of	Each	Disburse	nent th	nis Period						
	Candidate Name			Cate		ry/	-5000.00											
	Moderate Democrats PAC Office Sought: House Disburser	mont For:		T	ype			-	7	7								
	State: District:	Primary Other (spe	General ecify) ▼				Void -	checl	k date	d 03.23.20)12							
-	Full Name (Last, First, Middle Initial)																	
В.	Blumenauer For Congress						Date of Disbursement											
	Mailing Address 830 NE Holladay, #105			08			0	201										
	Portland	State OR	Zip Code 97232				Tran	sact	ion ID	: 351195	21							
	Purpose of Disbursement Contribution	ement 011									Amount of Each Disbursement this Period							
	Candidate Name			Cate	egor	ry/	2500.00											
	Rep. Earl Blumenauer Office Sought: Y House Disburser	ment For:	2012	Т	ype													
	State: OR District: 03	Primary Other (spe	2012				Contrib	outior	٦									
с.	Full Name (Last, First, Middle Initial) Klobuchar For Minnesota 2012						Date of	of Dis	sburse	ement								
	Mailing Address PO Box 4146						08	/	D 1		y 201							
	5	State	Zip Code				Tran	sact	ion ID	: 351195	22							
	St Paul Purpose of Disbursement	MN	55104	_	_	_												
	Contribution			C	011		Amour	nt of	Each	Disburse	nent tł	nis Period						
	Candidate Name				egor	ry/					4	000.00						
	Sen. Amy J. Klobuchar Office Sought: House Disburser	Т	ype		_		7	7		000.00								
	State: MN District:	Primary Other (spe	General				Contrib	outior	ı									
Г							-					_						
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SC	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 147 OF 155											
ITI	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b												
	y information copied from such Reports and Stater for commercial purposes, other than using the nar		sed by any pers	on for the purpose of soliciting contributions											
\setminus	NAME OF COMMITTEE (In Full)														
$ \rangle$	UnitedHealth Group Incorporated I	PAC (United for Hea	alth)												
	Full Name (Last, First, Middle Initial) Team Emerson For Jo Ann Emers	on		Date of Disbursement											
	Mailing Address PO Box 822			08 / 10 / Y Y Y Y 2012											
	400 Broadway, Suite 501 City	State Zip Code													
	Cape Girardeau	MO 63702		Transaction ID : 35119523											
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period											
	Candidate Name		Category/												
	Rep. Jo Ann Emerson		Туре	2000.00											
	Office Sought: House Disburse Senate President	ment For: 2012 Primary X General Other (specify) ▼		Contribution											
	State: MO District: 08														
	Full Name (Last, First, Middle Initial) Volunteers For Shimkus			Date of Disbursement											
	Mailing Address PO Box 661		08 / D D / Y Y Y Y 08 10 2012												
	Collinsville	State Zip Code IL 62234		Transaction ID : 35119524											
	Purpose of Disbursement Contribution Candidate Name		011	Amount of Each Disbursement this Period											
	Rep. John M. Shimkus		Category/	2500.00											
	· · · · · · · · · · · · · · · · · · ·	ment For: 2012 Primary X General	Туре												
	State: IL District: 15	Other (specify)		Contribution											
— c.	Full Name (Last, First, Middle Initial)			Date of Disbursement											
	Mailing Address PO Box 1441			08 10 2012											
		State Zip Code													
	Topeka Purpose of Disbursement	KS 66601		Transaction ID : 35119525											
	Contribution Candidate Name		011	Amount of Each Disbursement this Period											
	Rep. Lynn Jenkins		Category/ Type	2500.00											
	Office Sought: House Disburse Senate President	ment For: 2012 Primary X General Other (specify) ▼	Type	Contribution											
_	State: KS District: 02														
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE								
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (United for Hea	alth)								
Full Name (Last, First, Middle Initial) A. McConnell Senate Committee			Date of Disbursement							
Mailing Address PO Box 1496			08 10 2012							
Louisville	State Zip Code KY 40201		Transaction ID : 35119526							
Purpose of Disbursement Contribution Candidate Name		011	Amount of Each Disbursement this Period							
Sen. Mitch McConnell		Category/ Type	2500.00							
Office Sought: House Disburse Senate President State: KY District:	ment For: 2014 Primary General Other (specify) ▼		Contribution							
Full Name (Last, First, Middle Initial) B. McConnell Senate Committee		Date of Disbursement								
Mailing Address PO Box 1496		08 10 2012								
Louisville	StateZip CodeKY40201		Transaction ID : 35119527							
Purpose of Disbursement Contribution Candidate Name Sen. Mitch McConnell		011 Category/ Type	Amount of Each Disbursement this Period 2500.00							
	ment For: 2014 Primary X General Other (specify) ▼	Type	Contribution							
Full Name (Last, First, Middle Initial) C. Kind for Congress Committee			Date of Disbursement							
Mailing Address 205 5th Avenue South			08 24 2012							
La Crosse	State Zip Code WI 54601		Transaction ID : 35179714							
Purpose of Disbursement Contribution Candidate Name	011 Category/	Amount of Each Disbursement this Period								
Senate President	ment For: 2012 Primary X General Other (specify)	Туре	2500.00 Contribution							
State: WI District: 03 SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only			7500.00							

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 149 OF 155									
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	y one)									
	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26									
		27	28a 28b 28c 29 30b									
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NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporated	PAC (United for Hea	lth)										
Full Name (Last, First, Middle Initial)												
A. Duffy For Congress			Date of Disbursement									
Mailing Address PO Box 538			08 24 2012									
City	State Zip Code		Transaction ID : 35179716									
Wausau	WI 54402											
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period									
Candidate Name			Amount of Each Disbursement this Period									
Rep. Sean Duffy		Category/ Type	2500.00									
	ement For: 2012	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,									
Senate	Primary X General		Contribution									
President	Other (specify)											
State: WI District: 07												
Full Name (Last, First, Middle Initial)												
B. Jim Himes For Congress			Date of Disbursement									
Mailing Address 857 Post Road, #312	07 23 _2012 _											
Maining Address 857 Post Road, #312	07 23 2012											
City	State Zip Code CT 06824		Transaction ID : 35294988									
Fairfield Purpose of Disbursement	CT 06824											
Contribution Funds Reported On August 20, 201	2 Monthly FEC Report	011	Amount of Each Disbursement this Period									
Candidate Name		Category/										
Rep. James Himes		Туре	1000.00									
	ement For: 2012		[MEMO ITEM]									
	Primary General		Contribution Funds Reported On August 20, 201									
State: CT District: 04	Other (specify)		Monthly FEC Report									
Full Name (Last, First, Middle Initial)												
C. Jim Himes For Congress			Date of Disbursement									
			M M / D D / Y Y Y Y									
Mailing Address 857 Post Road, #312			08 23 2012									
City	State Zip Code		Transaction ID : 35294989									
Fairfield	CT 06824		11a115activit ID . 33234303									
Purpose of Disbursement Contribution Re-designated funds for trans. dated	07/23/2012	011										
Candidate Name		011	Amount of Each Disbursement this Period									
Rep. James Himes		Category/ Type	1000.00									
•												
Senate	Primary X General		[MEMO ITEM] Contribution Re-designated funds for trans. date									
President	Other (specify)		07/23/2012									
State: CT District: 04												
SUBTOTAL of Disbursements This Page (optional)	••••••	2500.00									
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SCHEDULE B (FEC Form 3X)							NUMBER	<u>}:</u>			PAGE	150	OF 155	
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the			k only	one)					_		
			Summary Page			21b 27	22 28a		23 28b	24		25 (29	26 30b	
	y information copied from such Reports and Stater for commercial purposes, other than using the nan										iting c	ontribu		
$\left \right\rangle$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated F	JAC (Ur	nited for Hea	ltn)										
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Gail Haines						Date	_	sburse					
	Mailing Address PO Box 301085						08		2012	Y				
	City S Waterford Purpose of Disbursement	State MI	Zip Code 48330											
	Gail Haines, STATE HOUSE 43rd MI			C)11		Amou	nt of	Each	Disbur	semer	nt this	Period	
	Candidate Name			Cate		ry/						250).00	
	MI Rep. Gail Haines Office Sought: Y House Disburser	ment For:	2012	Ţ	ype				7		,	200		
	Senate President	General				Gail H	aines	, STA	TE HO	JSE 4	3rd MI			
	State: MI District: 43 Full Name (Last, First, Middle Initial)													
В.	Committee to Elect Jase Bolger					Date of Disbursement								
	Mailing Address PO Box 638						08		C	06		2012		
	Marshall	State Zip Coo MI 49068					Transaction ID : 35111405							
	Purpose of Disbursement James Bolger, STATE HOUSE 63rd MI Candidate Name			(011		Amount of Each Disbursement this Period 500.00 James Bolger, STATE HOUSE 63rd MI							
	MI Rep. James P. Bolger			Cate T	egor ype	ry/								
		nent For: Primary Other (spe	X General											
<u>с</u> .	Full Name (Last, First, Middle Initial) Committee to Elect Matt Lori State	Renres	entative				Date	of Di	sburse	ement				
	Mailing Address 14941 Roberts Shores Dr.						M 08		D 0	D /		2012	Y	
	City S Constantine	State MI	Zip Code 49042				Trar	sact	ion ID	: 3511	1429			
	Purpose of Disbursement Matt Lori, STATE HOUSE 59th MI)11		A		F aab	Diebur			Devied	
	Candidate Name MI Rep. Matt Lori	Cate		γ/	Amount of Each Disbursement this Period 250.00									
	•	ment For: Primary Other (spe	K General				Matt L	ori, S	TATE	HOUS	E 59th	MI		
s	UBTOTAL of Disbursements This Page (optional)					•			,		,	1000	0.00	
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 151 OF 155									
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27										
Any information copied from such Reports and States or for commercial purposes, other than using the nar												
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporated I	PAC (United for Hea	lth)										
Full Name (Last, First, Middle Initial) A. Committee to Elect Tim Greimel			Date of Disbursement									
Mailing Address PO Box 431071			08 06 2012									
Pontiac	State Zip Code MI 48343		Transaction ID : 35111430									
Purpose of Disbursement Tim Greimel, STATE HOUSE 29th MI		011	Amount of Each Disbursement this Period									
Candidate Name MI Rep. Tim Greimel		Category/ Type	250.00									
	ment For: 2012 Primary	Туре	Tim Greimel, STATE HOUSE 29th MI									
Full Name (Last, First, Middle Initial) B. Jim Marleau for State Senate Mailing Address 3181 Sandoval			Date of Disbursement									
-	State Zip Code MI 48360		Transaction ID : 35111435									
Purpose of Disbursement Jim Marleau, STATE SENATE 12th MI Candidate Name MI Sen, Jim Marleau		011 Category/ Type	Amount of Each Disbursement this Period 500.00									
Office Sought: House Disburse	ment For: 2014 Primary General Other (specify) ▼	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Jim Marleau, STATE SENATE 12th MI									
Full Name (Last, First, Middle Initial) C. Arlan B. Meekhof for State Senate			Date of Disbursement									
Mailing Address 9128 Oak Creek Ln			08 / 06 / Y Y Y Y 2012									
West Olive	State Zip Code MI 49460		Transaction ID : 35111438									
Purpose of Disbursement Arlan Meekhof, STATE SENATE 30th MI Candidate Name		011	Amount of Each Disbursement this Period									
MI Sen. Arlan Meekhof		Category/ Type	250.00									
Office Sought: House Disburse Senate President State: MI District:	ment For: 2014 Primary ☐ General Other (specify) ▼		Arlan Meekhof, STATE SENATE 30th MI									
SUBTOTAL of Disbursements This Page (optional)			1000.00									
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S	CHEDULE B (FEC Form 3X)		F	OR	LINE I	NUM	BER:	:			PAC	ΞE	152	OF 1	55			
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(c	hec													
			Summary Page			21b 27		22 28a		23 28b		24 28c	×	25 29		26 30b		
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	for commercial purposes, other than using the nam															_		
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\backslash	UnitedHealth Group Incorporated F		nited for Hea	itn)														
~	Full Name (Last, First, Middle Initial)						_	-11	(D:									
А.	RIchardville Leadership Fund						U	ate of		sburse			V	Y	V			
	Mailing Address 112 E Allegan, Suite 700							08	<i>'</i>	0)6	/ Y)12	Y			
	City	State	Zip Code															
	Lansing	MI	48933				Transaction ID : 35111439											
	Purpose of Disbursement Contribution			C)11		Amount of Each Disbursement this Period											
	Candidate Name			Cate	edo	rv/												
					ype													
	Office Sought: House Disburser Senate	nent For: Primary	General															
	President	Other (spe					Contribution											
_	State: District:																	
-	Full Name (Last, First, Middle Initial)						_											
в.	Vincent Gregory for Senate						Date of Disbursement											
	Mailing Address 19578 San Jose Blvd.							08			06	/ Y		012	Y			
	01	01-1-	7															
	City S Lathrup Village	State MI	Zip Code 48076				Transaction ID : 35111						4					
	Purpose of Disbursement Vincent Gregory, STATE SENATE 14th MI			-														
	Candidate Name			la de la compañía de)11		Amount of Each Disbursement this Period									ł		
	MI Sen. Vincent Gregory			Cate T	egoi ype													
		ment For:	2014		,,													
		Primary	General				Vi	incent	Gre	egory,	ST	ATE SE	ENA'	TE 14	th MI			
	State: MI District:	Other (spe	ecity) 🔻															
_	Full Name (Last, First, Middle Initial)																	
C.	Tonya Schuitmaker for State Sena	te					D	ate of	f Di	sburse	eme	ent						
	Mailing Address PO Box 1116						-E	м м 08	/		D)6	/ Y)12	Y			
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	,	State MI	Zip Code 49081					Trans	sact	ion ID):3	3511144	7					
	Portage Purpose of Disbursement	IVII	49081	-	_													
	Tonya Schuitmaker, STATE SENATE 20th MI			C)11		A	moun	t of	Each	Di	sbursen	nent	this	Perioc	ł		
	Candidate Name			Cate			-E		1					250	0.00	٦.		
	I Sen. Tonya Schuitmaker fice Sought: House Disbursement For: 2014	2014	1	ype			-	-	7	-	7	-		_				
	Senate	Primary	General				Тс	onya S	Schu	ıitmak	ær,	STATE	SEI	NATE	20th	MI		
	President	Other (spe	ecify)															
	State: MI District:								_				_					
s	UBTOTAL of Disbursements This Page (optional)						ſ							1250	0.00			
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т	OTAL This Period (last page this line number only)						١L			7	_							

S	CHEDULE B (FEC Form 3X)			FO	BII		UMBER			PA	GE 153	OF 155				
	EMIZED DISBURSEMENTS	Use separate for each cate	e schedule(s)	-	leck	only o	nly one)									
		Detailed Sur	0,	-		21b 27	22 28a		23 28b	24 28c	25 X 29	26 30b				
	y information copied from such Reports and Stater for commercial purposes, other than using the nam										g contrib					
\setminus	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporated F	PAC (Unite	d for Hea	lth)												
_	Full Name (Last, First, Middle Initial)						Data	(D:	1							
А.	Rick Snyder for Michigan						Date c	of Dis								
	Mailing Address 320 N Main St., Suite 104						M m / D F D / Y F Y F Y F Y Y 08 06 2012 </td									
	City	State Z	p Code													
	Ann Arbor	MI 4	8104				Iran	sacti	on ID	: 351114	48					
	Purpose of Disbursement Richard Snyder, Governor MI			01	1		Amount of Each Disbursement this Period									
	Candidate Name					,	Amount of Each Disbursement this Fellou									
	MI Gov. Richard D. Snyder			Cate Ty			L.,		7		300	00.00				
	Office Sought: House Disburser Senate President	4 General ▼				Richard Snyder, Governor MI										
	State: District:															
_	Full Name (Last, First, Middle Initial)															
В.	Friends of Roger Kahn for Senate						Date c	of Dis	burse	ment						
	Mailing Address DO Day 1997			_	M M	/			2012	Y						
	Mailing Address PO Box 1627				08		0	0	2012	_						
	Saginaw									: 351114	50					
	Purpose of Disbursement Roger Kahn, STATE SENATE 32nd MI	011		11	Amount of Each Disbursement this Period											
	Candidate Name			Cate	gory/		450.00									
	MI Sen. Roger N. Kahn			Ту			450.00									
		nent For: 201 Primary Other (specify)	General				Roger Kahn, STATE SENATE 32nd MI									
	State: MI District:		·													
C.	Full Name (Last, First, Middle Initial) Phil Berger Committee						Date c	of Dis	burse	ment						
							M	/	D		Y Y	Y				
	Mailing Address 110 West Meadow Road PO Box 1309						08		06	5	2012	_				
	City Steen		p Code 7289				Tran	sacti	on ID	: 351115	19					
	Purpose of Disbursement	NC 2	1209	_												
	Philip Berger, STATE SENATE 26th NC			01	1		Amour	nt of	Each	Disburse	ment this	Period				
	Candidate Name			Cate Ty		'	2000 /									
	NC Sen. Philip Berger Office Sought: House Disburser									2000.00						
	Senate President	Primary (Specify)	K General			Philip Berger, STATE SENATE 26th NO										
_	State: NC District:															
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SCHEDULE B (FEC Form 3X)							UMBER	:		PA	GE 154	OF 155				
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Ui	nited for Hea	lth)												
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Thom Tillis						Date o	_	burse		(Y Y	Ý				
	Mailing Address PO Box 32186	-					08		0	06 _2012						
	City Charlotte Purpose of Disbursement	State NC	Zip Code 28232				Transaction ID : 35111521									
	Thom Tillis, STATE HOUSE 98th NC	s, STATE HOUSE 98th NC			011		Amount of Each Disbursement this Period									
	Candidate Name NC Rep. Thom Tillis			Cat T	egoi ype				,	7	200	00.00				
	Senate President	ment For: Primary Other (spe	X General				Thom Tillis, STATE HOUSE 98th NC									
в.	Full Name (Last, First, Middle Initial) UnitedHealth Group Inc Political A							/ • Y • Y	Y							
	Mailing Address 9900 Bren Road East		08		0	6	2012									
	Minnetonka	State MN	Zip Code 55343				Transaction ID : 35111522									
	Purpose of Disbursement Contribution Candidate Name			Cat			Amount of Each Disbursement this P 6000.									
	Office Sought: House Disburser Senate President District:	ment For: Primary Other (spe	General ccify) ▼	1	ype		Contrib									
c.	Full Name (Last, First, Middle Initial) UnitedHealth Group Inc PAC of PA	Ą					Date o	f Dis								
	Mailing Address 9900 Bren Road East						м м 08		0	6	2012	Y				
	Minnetonka	State MN	Zip Code 55343				Transaction ID : 35111535									
	Purpose of Disbursement Contribution	Cat)11 egoi ype		Amount of Each Disbursement this Perio											
	Office Sought: House Disburser Senate President District:	ment For: Primary Other (spe	General ecify) ▼		<u> </u>		Contribution									
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I											
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$										
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (United for Hea	lth)											
Full Name (Last, First, Middle Initial) A. United for Health of Texas (UnitedHealth)	alth Group Inc, PAC c	of Texas)	Date of Disbursement										
Mailing Address 9900 Bren Road East	State Zip Code		08 06 2012										
5	State Zip Code MN 55343		Transaction ID : 35111536										
Contribution Candidate Name		011	Amount of Each Disbursement this Period										
Office Sought: House Disbursen	nent For:	Category/ Type	44000.00										
Senate President State: District:		Contribution											
Full Name (Last, First, Middle Initial) B. Apodaca for NC Senate Committee	9		Date of Disbursement										
Mailing Address 1504 Fifth Avenue, West													
Hendersonville Purpose of Disbursement	NC 28739		Transaction ID : 35114848										
Tom Apodaca, STATE SENATE 48th NC		011	Amount of Each Disbursement this Period										
NC Sen. Tom Apodaca	nent For: 2012	Category/ Type	2000.00										
X Senate	Primary X General Other (specify) ▼		Tom Apodaca, STATE SENATE 48th NC										
Full Name (Last, First, Middle Initial) C. Apodaca for NC Senate Committee)		Date of Disbursement										
Mailing Address 1504 Fifth Avenue, West			08 28 2012										
Hendersonville	State Zip Code NC 28739		Transaction ID : 35181665										
Purpose of Disbursement Tom Apodaca, STATE SENATE 48th NC Candidate Name		011	Amount of Each Disbursement this Period										
NC Sen. Tom Apodaca	nent For: 2012	Category/ Type	1000.00										
X Senate	Primary X General Other (specify) ▼		Tom Apodaca, STATE SENATE 48th NC										
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