	ID DISBURS	EMENTS		Office Use Only
1. NAME OF TYPE COMMITTEE (in full)	E OR PRINT ▼	Example: If typing, type over the lines.	12FE4M	5
AND DISSURSEMENTS For Other Than An Authorized Committee Other Use Only 1. NAME OF COMMITTE (In full) TYPE OR PRINT X Example: If typing, type over the lines. 12FE4M5 UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Image: Committee (In full) 12FE4M5 ADDRESS (number and steer) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committee (In full) Check if different than previously reported. (ACC) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committee (In full) Check if different than previously reported. (ACC) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committee (In full) Check if different than previously reported. (ACC) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committee (In full) Committee (In full) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committee (In full) Committee (In full) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committee (In full) Image: Committee (In full) Committee (In full) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committee (In full) Image: Committee (In full) (In full) [101 Ponneylvania Ave, NW Image: Committee (In full) Image: Committe				
	1 Pennsylvania Ave, NW			
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than previously	/ashington			20004
2. FEC IDENTIFICATION NUMBE		x	STATE A	ZIP CODE ▲
C C00274431		V		
(*	Report Due On:			(Non-Election Year Only)
(a) Quarterly Reports:				(Non-Election Year Only)
	PRE-Election			
October 15	Report for the:	Convention (12C)	Special (12S)
January 31	Election o		Y Y Y Y	
July 31 Mid-Year Report (Non-election		General (30G)	Runoff (3	00R) Special (30S)
Termination Report	Report for the:			in the
L (TER)	Election o		T - T - T - T	
Di		knowledge and belief it is	true, correct and	d complete.
Signature of Treasurer	у, , ,	[Electronically Filed]		
NOTE: Submission of false, erroneous,	or incomplete information m	ay subject the person signing	this Report to th	ne penalties of 52 U.S.C. § 30109
Office Use Only				FEC FORM 3X Rev. 05/2016

04/20/2021 14 : 22

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X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	Report Covering the Period: From:	M / D / Y	To: 03 / D D / Y Y Y Y 31 2021
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2021		920699.74
	(b) Cash on Hand at Beginning of Reporting Period	1213161.78	
	(c) Total Receipts (from Line 19)	145421.31	434383.35
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	1358583.09	1355083.09
7.	Total Disbursements (from Line 31)	0.00	- 3500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1358583.09	1358583.09
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From: 03		03 / D D / Y Y Y Y 2021
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:(a) Individuals/Persons OtherThan Political Committees		
(i) Itemized (use Schedule A)	134399.50	358605.30
(ii) Unitemized	11021.81	75778.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	145421.31	434383.35
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(c) Other Political Committees(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	145421.31	434383.35
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
(Refunds, Rebates, etc.)(Carry Totals to Line 37, page 5)16. Refunds of Contributions Made	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	0.00
(Dividends, Interest, etc.)18. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d),		10 1000 07
12, 13, 14, 15, 16, 17, and 18(c))▶	145421.31	434383.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	145421.31	434383.35

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

of Disbursements	Page 4
	COLUMN B Calendar Year-to-Date
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
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0.00	0.00
0.00	0.00
0.00	0.00
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0.00	0.00
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0.00	- 3500.00
(20))	
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0.00	0.00
0.00	0.00
7 7 0.00	
0.00	0.00
0.00	- 3500.00
0.00	- 3500.00
	COLUMN A 0.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

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

III. Net Contributions/ Operating Expenditures

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

(subtract Line 37 from Line 36)

						145421.31
1.00	1	7	1	1	-7	
						0.00
	1	-	1	1	-7	0.00
						145421.31
	4	7			-	140421.01
						0.00
		7			7	0.00
						0.00
		-7-			7	0.00
			1			0.00
	-	-7-	1	-	-7-	

						434383.35
		7			7	
						0.00
		-7	1	1	-7	0.00
						434383.35
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						0.00
		-7			-7	
	1		1			0.00
		-7			7	
1.00						0.00
						0.00

COLUMN B

Calendar Year-to-Date

Page 5

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 6 OF

				or each category of the Detailed Summary Page		_	11a 12		11	-	_	11c	12			
or	v information copied from such Reports and State					fo				se of	sol					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) GAUDIO, JOSEPH, , ,	or Full O	rgai	nization Name		Date of Receipt										
	Mailing Address 4842 E MOUNTAIN VIEW RD	04-4-		Zie Oo de		03 / 0 2021 Transaction ID : PR1159811861223										
	City PARADISE VALLEY	State AZ		Zip Code 85253-1539	-				-					-		
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period 384.60										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Reg	•	ion (for Individual) EO		C	Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify) ▼			r-to-Date ▼ 1153.80		P/R	R Ded	uctio	on	(\$192	2.30) Bi-We	eekly)			
	Full Name of Individual (Last, First, Middle Initial) WICHMANN, DAVID, , ,	or Full O	rgai	nization Name	Date of Receipt											
	Mailing Address 7000 ANTRIM ROAD	1		Mom / D / Y												
	City EDINA	State MN														
	FEC ID number of contributing federal political committee.	С		384.60												
	Name of Employer (for Individual) Jnited HealthCare Services Inc	Occu CEC		Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1153.80	F	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) MIGLIORI, RICHARD, , ,	or Full O	rgai	nization Name		Da	ate of	Re	ecei	ipt						
	Mailing Address PO BOX 72	1					03	/	Ľ	31	1	/ Y	y y 2021	Y		
	City WAYZATA	State MN		Zip Code 55391-0072	-								274612			
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period										
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) EVP, UHG Chief Medical Officer						Memo Item								
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 1153.80	'	P/F	R Ded	uctio	on	(\$192	2.30) Bi-W	eekly)			
s	JBTOTAL of Receipts This Page (optional)				. I	[,		l	,	1153	.80		
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 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 berson for the purpose of soliciting contributions a to collicit contributions from such committee								
	g the name and a	doress of any political committe	e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Midd A. MILLER, KATHERINE, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2321 HARBOR LAKE DF	RIVE		03 / D D / Y Y Y Y 2021								
City ORANGE PARK	State FL	Zip Code 32003-7799	Transaction ID : PR1554324361223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Network	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Midd ANDERSON, CRAIG, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 47 AMATO CIRCLE			M M / D J Y								
City WETHERSFIELD	State	Zip Code 06109-3971	Transaction ID : PR1575957361223								
FEC ID number of contributing	C	00103-3371	Amount of Each Receipt this Period 384.60								
federal political committee.	U										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn Pres Ntwk Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. KELLY, JOHN, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4901 HAWTHORNE CO SUITE 304			03 / 0 D / Y Y Y Y Y 2021								
City EDINA	State MN	Zip Code 55436-5802	Transaction ID : PR1575959761223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Tax	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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$\overline{)}$	NAME OF COMMITTEE (In Full)															
/	UnitedHealth Group Incorporated	I PAC (l	Uni	tedHealth Group PA	(C)											
/	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rgan	ization Name												
Α.					_	Date of Receipt										
	Mailing Address 18515 24TH AVE N					м м 03	/	31) / Y	2021	Y					
	City	State		Zip Code		Trans	acti	on ID :	PR1580	8631612	23					
	PLYMOUTH	MN		55447-2010	_	Amount	of	Each F	Receipt th	nis Perio	k					
	FEC ID number of contributing federal political committee.	С								76	.92					
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	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) rsity & Inclusion		Me	emo	Item								
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	Full Name of Individual (Last, First, Middle Initia	l) or Full O	Draan	ization Name	+											
Β.	WEBB, ROBERT, , ,	.,				Date of	Re	ceipt								
	Mailing Address 4516 DREXEL AVENUE					03	/	31) / Y	2021	Y					
	City	State		Zip Code				-	PR1580		-					
	EDINA	MN		55424-1130	_	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60												
	Name of Employer (for Individual) United HealthCare Services Inc	Occi SVF		Memo Item												
	Receipt For:	Aggregate	Yea	r-to-Date ▼		1										
	Primary General Other (specify) ▼			1153.80		P/R Dedu	ictic	on (\$19)	2.30 Bi-W	/eekly)						
C.	Full Name of Individual (Last, First, Middle Initia HUGHES, RICHARD, , ,	l) or Full O	rgan	ization Name		Date of	Re	ceipt								
	Mailing Address 3905 COUNTY ROAD 44					M M	/	D . [) / Ү	YY	Y					
	City	State		Zip Code	_	03		31	PR1596	2021	22					
	MINNETRISTA	MN		55364-9572				-	Receipt th		-					
	FEC ID number of contributing		-								_					
	federal political committee.	С				<u></u>	-	9		384	.00					
	Name of Employer (for Individual)	Осси	upati	ion (for Individual)		Me	emc	Item								
	United HealthCare Services Inc	SVP	o co	O of Human Capital												
	Receipt For:	Aggregate	Yea	r-to-Date ▼		P/R Dedi	icti	on (\$19	2.30 Bi-V	Veeklv)						
	Other (specify)					ση (φτο	2.00 Di 1	roonly								
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	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	NC)								
Α.		ial) or Full C	rganization Name	Date	of R	eceipt						
	Mailing Address 9741 GLACIER BAY				03 31 Y Y Y Y Y 2021							
	City EDEN PRAIRIE	State MN	Zip Code 55347-2615				PR1596					
	FEC ID number of contributing federal political committee.	С				-g=-		38	34.60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R De	educt	ion (\$192	2.30 Bi-V	/eekly)				
в.	Full Name of Individual (Last, First, Middle Init SCHUMACHER, DANIEL, , ,	ial) or Full C	rganization Name	Date	of R	eceipt						
	Mailing Address 5401 LARADA LANE				03 / D D / Y Y Y Y 03 31 2021							
	City EDINA	State MN	Zip Code 55436-1024		Transaction ID : PR1596305461223							
			55450-1024	Amou	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			384.60							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Strat & Growth Officer		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R De	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Init THEISEN, SCOTT, , ,	ial) or Full C	rganization Name	Date	of B	eceint						
•	Mailing Address 1950 MEADOWWOODS TRA	IL		М	Date of Receipt							
	City LONG LAKE	State MN	Zip Code 55356-9312				PR1596			-		
	FEC ID number of contributing federal political committee.	С				y 1	, y	38	34.60			
	Name of Employer (for Individual) Optum Services, Inc		Mem	o Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R De	educt	ion (\$19:	2.30 Bi-V	Veekly)				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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\backslash	NAME OF COMMITTEE (In Full)				. .									
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Uni	tedHealth Group PA	NC)									
۹.	Full Name of Individual (Last, First, Middle Init ANDERSON, MICHAEL, , ,	ial) or Full O	Orgar	nization Name		Date of Receipt								
	Mailing Address 17907 INVERNESS CURVE			03 31 2021										
	City	State		Zip Code		Trans	act	ior	ו ID :	PR	15963	093	6122	3
	EDEN PRAIRIE	MN		55347-2155		Amount	t of	Ea	ach R	ece	eipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С						,			-		384.6	60
	Name of Employer (for Individual) United HealthCare Services Inc	Occu SVF	•	ion (for Individual)		M	emo	o It	em					
	Receipt For:	Aggregate	Yea	r-to-Date ▼										
	Primary General Other (specify) ▼		-	1153.80		P/R Ded	ucti	on	(\$192	2.30) Bi-W	eek	ly)	
	ا Full Name of Individual (Last, First, Middle Init BORCA, TROY, , ,	ial) or Full O	Orgar	nization Name	Date of Receipt									
	Mailing Address 1649 SPRING VALLEY ROAD				03 / D D / Y Y Y Y Y 03 31 2021									
	City	State		Zip Code		Transaction ID : PR1596310461223								
	HARTLAND	WI		53029-2056		Amount	t of	Ea	ach R	ece	eipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С	C								-y		76.9	92
	Name of Employer (for Individual) Optum Services, Inc	Occi VP		M	emc	o It	em							
	Receipt For:	Aggregate		1										
	Primary General Other (specify) ▼		230.76						P/R Deduction (\$38.46 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Init DAVIDSON, TRACY, , ,	ial) or Full O	Drgar	nization Name		Date of	Re	ece	ipt					
	Mailing Address 6058 HARBOUR TOWN CIR					03	1	I	31	2	/ Y	ү 20	21 21	Y
	City	State		Zip Code		Trans	act	ior	ו ID :	PR	15963	8116	6122	3
	WESTERVILLE	OH		43082-8144		Amount	t of	Ea	ach R	ece	eipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С						9			9		384.6	30
	Name of Employer (for Individual)	Оссі	upat	ion (for Individual)		M	emo	o li	em					
	Optum Services, Inc	NVP	Ne	twork		_								
	Receipt For:	Aggregate	Yea	r-to-Date ▼										
	Primary General Other (specify)		-	1153.80		P/R Ded	ucti	ion	(\$19)	2.30) Bi-W	/eek	ly)	
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SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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PAGE 11 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements mang the name and a	L ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Midd A	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2964 WYSE COURT			M M / D D / Y Y Y Y 03 31 2021							
City LEWIS CENTER	State OH	Zip Code 43035-8253	Transaction ID : PR1596312361223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. HAFERMANN, JOSEPH, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5525 ZENITH AVENUE			03 / D / Y Y Y Y 2021							
City EDINA	State MN	Zip Code 55410-2466	Transaction ID : PR1596313461223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Insurance Sols	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. HEUMANN, KURT, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 63 MUIRFIELD COURT			03 / D D / Y Y Y Y Y 03 31 2021							
City SAINT LOUIS	State MO	Zip Code 63141-7372	Transaction ID : PR1596313761223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		88.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 265.38	P/R Deduction (\$44.23 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	al)		857.66							
TOTAL This Period (last page this line nur	mber only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle HIGGINS, MARY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 54 BELCREST ROAD			03 31 2021							
City WEST HARTFORD	State CT	Zip Code 06107-3304	Transaction ID : PR1596313861223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. LAGERSTROM, EDWARD, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2248 SHADYWOOD ROA			03 / D D / Y Y Y Y 2021							
City WAYZATA	State MN	Zip Code 55391-9223	Transaction ID : PR1596315061223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Ntwk	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. ROSENTHAL, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8 VIA HERMOSA			03 / D D / Y Y Y Y 03 31 2021							
City ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR1596317361223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			846.12							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group In		JnitedHealth Group P	AC)							
Full Name of Individual (Last, Fir. STURKEY, DAVID, , ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 117 KELLER BL			03 / D D / Y Y Y Y 03 31 2021							
City CLEMSON	State SC	Zip Code 29631-2149	Transaction ID : PR1596318461223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		78.00							
Name of Employer (for Individual United HealthCare Services Inc	·	upation (for Individual) VP SIs Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, Fire B. VAVRA, KELLY, , ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6075 CHARLES	ROAD		03 / D D / Y Y Y Y 2021							
City	State MN	Zip Code	Transaction ID : PR1596319261223							
SAGINAW	IMIN	55779-9528	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual United HealthCare Services Inc	,	upation (for Individual) Prov Svc	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, Fir. SANDY, LEWIS, , ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1317 MONTVAL			03 / D D / Y Y Y Y 2021							
City CARY	State NC	Zip Code 27519-1015	Transaction ID : PR1600598761223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual United HealthCare Services Inc		upation (for Individual) Clin Advancement	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page	(optional)		539.52							
TOTAL This Period (last page this	line number only)	······)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	.C)										
Full Name of Individual (Last, First, Middle A. PETERSON, MATTHEW, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2260 FOX STREET			03 / D D / Y Y Y Y 03 31 2021										
City ORONO	State MN	Zip Code 55356-8316	Transaction ID : PR1602669961223										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D Ancillary & Ind/Sgt CAO	Memo Item										
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. MALONEY, JEFFREY, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6327 PASADENA POINT	BLVD S		03 / D D / Y Y Y Y Y 03 31 2021										
City GULFPORT	State FL	Zip Code 33707-3867	Transaction ID : PR1613243561223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.30 Memo Item										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. EMERSON, PAUL, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 18855 MEADOW VIEW B	1		03 / D D / Y Y Y Y 2021										
City PRIOR LAKE	State MN	Zip Code 55372-3133	Transaction ID : PR1806750361223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Unit CEO	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)		961.50										
TOTAL This Period (last page this line num	ber only)	·····											

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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PAGE 15 OF

			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or	y information copied from such Reports and State for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	.C)									
Α.	Full Name of Individual (Last, First, Middle Initial) ANDERSON, CATHERINE, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 57 SIMMONS LANE	0		03 / D D / Y Y Y Y 2021									
	City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550761223									
			21140-1321	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Strat Initiv	Memo Item									
	Receipt For:	aareaate	Year-to-Date ▼	7									
	Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) SANTELLI, JOHN, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 25510 BIRCH BLUFF ROAD			03 / D D / Y Y Y Y Y 2021									
	City	State	Zip Code	Transaction ID : PR1903622061223									
EXC	EXCELSIOR	MN	55331-8520	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? CIO	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ , 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) STEERUP, LORI, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 7019 DONLEA LANE		03 / D D / Y Y Y Y 03 31 2021										
	City	State	Zip Code	Transaction ID : PR1903628661223									
	EDEN PRAIRIE	MN	55346-3164	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		76.92									
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item									
	United HealthCare Services Inc	VP F	luman Capital Partner										
	Receipt For: A	ggregate	Year-to-Date ▼										
	Primary General Other (specify)		230.76	P/R Deduction (\$38.46 Bi-Weekly)									
S	UBTOTAL of Receipts This Page (optional)		••••••	846.12									
т	OTAL This Period (last page this line number only	/)	•••••	· · · · · · · · · · · · · · · · · · ·									

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	EMIZED RECEIPTS			r each category of the etailed Summary Page		× 11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
	NAME OF COMMITTEE (In Full)	ame and a	laare	ss of any political committee	10 S	olicit con	ITID	utions tr	om sucr	1 commit	ee.			
\rangle	UnitedHealth Group Incorporated	I PAC (l	Jnit	edHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia WEYMOUTH, PAUL, , ,	ll) or Full O	rgani	ization Name		Date of	Re	ceipt						
	Mailing Address 317 WRIGHTS MILL RD					м м 03	/	D D D 31	/ Y	y y 2021	Y			
	5			StateZip CodeCT06238-1559						63696122 iis Period	3			
	FEC ID number of contributing federal political committee.	С						<u> </u>		384.	60			
	Name of Employer (for Individual) Optum Services, Inc	Occi Bus		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 1153.80		P/R Dedu	uctic	on (\$192	.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia DUPERRE, BRIAN, , ,	l) or Full O	rgani	ization Name		Date of	Re	ceipt						
	Mailing Address 100 LONG HILL DRIVE			03 / D D / Y Y Y Y 2021										
	City SOMERS	State CT		Zip Code 06071-1272	-					1736122 iis Period	3			
	FEC ID number of contributing federal political committee.	С		76.92										
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Dep		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia KANNE, KATHLEEN, , ,	ll) or Full O	rgani	ization Name		Date of	Re	ceipt						
	Mailing Address 4826 PALOMINO COURT					03	/	D D D 31	/ Y	2021	Y			
	City ERIE	State PA		Zip Code 16506-6624						47966122 iis Period	3			
	FEC ID number of contributing federal political committee.	С				<u> </u>		,		384.	60			
	Name of Employer (for Individual) Optum Services, Inc		upatio Comr	on (for Individual) n		Me	emo	ltem						
Receipt For: Aggrega Primary General Other (specify)			Year	-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•				,		846.	12			
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED RECEIFIJ		for each category of the Detailed Summary Page							
Any information copied from such Reports or for commercial purposes, other than us	s and Statements ma sing the name and a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorr	oorated PAC (l	JnitedHealth Group P							
Full Name of Individual (Last, First, Mi A. VANASTEN, SUSAN, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address N2249 NICOLE COUR	RT		03 31 2021						
City KAUKAUNA	State WI	Zip Code 54130-9462	Transaction ID : PR2119492661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		80.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) TelesIs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$40.00 Bi-Weekly)						
Full Name of Individual (Last, First, Mi B. WRIGHT, GREGORY, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10471 STRAND TERF									
City SANTA ANA	State CA	Zip Code 92705-1495	Transaction ID : PR2119494161223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Mi C. HULTGREN, BROR, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 408 22ND ST			03 / D D / Y Y Y Y 03 31 2021						
City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133261223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	onal)		849.20						
TOTAL This Period (last page this line r	umber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	y information copied from such Reports and Stat for commercial purposes, other than using the na														
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jnit	edHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial PUTNAM, T JEFFREY, , ,) or Full O	rgani	zation Name		Date of Receipt									
	Mailing Address 303 ELMWOOD PLACE WEST					03 31 2021									
	City	State		Zip Code		Tran	sact	tio	on I	D : F	PR2	21331	3426	61223	;
	MINNEAPOLIS	MN		55419-1349	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						-,	_			-g-		384.6	0
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Mkt		ľ	/lemo	o I	lter	n							
	Receipt For:	Aggregate	Year	-to-Date ▼											
	Primary General Other (specify) ▼		-	F	P/R De	ducti	ior	n (\$	6192	.30	Bi-We	eekly	y)		
В.	Full Name of Individual (Last, First, Middle Initial FALKENBERG, ROBERT, , ,) or Full O	Date of Receipt												
	Mailing Address 400 SOUTH STEELE ST UNIT55	5		03 / D D / Y Y Y Y Y 2021											
	City	State		Zip Code		Transaction ID : PR2145728461223									
	DENVER	CO		80209-3536		Amou	nt of	E	Eacl	h Re	ecei	ipt this	s Pe	eriod	
	FEC ID number of contributing federal political committee.	С		230.76 Memo Item											
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Hlth													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 692.28	P	/R De	ducti	ion	า (\$	115.	.38	Bi-We	ekly	y)	
С.	Full Name of Individual (Last, First, Middle Initial RUMMEL, LEAH, , ,	ne of Individual (Last, First, Middle Initial) or Full Organization Name MEL, LEAH, , ,						ec	eip	t					
	Mailing Address 12100 TRAUTWEIN ROAD	1				^M 03		/		31	1	Y	ү 202	21 [°]	Y
	City	State TX		Zip Code								21457			3
	AUSTIN	IX		78737-9358		Amou	nt of	E	acl	h Re	ecei	ipt this	s Pe	eriod	
	FEC ID number of contributing federal political committee.	С				<u> </u>		,	,			,		76.9	2
	Name of Employer (for Individual)			on (for Individual)		ſ	Nem	0	lter	m					
	United HealthCare Services Inc	Dir G	Govt /	Affs	_										
	Receipt For: Primary General Other (specify)	Aggregate	Year	-to-Date ▼ 230.76	F	P/R De	ducti	ior	n (\$	\$38.4	46 E	Bi-Wee	ekly))	
s	UBTOTAL of Receipts This Page (optional)						_	_	_	_			(692.2	8
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SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	I ay not be sold or used by any paddress of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	UnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middl A. SMITH, DANNETTE, , ,	e Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 4200 ALDEN DRIVE			M M / D D / Y Y Y Y Y 03 31 2021						
City EDINA	State MN	Zip Code 55416-5010	Transaction ID : PR2145729961223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. LEWIS, KURT, , ,	e Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 961 RIVER FOREST DR			03 / D D / Y Y Y Y Y 2021						
City MAINEVILLE	State OH	Zip Code 45039-7720	Transaction ID : PR2203967561223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. BEAULE, JEAN-FRANCOIS, ,		Organization Name	Date of Receipt						
Mailing Address 7 STRATFORD RD	1		03 / D D / Y Y Y Y Y 2021						
City FARMINGTON	State CT	Zip Code 06032-1444	Transaction ID : PR2225813661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		230.76						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PHIth Advancement	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		999.96						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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	•	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such or for commercial purposes, other	Reports and Statements ma r than using the name and a	l ay not be sold or used by any p ddress of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Fu										
\rightarrow UnitedHealth Group	Incorporated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, A. MCGUIRE, MICHAEL, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 437 DRURY L	ANE		03 31 2021							
City WYCKOFF	State NJ	Zip Code 07481-2204	Transaction ID : PR2225818861223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individu United HealthCare Services Inc	,	upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, B. RYAN, JOHN, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 45 WESTMOF	RELAND LN		03 31 2021							
	State	Zip Code	Transaction ID : PR2225819661223							
NAPERVILLE FEC ID number of contributing		60540-5817	Amount of Each Receipt this Period							
federal political committee.	C		384.60							
Name of Employer (for Individe United HealthCare Services Inc	,	upation (for Individual) sion CEO	Memo Item							
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, CARCIONE, JOSEPH		rganization Name	Date of Receipt							
Mailing Address 11 CARRIAG			03 / D D / Y Y Y Y 2021							
City WHITE PLAINS	State NY	Zip Code 10605-5424	Transaction ID : PR2247626861223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.40							
Name of Employer (for Individu Optum Services, Inc		upation (for Individual) led Dir	Memo Item							
Receipt For: Primary Genera Other (specify)		Year-to-Date ▼ 346.20	P/R Deduction (\$57.70 Bi-Weekly)							
SUBTOTAL of Receipts This Pa	ge (optional)		692.30							
TOTAL This Period (last page th	is line number only)	•••••								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 □	17									
or for commercial purp	ooses, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
UnitedHealth		d PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individ A. KANTOLA, KEV	dual (Last, First, Middle Initia IN, , ,	al) or Full O	rganization Name	Date of Receipt										
	31 HALSTEAD DRIVE			03 / D D / Y Y Y Y 2021										
City MINNETRISTA		State MN	Zip Code 55364-3201	Transaction ID : PR2247627061223										
			33304-3201	Amount of Each Receipt this Period	_									
FEC ID number of federal political com	0	С		384.60										
Name of Employer Optum Services, Inc	,	Occi VP I	upation (for Individual) T	Memo Item										
Receipt For:		Aggregate	Year-to-Date ▼											
Primary Other (specify	General /) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individ B. OBRIEN, DEN	dual (Last, First, Middle Initian NIS, , ,	al) or Full O	rganization Name	Date of Receipt	Date of Receipt									
Mailing Address 61				03 / D D / Y Y Y Y 2021										
City		State	Zip Code	Transaction ID : PR2247627361223										
COS COB		СТ	06807-2621	Amount of Each Receipt this Period										
FEC ID number of federal political com	0	С		384.60										
Name of Employer United HealthCare S			upation (for Individual) In CEO	Memo Item										
Receipt For: Primary Other (specify	General	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individ	dual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt										
Mailing Address 54	6 HARRINGTON ROAD			03 31 Y Y Y Y 03 31 2021										
City		State	Zip Code	Transaction ID : PR2259738461223										
WAYZATA		MN	55391-1550	Amount of Each Receipt this Period										
FEC ID number of federal political com	0	С		384.60										
Name of Employer Optum Services, Inc			upation (for Individual) Grp Pres & COO	Memo Item										
Receipt For: Primary Other (specify	General	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receip	ots This Page (optional)			. 1153.80										
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			for each category of the Detailed Summary Page	×	11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
$\overline{\left\langle \cdot \right\rangle}$	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)									
<u> </u>	Full Name of Individual (Last, First, Middle Initia CRONN, CHRISTOPHER, , ,	l) or Full Or	ganization Name		ate of	Po	opint						
А.	Mailing Address 1122 COLORADO STREET			_		ne /		/ Y	Y Y	Y			
	SUITE 2399			03 31 2021									
	City AUSTIN	State TX	Zip Code 78701-2132						52296122 iis Period	3			
	FEC ID number of contributing				mount					20			
	federal political committee.	С			_		7		115.	38			
	Name of Employer (for Individual)	Occu	pation (for Individual)	10	Me	mo	Item						
	United HealthCare Services Inc Receipt For:		Affs Dir	_									
	Primary General	Aggregate `	Year-to-Date ▼	P/F	R Dedi	uctio	on (\$57.	69 Bi-We	eklv)				
	Other (specify)		346.14				(+		,,				
	Full Name of Individual (Last, First, Middle Initia	I) or Full Or	manization Name										
B.	LEWIS, ERIC, , ,		gamzation Name	D	ate of	Re	ceipt						
	Mailing Address 4574 SEAGULL CIRCLE NE				м м 03	/	31	/ Y	y y 2021	Y			
		State MN	Zip Code				-		31806122	3			
	PRIOR LAKE FEC ID number of contributing	_	55372-1296		mount	of	Each H	eceipt th	iis Period	_			
	federal political committee.						7	1 - AP-	76.	92			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Acctng		Me	mo	Item						
		Aggregate `	Year-to-Date 🔻										
	Other (specify)		230.76	P/F	R Dedu	ictic	on (\$38.	46 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initia HIGA, JOY, , ,	l) or Full Or	ganization Name		ate of	Re	ceint						
0.	Mailing Address 2208 ELM AVENUE			_	M M	/	D D	/ Y	Y Y	Y			
	City	State	Zip Code	-	03 Trans	ti	31	DD2402	2021 44626122	2			
	MANHATTAN BEACH	CA	90266-2809						is Period	<u> </u>			
	FEC ID number of contributing federal political committee.	С					9	.,	384.	30			
	Name of Employer (for Individual)	Occu	pation (for Individual)	1 [Me	emo	Item						
	United HealthCare Services Inc Receipt For:												
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 1153.80					on (\$19)	2.30 Bi-V	Veekly)				
s	UBTOTAL of Receipts This Page (optional)		•				7	,	576.9	90			
Т	OTAL This Period (last page this line number on	ly)	••••••				,	-					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			for each category of the Detailed Summary Page	×	11a		11b		11c	12	<u> </u>	
	y information copied from such Reports and State for commercial purposes, other than using the na											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated											
<u> </u>	Full Name of Individual (Last, First, Middle Initial) ALEXANDER, CORY, , ,	C	Date of Receipt									
	Mailing Address 4203 BRADLEY LANE				м м 03	/		31	/ Y	2021	Y	
	City	State	Zip Code		Transaction ID : PR2405428861223							
	CHEVY CHASE	MD	20815-5234	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Corp Affairs	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼	P/	R Ded	uctio	on (\$	192.3	30 Bi-W	eekly)				
в.	Full Name of Individual (Last, First, Middle Initial) WEE, KATHLYN, , ,) or Full C	Organization Name		Date of	Re	eceipt	t				
	Mailing Address 2225 46TH ST NW				м м 03	/		31	/ Y	y y 2021	Ŷ	
	City	State	Zip Code		Trans	acti	ion II	D : PF	R24085	4506122	3	
	WASHINGTON	DC	20007-1032	A	mount	of	Each	n Rec	eipt th	is Perioc		
	FEC ID number of contributing federal political committee.	C					- -		- T -	384	60	
	Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc Hlth Plan CEO) Iten	n				
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/I	R Dedi	uctic	on (\$	192.3	80 Bi-W	eekly)		
с.	Full Name of Individual (Last, First, Middle Initial) BALTHAZOR, PAUL, , ,) or Full C	Organization Name		Date of	Re	eceipt	t				
	Mailing Address 2002 SUGARWOOD DRIVE	1			^M 03	/		31	/ Y	2021 Y	Y	
	City	State MN	Zip Code							2076122		
	ORONO FEC ID number of contributing federal political committee.	C	55356-9339	A	mount	of	Each	n Rec	eipt th	is Perioc 384		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment COO	1	M	emo	o Iten	n				
	Boosint For:	Aggregate Year-to-Date ▼						3192.3	30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)		••••••				7			1153.	80	
т	OTAL This Period (last page this line number only	y)	•	Ī			-		-			

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports an or for commercial purposes, other than using	d Statements mathe name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	λC)						
Full Name of Individual (Last, First, Middle NESS, LAURA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10550 PINNACLE WAY			03 31 2021						
City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121561223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. COSGRIFF, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1875 HUNTER LANE			03 / D D / Y Y Y Y 2021						
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4110	Transaction ID : PR2437121661223						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle EDELSON, BRETT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4600 DREXEL AVENUE			03 / D D / Y Y Y Y 2021						
City EDINA	State MN	Zip Code 55424-1132	Transaction ID : PR2437127161223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle RAINEY, PETER, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 8850 COUNTY ROAD 26			03 31 2021
City MINNETRISTA	State MN	Zip Code 55359-9445	Transaction ID : PR2437127561223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Corp Controller	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. LIPPERT, ROBIN, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 6711 POINTE LAKE LUCY			03 / D / Y Y Y Y 2021
City CHANHASSEN	State MN	Zip Code 55317-8434	Transaction ID : PR2439928061223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Staff	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. HEYMAN, STEPHEN, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5300 SHERRILL AVENUE			03 / D D / Y Y Y Y 03 31 2021
CHEVY CHASE	State MD	Zip Code 20815-3720	Transaction ID : PR2444265761223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Strategy & Partnerships	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			1153.80
TOTAL This Period (last page this line numb	per only)		

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IT.	TEMIZED RECEIPTS		Use separate schedule(s)	(che	(check only one)							
11			for each category of the Detailed Summary Page	×	11a		11b	11c		2	17	
	y information copied from such Reports and Stafor commercial purposes, other than using the				for the		pose of	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Initi ULLSPERGER, DEWAYNE, , ,	al) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 4440 AVONDALE				03 31 Y Y Y Y Y 2021							
	City MINNETONKA	State MN	Zip Code 55345-2754				-	PR2444		-		
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Actuary		М	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.80					on (\$19:	2.30 Bi-V	Veekly	')		
в.	LANGER, DONALD, , ,						eceipt					
	Mailing Address 5110 OAK RAMBLING DRIVE						31		202			
	KATY	TX	77494-1971				-	PR2445				
	FEC ID number of contributing federal political committee.	С								384.60)	
	Name of Employer (for Individual) United HealthCare Services Inc						tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P	/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)		
с.	Full Name of Individual (Last, First, Middle Initi ALCOREZA, LENYS, , ,	al) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 675 THALIA POINT RD				^M 03	/	31	JL	202	1		
	City VIRGINIA BEACH	State VA	Zip Code 23452-1815					PR2445 Receipt th				
	FEC ID number of contributing federal political committee.	С					,	. ,	3	384.60)	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sales		M	emo) Item					
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1153.80					on (\$19	2.30 Bi-V	Veekly	()		
\vdash	UBTOTAL of Receipts This Page (optional)			. -		-	, .		11	53.80		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle I A. RENFRO, LARRY, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 8656 BLUE FLAG WAY			03 31 2021							
City NAPLES	State FL	Zip Code 34109-3399	Transaction ID : PR2460168161223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) e Chairman UHG	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. KNARR, KEVIN, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 4806 HUTCHINS PLACE N	Mailing Address 4806 HUTCHINS PLACE NW									
City WASHINGTON	State DC	Zip Code 20007-1528	Transaction ID : PR2484542361223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	ů – Elektrik									
Name of Employer (for Individual) United HealthCare Services Inc										
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		576.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. TROPEANO, DANIEL, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 606 BROOKSIDE AVE			03 / D D / Y Y Y Y Y 03 31 2021							
City WAYNE	State PA	Zip Code 19087-4826	Transaction ID : PR2484542861223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			961.50							
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11	TEMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12					
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia MANDERFELD, THOMAS, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 3760 WEST CALHOUN PARKW	/AY			03 31 2021									
City State MN MINNEAPOLIS FEC ID number of contributing federal political committee.			Zip Code 55410-1118	_					5 9796122 is Period	3				
								y	384.60					
	Name of Employer (for Individual) United HealthCare Services Inc	al) Occupation (for Individual) SVP Investor Relations												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Initia MCMAHON, DIRK, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 60 WILDHURST ROAD	1 1					31	/ Y	ү ү 2021	Y				
	City EXCELSIOR	State Zip Code MN 55331-8461							5706122 is Period	3				
	FEC ID number of contributing federal political committee.	С				U	-		384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) President UHG & COO			Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia SMITH, KARA, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 3917 TERRY PLACE	1 -			03 ^M	/	31		ү ү 2021					
	City ALEXANDRIA	State VA	Zip Code 22304-1737						17536122 is Period	3				
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	,	384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Govt Affs		Me	emc	tem							
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•				, .	.,	1153.	80				
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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	-	Use separate schedule(s)	(check only one)						
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and	d 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 using	the name and a	ddress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle PURDY, PATRICIA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3615 THORNAPPLE STR	EET		03 31 Y Y Y Y Y 2021						
City CHEVY CHASE	State MD	Zip Code 20815-4113	Transaction ID : PR2541300661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affairs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle RAMSAY, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 543 E LURAY AVE			03 / D D / Y Y Y Y Y 2021						
City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542261223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. YAU, ANNE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9905 WOODLAND DRIVE			03 / D D / Y Y Y Y Y 2021						
City SILVER SPRING	State MD	Zip Code 20902-4047	Transaction ID : PR2543582561223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			869.20						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
	y information copied from such Reports and Sta for commercial purposes, other than using the n								
<u>.</u>	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group P	AC)					
A.	Full Name of Individual (Last, First, Middle Initia DAVENPORT, ALLISON, , ,	l) or Full O	Drganization Name	Date of Receipt					
	Mailing Address 141 PELHAM ROAD			03 31 2021					
City State PHILADELPHIA PA			Zip Code 19119-2661	Transaction ID : PR2552313661223 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		384.60					
	Name of Employer (for Individual) Optum Services, Inc		supation (for Individual) Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia BRYANT, JEREMY, , ,	l) or Full O	Drganization Name	Date of Receipt					
	Mailing Address 4534 MYSTIQUE WAY			M M / D D / Y					
	City ROSWELL	State GA	Zip Code 30075-2087	Transaction ID : PR2552961361223					
	FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) CInt Mgmt NA Accts	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
C.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	Drganization Name	Date of Receipt					
	Mailing Address 842 NAGLE STREET			03 / D D / Y Y Y Y 2021					
	City HOUSTON	State TX	Zip Code 77003-1266	Transaction ID : PR2552961461223 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		76.92					
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			538.44					
т	OTAL This Period (last page this line number or	nly)							

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I FLANNERY, SCOTT, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8508 TRELADY CT			03 / D D / Y Y Y Y 2021							
City PLANO	State TX	Zip Code 75024-6827	Transaction ID : PR2552962361223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I JAMES, GREGORY, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2323 KINGS POINT DRIVE										
City LARGO	State FL	Zip Code 33774-1009	Transaction ID : PR2552963261223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С	76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	D/P Doduction (\$28.46 Ri Weekhy)							
Other (specify) V		230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. LOVELADY, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5378 BUENA VISTA DR			03 / D D / Y Y Y Y 2021							
City FRISCO	State TX	Zip Code 75034-2253	Transaction ID : PR2552964261223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Bus Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			653.82							
TOTAL This Period (last page this line numbe	r only)									

Use separate schedule(s)

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PAGE 32 OF

			Use separate schedule(s)	(check	(check only one)								
	EMIZED RECEIPIS		for each category of the Detailed Summary Page		F	_	1b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the r			rson for			se of s						
$\overline{\ }$	NAME OF COMMITTEE (In Full)			\sim									
	UnitedHealth Group Incorporated		United Health Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia PAULUS, LESLIE, , ,	al) or Full O	rganization Name	Da	te of l	Rece	eipt						
	Mailing Address 305 E TUCKEY LN			M M / D D / Y Y Y Y 03 31 2021									
	City PHOENIX	State AZ	Zip Code 85012-1048	Transaction ID : PR2552965261223 Amount of Each Receipt this Period									
	FEC ID number of contributing	_		_ Arr	iount	OTE	acn He	ceipt th					
	federal political committee.	С		15	_	-7			76	.92			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	upation (for Individual) I Dir		Mer	mo lt	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R	Dedu	ction	(\$38.4	6 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia POTTER, DONALD, , ,	al) or Full O	rganization Name	Da	te of I	Rece	eipt						
	Mailing Address 116 FULLER LANE			M	м 03	/	D D 31	/ Y	y y 2021	Y			
	City WINNETKA	State IL	Zip Code 60093-4213)6546122	-			
	FEC ID number of contributing federal political committee.	C							is Perioc 69	.22			
	Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncNA VP Business Development						tem						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 207.66	 P/R	Deduc	ction	(\$34.6	1 Bi-We	eekly)				
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia STREIT, BARRY, , ,	al) or Full O	rganization Name	Da	te of I	Rece	eipt						
	Mailing Address 5421 KELLOGG AVENUE			M	03 ^M	/	D D 31	/ Y	2021	Ŷ			
	City EDINA	State MN	Zip Code 55424-1604						9667612				
	FEC ID number of contributing federal political committee.	С				y			384				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Felesales & Bus Dev		Mei	mo li	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R	Dedu	ction	(\$192	.30 Bi-V	/eekly)				
s	UBTOTAL of Receipts This Page (optional)		•			,		,	530	.74			
т	OTAL This Period (last page this line number or	nly)						-					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 33 OF

		Use separate schedule(s)	(check only one)								
EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	I ay not be sold or used by any paddress of any political committee	erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (UnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I A. VOJTA, DENEEN, , ,	nitial) or Full C	Organization Name	Date of Receipt								
Mailing Address 125 WALKER AVE S			03 / D D / Y Y Y Y 2021								
City WAYZATA	State MN	Zip Code 55391-1724	Transaction ID : PR2553475561223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Initiv Clin Aff	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I REIDY, GREGORY, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 1005 BLAKEFIELD DRIVE											
City BRENTWOOD	State TN	Zip Code 37027-8479	Transaction ID : PR2554013361223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	ů l										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I CLUTE, DANIEL, , ,	nitial) or Full C	Organization Name	Date of Receipt								
Mailing Address 7756 N 85TH STREET	State	Zip Code	03 / D D / Y Y Y Y Y 03 / 31 / 2021								
City OMAHA	NE	68122-1281	Transaction ID : PR2560064461223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) I Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			846.12								
TOTAL This Period (last page this line numbe	r only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 34 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)		
11			for each category of the Detailed Summary Page	≭ 11a 11b 11c 12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r					
	NAME OF COMMITTEE (In Full)		duress of any political committee			
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	NC)		
A.	Full Name of Individual (Last, First, Middle Initia GIANCURSIO, DONALD, , ,	Date of Receipt				
	Mailing Address 72 MIDNIGHT RIDGE DR	03 31 Y Y Y Y 2021				
	City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064961223 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		384.60		
	Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Plan CEO	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)		
в.	Full Name of Individual (Last, First, Middle Initia KUNEMUND, GREGG, , ,	Date of Receipt				
	Mailing Address 3169 NEAL COURT	03 / D D / Y Y Y Y 2021				
	City CUMMING	State GA	Zip Code 30041-6111	Transaction ID : PR2560065361223		
		GA	30041-0111	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		384.60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)		
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Receipt		
0.	Mailing Address 55 CLIFFIELD ROAD	03 31 2021				
	City BEDFORD	State NY	Zip Code 10506-1210	Transaction ID : PR2560065461223		
			10506-1210	Amount of Each Receipt this Period		
	federal political committee.	ID number of contributing al political committee.				
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	upation (for Individual) Dir	Memo Item		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)		
s	UBTOTAL of Receipts This Page (optional)			963.20		
т	OTAL This Period (last page this line number or	וy)				

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle LOBERG, ANGELA, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 2837 EAST PARK PLACE	03 31 2021		
City MILWAUKEE	State WI	Zip Code 53211-3845	Transaction ID : PR2560065561223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. MILICH, DAVID, , ,	Date of Receipt		
Mailing Address 2702 BIRCHMERE COUR	03 31 2021		
City KATY	State TX	Zip Code 77450-1303	Transaction ID : PR2560066061223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. BURDICK, STEVEN, , ,	Date of Receipt		
Mailing Address 28961 SOMERS DRIVE	03 / D D / Y Y Y Y 2021		
City NAPLES	State FL	Zip Code 34119-0915	Transaction ID : PR2560349861223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P CInt Mgmt Svc	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			538.44
TOTAL This Period (last page this line numb	per only)		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12		
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee		
NAME OF COMMITTEE (In Full)		duress of any political committee			
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)		
Full Name of Individual (Last, First, Middle NOEL, TIMOTHY, , ,	Date of Receipt				
Mailing Address 4316 FREMONT AVENUE	03 / D D / Y Y Y Y 2021				
City MINNEAPOLIS	State MN	Zip Code 55409-1721	Transaction ID : PR2560398861223 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		384.60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)		
Full Name of Individual (Last, First, Middle B. LUND, BRIAN, , ,	Date of Receipt				
Mailing Address 11471 NORTH SHORE DR	03 31 2021				
City	State WI	Zip Code	Transaction ID : PR2561457661223		
GRANTSBURG	VVI	54840-8059	Amount of Each Receipt this Period		
federal political committee.	FEC ID number of contributing federal political committee.				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item		
Receipt For: Aggi Primary General		Year-to-Date V	P/R Deduction (\$39.00 Bi-Weekly)		
Other (specify)	L	234.00			
Full Name of Individual (Last, First, Middle WILLSON, JOSH, , ,	Date of Receipt				
Mailing Address 201 ADAMS CT	03 / D D / Y Y Y Y Y 03 31 2021				
	State TX	Zip Code 76034-6811	Transaction ID : PR2564802561223 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	76.92				
Name of Employer (for Individual) United HealthCare Services Inc	Occ RVF	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)		
SUBTOTAL of Receipts This Page (optional)			539.52		
TOTAL This Period (last page this line numb					

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

FOR LINE NUMBER:

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PAGE 37 OF

			Detailed Summary Page	×	11a] 111	b	11c	12				
					13		14		15	16	17			
	y information copied from such Reports and Stateme for commercial purposes, other than using the name													
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA	AC (L	UnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) or CARLSON, CHRISTOPHER, , ,	Full O	Drganization Name		Date of	Re	ceip	pt						
	Mailing Address 10618 WEST RIVER ROAD				03 31 Y Y Y Y 2021									
	City Sta		Zip Code		Trans	acti	ion	ID : F	R2564	802661	223			
	BROOKLYN PARK MI	N	55443-1233	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.			192.30										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Innovation		Me	emo) Ite	em						
	Receipt For: Aggr Primary General Other (specify) ▼	regate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) or HANSEN, PAUL, , ,	Full O	Drganization Name		Date of	Re	eceip	pt						
	Mailing Address 18430 62ND PLACE NORTH				м м 03	/	D	31	/ Y	2021	Ý			
	City Sta MAPLE GROVE M		Zip Code 55311-4585							8027612 nis Perio				
	FEC ID number of contributing federal political committee.	ů l								19	4.00			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) t Grp Controller		Memo Item									
	Receipt For: Aggr Primary General Other (specify) ▼	regate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) or MARDEN, PAUL, , ,	Full O	Drganization Name		Date of	Re	eceip	pt						
	Mailing Address 9 VAN MULEN STREET				м м 03	/		31	/ Y	2021	Y			
	City Sta MAHWAH N		Zip Code 07430-2977	A			-			803361 nis Perio	-			
	FEC ID number of contributing federal political committee.						y			38	4.60			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) n Plan CEO		M	emo) Ite	em						
	Receipt For: Aggr Primary General Other (specify)	regate	Year-to-Date ▼ 1153.80	P/	/R Ded	uctio	on ((\$192	.30 Bi-V	Veekly)				
s	UBTOTAL of Receipts This Page (optional)						,			77	0.90			
т	DTAL This Period (last page this line number only)						-				40.			

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12									
٨٣	/ information copied from such Reports and State	monto	, ,	13 14 15 16 17									
or	for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group PA	C)									
	Full Name of Individual (Last, First, Middle Initial)	or Full C	organization Name										
Α.	MOQUIST, DARREN, , , Mailing Address 5004 ARDEN AVE			Date of Receipt									
	City	State	Zip Code	03 31 2021 Transaction ID : PR2564803461223									
	EDINA	MN	55424-1314	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item									
	Receipt For:	lggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)									
	Other (specify) V		1153.80										
	Full Name of Individual (Last, First, Middle Initial) WICKS, TIMOTHY, , ,	or Full C	organization Name	Date of Receipt									
	Mailing Address 3227 CASCO CIRCLE POBOX 352			03 / D D / Y Y Y Y 2021									
	City WAYZATA	State MN	Zip Code 55391-9717	Transaction ID : PR2565448661223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Segment CEO	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) CARTER, WILLIAM, , ,	or Full C	Prganization Name	Date of Receipt									
	Mailing Address PO BOX 920679			03 / D D / Y Y Y Y 03 31 2021									
	City HOUSTON	State TX	Zip Code 77292-0679	Transaction ID : PR2565448761223									
		C	11232-0019	Amount of Each Receipt this Period 76.92									
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
	United HealthCare Services Inc Receipt For:		KA VP SIs Acct Mgt	_									
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
-				846.12									
SI	JBTOTAL of Receipts This Page (optional)		••••••										
т	DTAL This Period (last page this line number only	/)	····· ►										

SCHEDULE A (FEC Form 3X) DEOFIDTO

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle In A. KUNST, THOMAS, , ,	itial) or Full C	rganization Name	Date of Receipt										
Mailing Address 4872 103RD STREET			M M										
City PLEASANT PRAIRIE	State WI	Zip Code 53158-6516											
FEC ID number of contributing federal political committee.	С		153.84										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)										
Full Name of Individual (Last, First, Middle In B. STEARNS, MATTHEW, , ,	itial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5118 FAIRGLEN LANE			03 / D / Y Y Y 2021										
City CHEVY CHASE	State MD	Zip Code 20815-6517	Transaction ID : PR2571777961223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle In c. PARRILLO, CHRISTOPHER, , ,	itial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9501 WEXCROFT DRIVE			03 / D D / Y Y Y Y Y 2021										
City BRENTWOOD	State TN	Zip Code 37027-3824	Transaction ID : PR2571778261223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		154.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 462.00	P/R Deduction (\$77.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			692.44										
TOTAL This Period (last page this line number	only)												

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

FOR LINE NUMBER:

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11	а		1	1b			11c	1	12	
						13			14	4			15	1	16	17
	y information copied from such Reports and Stateme for commercial purposes, other than using the name															
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated Pa	AC (l	Jni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) or MOYER, BRUCE, , ,	Full O	rgar	nization Name		Date	e of	Re	ece	eipt						
	Mailing Address 6890 CANTERBURY LANE		_			03 / D D / Y Y Y Y Y 2021									Y	
		tate		Zip Code		Tra	ans	acti	ior	n IC):F	PR	25717	7836	61223	
	EDEN PRAIRIE N	1N		55346-2904	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	;			78.00										0	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt			Me	emo	o It	tem	ı					
	Receipt For: Agg Primary General Other (specify) ▼	pregate	Yea	ur-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Initial) or HINTON, DUSTIN, , ,	Full O	rgar	nization Name		Date	e of	Re	ece	eipt						
	Mailing Address W132N6475 MARACH RD			Zip Code		03 / D D / Y Y Y Y 03 31 2021										
		tate VI									25719 eipt thi					
	FEC ID number of contributing federal political committee.	C							,				-	4	444.0	0
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) In CEO	Memo Item											
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	ur-to-Date ▼ 559.38	P/R Deduction (\$222.00 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial) or CARLSON, KEVIN, , ,	^r Full O	rgar	nization Name		Date	e of	Re	ece	eipt						
	Mailing Address 4511 BROWNDALE AVENUE)3 [™]	/	ľ		р 31]	/ Y	202	21 21	Y
	5	tate /IN		Zip Code 55424-1142									25725			5
	FEC ID number of contributing federal political committee.		ī	00424-1142		Amc	ount	of	Ea	ach	Re	ece	eipt thi	-	eriod 192.3	0
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP 0			M	emo	o li	tem	ı							
	Receipt For:	gregate	P/R Deduction (\$96.15 Bi-Weekly)													
s	UBTOTAL of Receipts This Page (optional)				_				,				9	7	714.3	0
т	OTAL This Period (last page this line number only)								-				-		-	

SCHEDULE A (FEC Form 3X) DEOFIDTO

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TEMIZED RECEIPTS				itegory of the immary Page		× 11a		11b	11c	12						
	v information copied from such Reports and Stat for commercial purposes, other than using the n															
	NAME OF COMMITTEE (In Full)				. 10 0											
	UnitedHealth Group Incorporated	PAC (l	JnitedHea	lth Group PA	NC)											
	Full Name of Individual (Last, First, Middle Initial WIFFLER, THOMAS, , ,) or Full O	rganization Na	me		Date of	Red	ceipt								
	Mailing Address 1421 SOMERFIELD DRIVE					M = M / D = D / Y = Y = Y = Y 03 31 2021 Transaction ID : PR2572992761223 Amount of Each Receipt this Period										
-	City BOLINGBROOK	State IL	Zip Code 60490-3	207	_											
	FEC ID number of contributing rederal political committee.	С			384.60											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ind Unit CEO	dividual)		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	1153.80		P/R Dedu	uctio	ın (\$192	.30 Bi-W	/eekly)						
	Full Name of Individual (Last, First, Middle Initial QUINN, PATRICK, , ,) or Full O	rganization Na	me		Date of	Red	ceipt								
	Mailing Address 16933 TODD EVAN TRAIL	1		03	/	D D D 31	/ Y	2021	Y							
	City CHESTERFIELD	State MO	Zip Code 63005-4	641						51876122 is Period	-					
	FEC ID number of contributing rederal political committee.					,	-	192								
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Ind Plan CEO		Memo Item											
Ì	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	576.90	F	P/R Dedu	uctio	n (\$96.1	5 Bi-We	ekly)						
	Full Name of Individual (Last, First, Middle Initial KANE, BRIAN, , ,) or Full O	rganization Na	me		Date of	Red	ceipt								
-	Mailing Address 4615 ROANOAKE ROAD	1	1			03 ^M	/	D D D 31	/ Y	y y 2021	Y					
(City GOLDEN VALLEY	State MN	Zip Code 55422-52	254						9791612 iis Perioc						
	FEC ID number of contributing rederal political committee.	С				<u> </u>		y		384	.60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Inc Comm		Me	emo	ltem									
Ī	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date	1153.80		P/R Ded	uctic	on (\$192	30 Bi-V	/eekly)						
รเ	JBTOTAL of Receipts This Page (optional)							y	.,	961	.50					
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SCHEDULE A (FEC Form 3X) •

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 17 erson for the purpose of soliciting contributions a to colicit contributions									
or for commercial purposes, other than using t		address of any political committee										
UnitedHealth Group Incorpora	ted PAC (UnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle MASTERS, SCOTT, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 1894 VILLAGE GLEN DRIV	E		03 / D D / Y Y Y Y 2021									
City SAINT JOHNS	State FL	Zip Code 32259-9215	Transaction ID : PR2574979661223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		77.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. WOHNOUTKA, CHRISTOPHER,		Organization Name	Date of Receipt									
Mailing Address 17597 HIBISCUS AVE			M M / D D / Y Y Y Y 03 31 2021									
City _LAKEVILLE	State MN	Zip Code 55044-3906	Transaction ID : PR2574981961223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. SIMPSON, TRENT, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 3111 NORCREST AVE N			03 / D D / Y Y Y Y 2021									
City STILLWATER	State MN	Zip Code 55082-1779	Transaction ID : PR2574985061223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			230.84									
TOTAL This Period (last page this line number	er only)	······										

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle CIANFROCCO, HEATHER, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4478 MIDDLE ROAD			03 / D D / Y Y Y Y 2021									
City ALLISON PARK	State PA	Zip Code 15101-1110	Transaction ID : PR2574986261223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. BURNETT, JAMIE, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4625 EWING AVENUE SO	UTH		03 31 2021									
	State MN	Zip Code	Transaction ID : PR2574988261223									
MINNEAPOLIS		55410-1745	Amount of Each Receipt this Period									
federal political committee.	FEC ID number of contributing federal political committee.											
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		234.00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle LANG, HEATHER, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1210 RIVER TERRACE D	RIVE		03 / D D / Y Y Y Y 03 31 2021									
City BLOOMINGTON	State MN	Zip Code 55431-4230	Transaction ID : PR2574991461223									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			539.52									
TOTAL This Period (last page this line numb	er only)											

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

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PAGE 44 OF

TTEMIZED RECEIPTS			Detailed Summary Page					४ 11a ☐ 11b ☐ 11c ☐ 12								
						13		14		15		16	17			
An or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements m name and a	ay r addr	not be sold or used by any peess of any political committee	ersor to s	n for the solicit cor	purp ntrib	pos outic	e of s	solicitir om sue	ig co ch co	ontribu ommitt	tions ee.			
\backslash	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporated	d PAC (Un	itedHealth Group PA	(C)											
۹.	Full Name of Individual (Last, First, Middle Initia SJOBLAD, BETHANY, , ,	al) or Full C	Drga	nization Name		Date of	Re	eceij	pt							
	Mailing Address 10730 PERRY DRIVE NORTH					03 31 2021										
	City	State		Zip Code		Transaction ID : PR2575009161223										
	BROOKLYN PARK	MN		55443-4700	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С				384.60										
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Mgmt		Me	emo) Ite	em							
	Receipt For:	Aggregate	Yea	ar-to-Date ▼												
	Primary General Other (specify) ▼		100	1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
В.	Full Name of Individual (Last, First, Middle Initia DUNCAN, MICHELE, , ,	al) or Full C	Drga	nization Name		Date of	Re	cei	pt							
	Mailing Address 3038 FAIRWAY CIRCLE		м м 03	/		31	1		021	Y						
	City	State		Zip Code		Trans	acti	on	ID : F	R2575	5029	66122	3			
	CHASKA	MN		55318-3408		Amount	of	Ead	ch Re	ceipt t	his I	Period				
	FEC ID number of contributing federal political committee.				7				384.	60						
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) ompliance		Me	emo) Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	ar-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)												
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia OBRIEN, JENNIFER, , ,	al) or Full C	Drga	nization Name		Date of	Re	cei	pt							
	Mailing Address 395 WOODLAWN AVE			-		03 31 2021										
	City	State		Zip Code		Trans	acti	ion	ID : F	PR257	5034	56122	3			
	SAINT PAUL	MN		55105-1339		Amount	of	Ead	ch Re	ceipt t	his I	Period				
	FEC ID number of contributing federal political committee.	С				384.60										
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)		Memo Item										
	United HealthCare Services Inc		•	ompli Off												
	Receipt For:	1		ar-to-Date ▼												
	Primary General Other (specify)			1153.80		P/R Ded	uctio	on ((\$192	.30 Bi-	Wee	kly)				
	JBTOTAL of Receipts This Page (optional)			· · ·	I			9	-		-	1153.8	30			

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)										
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	3	K 11a 13		11b 14	11c	12	17				
	ormation copied from such Reports and Stat commercial purposes, other than using the n				for the		oose of	soliciting	contribu	tions				
	ME OF COMMITTEE (In Full) hitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)										
	Name of Individual (Last, First, Middle Initia ADDOX, JEFFREY, , ,) or Full Or	ganization Name		Date of	Re	ceipt							
Mail	ing Address 7810 HANOVER ST				03 03 2021 Transaction ID : PR2575039561223 Amount of Each Receipt this Period									
City DAI	LLAS	State TX	Zip Code 75225-8220											
	D number of contributing political committee.	С		384.60										
Unit	ne of Employer (for Individual) ed HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item							
Rec	eipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 1153.80	1	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)					
	Name of Individual (Last, First, Middle Initial LENBURG, THOMAS, , ,) or Full Or	ganization Name		Date of	Re	ceipt							
	ing Address 6620 IROQUOIS TRAIL		03	1	D D D 31	/ Y	y y 2021	Y						
City EDI		State MN	Zip Code 55439-1016						3986122 is Period	3				
FEC	FEC ID number of contributing federal political committee.								76.9	92				
	ne of Employer (for Individual) ed HealthCare Services Inc	Occu VP N	pation (for Individual) Iktg	Memo Item										
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
	Name of Individual (Last, First, Middle Initia DRDAN, GARELL, , ,) or Full Or	ganization Name		Date of	Re	ceipt							
	ing Address 6104 S 64TH DRIVE				03 ^M	/	31	JL	2021 Y					
City LA	/EEN	State AZ	Zip Code 85339-2917				-		05026122 is Period	3				
	D number of contributing ral political committee.	С			30									
Opt	ne of Employer (for Individual) um Services, Inc		pation (for Individual) en Mgmt	Memo Item										
	eipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 576.90	1	P/R Ded	uctio	on (\$96.	.15 Bi-We	ekly)					
SUBT	OTAL of Receipts This Page (optional)			•			, ,		653.8	32				
тота	L This Period (last page this line number on	ly)	•	- •			. .							

SCHEDULE A (FEC Form 3X) • •

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. FITZPATRICK, JOSEPH, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3936 CAMPELLO CURVE			03 31 Y Y Y Y Y									
City CHASKA	State MN	Zip Code 55318-4639	Transaction ID : PR2575053761223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle LINDSAY, VIVIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 14930 SW 39 ST												
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054961223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle MCCARTY, CARY, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 8800 RUMFIELD RD			03 31 2021									
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Transaction ID : PR2575059461223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		78.00									
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:		upation (for Individual) Gen Mgmt	Memo Item									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			847.20									
TOTAL This Period (last page this line numb	er only)											

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				or each category of the Detailed Summary Page	×	-	1a 3] 1′] 14	1b 4		11c 15	12	17			
	y information copied from such Reports and Statem for commercial purposes, other than using the name					for	the		po	se of		oliciting	contribu	utions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (U	Jni	tedHealth Group PA	C)												
A.	Full Name of Individual (Last, First, Middle Initial) of ALLEN, MARK, , ,	r Full Or	rgan	ization Name		Da	te of	Re	ece	eipt							
	Mailing Address 11359 ENTREVAUX DRIVE				03 / D D / Y Y Y Y 2021												
	5	itate //N		Zip Code 55347-2862		Transaction ID : PR2575060261223											
	FEC ID number of contributing federal political committee.			55547-2002	Amount of Each Receipt this Period												
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) Mgmt	Memo Item												
	Receipt For:			r-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)												
в.	Full Name of Individual (Last, First, Middle Initial) of ZAETTA, CHRISTOPHER, , ,	r Full Or	rgan	ization Name		Da	te of	Re	ece	eipt							
	Mailing Address 5840 RIDGE ROAD					03 / D D / Y Y Y Y 2021											
	5	itate MN					-				6836122 is Period						
	FEC ID number of contributing federal political committee.	ů – Elektrik										-9	384	.60			
	Name of Employer (for Individual) Optum Services, Inc									Memo Item							
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)												
с.	Full Name of Individual (Last, First, Middle Initial) of VERCHICK, TAMI, , ,	r Full Or	rgan	ization Name		Da	te of	Re	ece	eipt							
	Mailing Address 9916 DUSTY WINDS AVE						03 ^M	1	l	D 31			y 2021				
	,	itate NV		Zip Code 89117-5986					-				0689612 is Period	-			
	FEC ID number of contributing federal political committee.	;					Junt		c		100		76	.92			
	Name of Employer (for Individual) Optum Services, Inc		on (for Individual) Technology			Me	emo	o It	tem								
	Receipt For: Agg Primary General Other (specify)	gregate \	P	?/R	Ded	uctio	on	(\$38	3.40	6 Bi-We	ekly)						
s	UBTOTAL of Receipts This Page (optional)			•••••					,		2	,	615	.36			
т	OTAL This Period (last page this line number only).			••••••					-]	- 45-					

SCHEDULE A (FEC Form 3X) DEAEIDTA

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	▲ 11a 11b 11c 12										
			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)	the name and a	doress of any political committe	e to solicit contributions from such committee.										
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle A. ISMERT, JENNY, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 8494 E HAWAII LN			03 31 2021 Transaction ID : PR2575070061223 Amount of Each Receipt this Period										
City DENVER	State CO	Zip Code 80231-2732											
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. CHRISTIAN, DENISE, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5 WINGATE COURT			03 / D D / Y Y Y Y 2021										
City FLOURTOWN	State	Zip Code 19031-1117	Transaction ID : PR2575071461223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Clin Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. NICHOLS, SANDRA, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 12706 YOUNG LANE			03 / D D / Y Y Y Y 2021										
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Transaction ID : PR2575074561223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CMO	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			846.12										
TOTAL This Period (last page this line numb	per only)												

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	g the hame and a											
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Midd BAUSCH, REBECCA, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 26 BELLAIR DRIVE			03 / D D / Y Y Y Y 2021									
City DOBBS FERRY	State NY	Zip Code 10522-3502	Transaction ID : PR2575079361223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Growth Off	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. HEROLD, STACI, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 15008 GREEN OAKS TF			03 / D D / Y Y Y Y 03 31 2021									
City PRIOR LAKE	State MN	Zip Code 55372-2159	Transaction ID : PR2575093061223									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. VIESTA, RICHARD, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1 COMPASS COURT			M M / D D / Y Y Y Y Y 03 31 2021									
City OYSTER BAY	State NY	Zip Code 11771-1602	Transaction ID : PR2575098561223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Actuary	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional	al)		538.44									
TOTAL This Period (last page this line nur	nber only)											

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	17							
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions	17							
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	.C)								
A.	Full Name of Individual (Last, First, Middle Initia BENARDETTE, DANIEL, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 4752 YORK AVE S			03 31 Y Y Y Y Y 03 2021								
	City MINNEAPOLIS	State MN	Zip Code 55410-1868	Transaction ID : PR2575102861223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.30								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Pagaint For:			Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia HAYDEN, KARI, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 6109 BANEY COURT			03 / D D / Y Y Y Y 2021								
	City MINNETONKA	State MN	Zip Code 55345-6301	Transaction ID : PR2575110361223 Amount of Each Receipt this Period								
MINNETONKA MN FEC ID number of contributing federal political committee.				76.92								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia MORSCH, MARK, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 6344 GOLDEN LILY WAY			03 / D D / Y Y Y Y 2021								
	City SAN DIEGO	State CA	Zip Code 92130-6836	Transaction ID : PR2575115161223Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Aggregate Primary General Other (specify)			Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	346.14]							
т	OTAL This Period (last page this line number or	nly)	••••••									

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Midd A. DEWALL, PATRICK, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7662 RIDGEVIEW WAY			03 31 / Y Y Y Y 2021									
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575145361223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) puty Gen Counsel Mgr	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. PETERSOHN, PATRICK, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 16413 BIRCH STREET			03 / D D / Y Y Y Y 03 31 2021									
City OVERLAND PARK	State KS	Zip Code 66085-7842	Transaction ID : PR2575148361223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg VP of SIs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. THOMAS, DIANE, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 102 BELLA TOSCANA L			M M / D D / Y Y Y Y 03 31 2021									
City LAKEWAY	State TX	Zip Code 78734-2165	Transaction ID : PR2575156461223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		153.84									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Pres	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	al)		730.74									
TOTAL This Period (last page this line num	nber only)											

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. HAMANN, CHAD, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7638 RIDGEVIEW WAY			03 31 2021								
City	State	Zip Code	Transaction ID : PR2575170161223								
CHANHASSEN	MN	55317-4507	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
		Agin I Agin I Agin I	·								
Full Name of Individual (Last, First, Middle REICHLING, KRISTIN, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6516 TINGDALE AVENUE			03 / D D / Y Y Y Y 2021								
City	State MN	Zip Code	Transaction ID : PR2575186861223								
	IVIIN	55439-1440	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Human Capital	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. DEMARIS, PETER, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2301 OLIVER AVE S			03 31 Y Y Y Y Y 2021								
City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191861223								
	IVIIN	55405-2446	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual)		upation (for Individual)	Memo Item								
United HealthCare Services Inc Receipt For:		Mktg eComm									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			1153.80								
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) DEOEIDTO

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1									
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I GRANBERG, MITCHELL, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 6721 GALWAY DRIVE			03 / D D / Y Y Y Y 03 31 2021									
City EDINA	State MN	Zip Code 55439-1313	Transaction ID : PR2575196161223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.50	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I CHAN, DERRICK, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1773 CANYON OAKS LN			03 / D D / Y Y Y Y 03 31 2021									
City LAKE FOREST	State CA	Zip Code 92610-3016	Transaction ID : PR2575200561223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)									
		4										
Full Name of Individual (Last, First, Middle II CONDON, CRAIG, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 268 OAK LANDING WAY	State	Zin Code	03 / D D / Y Y Y Y 2021									
City SEVERNA PARK	MD	Zip Code 21146-3116	Transaction ID : PR2575203161223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			692.28									
TOTAL This Period (last page this line numbe	r only)											

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Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. FRANCIS, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 15815 MINNETONKA BLVI	D		03 31 2021									
City	State	Zip Code	Transaction ID : PR2575203361223									
MINNETONKA	MN	55345-1410	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc	VP	Chief Actuary										
	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
			1									
Full Name of Individual (Last, First, Middle B. CARRIS, DONNA, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 27 WEST WILLOW LN			03 31 YYYYY 2021									
City	State	Zip Code	Transaction ID : PR2575212561223									
CHARLESTOWN	RI	02813-1727	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name										
C. STORDAHL, PAUL, , ,			Date of Receipt									
Mailing Address 7001 W 175TH AVENUE			03 / D D / Y Y Y Y 2021									
City	State	Zip Code	Transaction ID : PR2575213061223									
EDEN PRAIRIE	MN	55346-2161	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			846.12									
TOTAL This Period (last page this line number												

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Use separate schedule(s)

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			Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12									
	y information copied from such Reports and Sta												
or	for commercial purposes, other than using the n	ame and a	address of any political committee	to solicit contributions from such committee.									
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	.C)									
A.	Full Name of Individual (Last, First, Middle Initia MEYERHOFER, JEFFREY, , ,	l) or Full O	Drganization Name	Date of Receipt									
	Mailing Address 6624 IROQUOIS TRAIL			03 / D D / Y Y Y Y 2021									
	City EDINA	State MN	Zip Code 55439-1065	Transaction ID : PR2575214661223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) s Unit COO	Memo Item									
Poppint For:			Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia KOENIG, ERICA, , ,	l) or Full O	Drganization Name	Date of Receipt									
	Mailing Address 5985 PRESTWICK COURT			03 31 2021									
	City EXCELSIOR	State MN	Zip Code 55331-4412	Transaction ID : PR2575215061223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Human Capital	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia TRUXAL, WILLIAM, , ,	l) or Full O	Drganization Name	Date of Receipt									
	Mailing Address 226 HARBOR VIEW LANE			03 / D D / Y Y Y Y 2021									
	City LARGO	State FL	Zip Code 33770-4007	Transaction ID : PR2575218461223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		supation (for Individual) sion CEO	Memo Item									
Receipt For: Aggregate Year- Primary General Other (specify) Image: Content of the second sec			Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			884.58									
т	OTAL This Period (last page this line number or	ıly)	••••••										

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
or for commercial purposes, other than usin			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Midd A. WILSON, ADAM, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 336 SALEM CHURCH R			03 / D D / Y Y Y Y 2021							
City SUNFISH LAKE	State MN	Zip Code 55118-4719	Transaction ID : PR2575218661223							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. SHORS, MATTHEW, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4649 EWING AVENUE S	SOUTH		03 31 2021							
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2575222361223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. SANTORO, MICHAEL, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 18 OLD FIRE ROAD			03 / D D / Y Y Y Y 03 31 2021							
City TRUMBULL	State CT	Zip Code 06611-1431	Transaction ID : PR2575222661223							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP (upation (for Individual) Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	al)		884.58							
TOTAL This Period (last page this line nur	mber only)									

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1 ¹									
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle In A. KRUTA, DARLENE, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9243 GREEN BRIAR RD			03 31 Y Y Y Y Y 2021									
City BLOOMINGTON	State MN	Zip Code 55437-1939	Transaction ID : PR2575232561223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In B. GRUNDHOEFER, BRYAN, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1500 STAG MEADOW			03 / D D / Y Y Y Y Y 2021									
City	State	Zip Code	Transaction ID : PR2575232761223									
SAN ANTONIO	ТХ	78248-1346	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.00									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O Med Grp Non Physn	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1152.00	P/R Deduction (\$192.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In C. KIRKPATRICK, SUSAN, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 417 STERLING STREET			03 / D D / Y Y Y Y Y 03 31 2021									
City LANCASTER	State MA	Zip Code 01523-1847	Transaction ID : PR2575233661223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) PRisk Management	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			537.84									
TOTAL This Period (last page this line number	only)											

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				lse separate schedule(s)	(cł	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page			X 11a		11b	11c	12		_		
	y information copied from such Reports and Sta for commercial purposes, other than using the n											17 s		
$\overline{\langle}$	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	I PAC (l	Uni	tedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia CHOATE, THOMAS, , ,	l) or Full O	Drgan	ization Name		Date of	Re	ceipt						
	Mailing Address 8222 STONE MASON CT					03	/	D D D 31	/ Y	y y 2021	Y			
	City WINDERMERE	State FL		Zip Code 34786-5624	_					2478612 nis Perio				
	FEC ID number of contributing federal political committee.	С						.		444	1.00			
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) CEO		Me	emo	Item						
Receipt For: Aggregation Primary General Other (specify) ▼			Year	r-to-Date ▼ 597.84		P/R Deduction (\$222.00 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initia DIMARTINO, TIMOTHY, , ,	l) or Full O	Drgan	ization Name		Date of	Re	ceipt						
	Mailing Address 49605 KEYCOVE ST					03	1	D D D 31	/ Y	y y 2021	Y			
	CHESTERFIELD	State MI		Zip Code 48047-2361				-		2481612 nis Perio	-			
	FEC ID number of contributing federal political committee.	С								76	6.92			
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) /P SIs Acct Mgt		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 230.76		P/R Deduction (\$38.46 Bi-Weekly)								
c.	Full Name of Individual (Last, First, Middle Initia DARRAH, JACQUELINE, , ,	l) or Full O	Drgan	ization Name		Date of	Re	ceipt						
	Mailing Address 6725 YORK AVENUE SOUTH #					03 ^M	1	D D D 31	JL	2021				
	City EDINA	State MN		Zip Code 55435-3235				-		2485612 nis Perio	-			
	FEC ID number of contributing federal political committee.	С				Ľ.		,	, <u>,</u>	76	6.92			
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) Gen Counsel		Me	emo	Item						
Receipt For: Aggregate Yes Primary General Other (specify)			Year	r-to-Date ▼ 230.76		P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)							9		597	.84			
т	OTAL This Period (last page this line number or	ıly)		•••••	-			,						

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports or for commercial purposes, other than usir	and Statements mang the name and a	I ay not be sold or used by any p address of any political committed	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Mide BRANT, PAUL, , ,	lle Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 17 ROCKY BROOK RO	AD		03 31 2021								
City WILTON	State CT	Zip Code 06897-1919	Transaction ID : PR2575250261223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Mide B. KORF, GRETCHEN, , ,	lle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 3180 CYPRESS CIRCL			03 / D D / Y Y Y Y Y 2021								
City MEDINA	State MN	Zip Code 55340-8807	Transaction ID : PR2575252261223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mido C. KUETER, DANIEL, , ,	lle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 1500 WINGATE DRIVE			03 / D D / Y Y Y Y 2021								
City DELAWARE	State OH	Zip Code 43015-9200	Transaction ID : PR2575255861223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Network	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		846.12								
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Use separate schedule(s) for each category of the Detailed Summary Page

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	NAME OF COMMITTEE (In Full)			_										
	UnitedHealth Group Incorporate	ed PAC (l	Jn	itedHealth Group PA	4C)									
٩.	Full Name of Individual (Last, First, Middle In BACHMANN, ANITA, , ,	itial) or Full O	rga	nization Name		Date of	Re	ece	ipt					
	Mailing Address 815 NORTHERN SHORES P	OINT				03	1	E	D 31)	/ Y)21	Y
	City	State		Zip Code		Trans	acti	ior	ID :	PR	25752	2584	6122:	3
	GREENSBORO	NC		27455-3459	_	Amount	of	Ea	ich F	leco	eipt th	is P	eriod	
	FEC ID number of contributing rederal political committee.	С						-			-		384.6	60
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) n CEO		Me	emc	o It	em					
1	Receipt For:	Aggregate	Yea	ur-to-Date ▼										
	Primary General Other (specify) ▼			1153.80		P/R Ded	uctio	on	(\$19)	2.3	0 Bi-W	'eek	ly)	
	Full Name of Individual (Last, First, Middle In REICHEL, RANDI, , ,	itial) or Full O	rga	nization Name		Date of	Re	ece	ipt					
	Mailing Address 331 TUSCANY ROAD					^M 03	1	ľ	D 1		/ Y	ү 20	ү 21	Y
	City	State		Zip Code		Trans	acti	ion	ID :	PR	25752	599	61223	3
	BALTIMORE	MD		21210-2934		Amount	of	Ea	ich F	lec	eipt th	is P	eriod	
	FEC ID number of contributing ederal political committee.	С				192.30								
	Name of Employer (for Individual) Jnited HealthCare Services Inc			tion (for Individual) J Affs		Memo Item								
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 576.90		P/R Deduction (\$96.15 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle In BROOMFIELD, ROBERT, , ,	itial) or Full O	rga	nization Name		Date of	Re	ece	ipt					
	Mailing Address 12501 WEST 156TH STREE	Т				03	/	ľ	31		/ Y	20	ү 21	Y
	City	State		Zip Code		Trans	act	ior	n ID :	PF	25752	2604	6122	3
	OVERLAND PARK	KS		66221-2662		Amount	of	Ea	ich F	lec	eipt th	is P	eriod	
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	Name of Employer (for Individual)	Occi	upa	tion (for Individual)	-	M	emo	o It	em					
	United HealthCare Services Inc	Hlth	Pla	n CEO										
	Receipt For: Primary General Other (anacity)	Aggregate	Yea	ır-to-Date ▼ 276.90	1	P/R Ded	ucti	on	(\$46	.15	Bi-We	ekly	()	
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group	PAC)								
A.	Full Name of Individual (Last, First, Middle Initial) ZARN, MARY, , ,	or Full C	Drganization Name		Date of	Rec	eipt					
	Mailing Address 11192 BLUESTEM LANE				03 / D D / Y Y Y Y 03 31 2021							
	City EDEN PRAIRIE	State MN	Zip Code 55347-4731	-					26916122			
	FFC ID number of contributing	C			Amount	of E	ach Re	ceipt th	is Perioc 134	_		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) ision CEO		Me	emo	Item					
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 403.80		P/R Dedu	uctior	n (\$67.3	0 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial) HAMBLIN, JILLIAN, , ,	or Full C	Drganization Name		Date of	Rec	eipt					
	Mailing Address 3103 BEACON GROVE ST				03	/	D D D 31	/ Y	y y 2021	Y		
	City SPRING	State TX	Zip Code 77389-4348		Transaction ID : PR2575290361223 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С						-	76	.92		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Capability		Me	emo	Item					
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 230.76		P/R Dedu	uctior	ח (\$38.4	6 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initial) SAUER, BRIAN, , ,	or Full C	Drganization Name		Date of	Rec	eipt					
	Mailing Address 28 HILLARY FARM LN				^M ^M 03	1	D D D 31	/ Y	2021	Y		
	City SAINT PAUL	State MN	Zip Code 55110-5934	_					2908612			
	FFC ID number of contributing	C				,		, ceipt th		.92		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt		Me	emo	ltem					
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 230.76		P/R Dedu	uctio	n (\$38.4	€ Bi-We	ekly)			
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	for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHe	ealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia MUELLER, STEVEN, , ,	l) or Full O	rganization	Name		Date of	Red	ceipt				
	Mailing Address 6895 LAKE HARRISON CIRCLE	E				03 / D D / Y Y Y Y 03 31 2021						
	City CHANHASSEN	State MN	Zip Co 5531	de 7-4589				2 9456122 iis Period	3			
	FEC ID number of contributing federal political committee.	С						y	- 45-	76.	92	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (upation (for Ops	Individual)		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Year-to-Date	230.76		P/R Dedu	uctio	n (\$38.4	l6 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia HEWITT, SCOTT, , ,	l) or Full O	rganization	Name		Date of	Red	ceipt				
	Mailing Address 1443 RAYMOND AVE		03	/	D D D 31	/ Y	y y 2021	Y				
	City SAINT PAUL	State MN	Zip Co 55108	de 3-1430			29676122 is Period	3				
	FEC ID number of contributing federal political committee.	С						y		162.	20	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Ntwk Prgms	,		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	e ▼ 445.23	P/R Deduction (\$81.10 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia CUEVAS, BRANDON, , ,	l) or Full O	rganization	Name		Date of	Red	ceipt				
	Mailing Address 8 CLOISTER COURT	1	1			03	/	D D D 31	/ Y	ү ү 2021	Y	
	City LADERA RANCH	State CA	Zip Co 92694	de -1556						30566122 is Period	3	
	FEC ID number of contributing federal political committee.	С				<u> </u>		y =	. y	384.	60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for n CEO	Individual)		Me	emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date	e ▼ 1153.80		P/R Dedu	uctic	ın (\$192	.30 Bi-V	/eekly)		
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Ini HUNT, BRADLEY, , ,	tial) or Full C	rganization Name		Date of	Re	eceipt				
	Mailing Address 6636 W SHORE DR				03	1	31) / Y	y 2024	ү ү 1	
	City EDINA	State MN	Zip Code 55435-1529					PR2575			
	FEC ID number of contributing federal political committee.	С			<u> </u>			-7	38	84.60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO		M	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80]	P/R Ded	ucti	on (\$19	2.30 Bi-V	Veekly)	I	
в.	Full Name of Individual (Last, First, Middle Ini PEEL, CHAD, , ,	tial) or Full C	rganization Name		Date of	f Re	eceipt				
	Mailing Address 7185 GUNFLINT TRAIL				м м 03	1	31		y 2021		
	City CHANHASSEN	State MN	Zip Code 55317-4743					PR2575: Receipt th			
	FEC ID number of contributing federal political committee.	С						-	1	53.84	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIthcare Econ		M	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52] P	P/R Ded	uctio	on (\$76.	.92 Bi-We	eekly)		
c.	Full Name of Individual (Last, First, Middle Ini WHITE, WAYNE, , ,	tial) or Full C	rganization Name		Date of	Re	eceipt				
	Mailing Address 8727 W BUCKHORN TRL	State	Zip Code		03	Ŀ.	31 31		2021		
	PEORIA	AZ	85383-4852	_			-	Receipt th		-	
	FEC ID number of contributing federal political committee.	С			Ľ.	_	,	y	38	84.60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs		M	emo	o Item				
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)		haita all la alth. One un Di							
	UnitedHealth Group Incorporate		United Health Group PA	4C)						
V	Full Name of Individual (Last, First, Middle Ini	itial) or Full O	Organization Name							
Α.	TELESKY, MICHAEL, , ,				Date of	Re	ceipt			
	Mailing Address 2602 PENNINGTON PLACE				03	1	31	/ Y	2021	Y
	City	State	Zip Code			acti		PR25753	35096122	3
	VALPARAISO	IN	46383-9163		Amount	t of	Each R	eceipt th	is Period	
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	federal political committee.	U			<u></u>		y		1 1 40	
	Name of Employer (for Individual)		upation (for Individual)		M	emo	Item			
	United HealthCare Services Inc	SB	KA VP SIs							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				مەر (¢20			
	Other (specify) ▼		234.00		F/R Deu	ucii	JII (439.	00 Bi-We	ekiy)	
B.	Full Name of Individual (Last, First, Middle Ini GUSTIN, TODD, , ,	itial) or Full O	Organization Name		Date of	Re	ceipt			
	Mailing Address 5717 AYRSHIRE BLVD			M M	/	D D	/ Y	YY	Y	
					03		31		2021	
	City EDINA	State MN	Zip Code	_					5776122	3
		IVIIN	55436-2059		Amount	tot	Each R	eceipt th	is Period	_
	FEC ID number of contributing federal political committee.	С			Ŀ		y		153.8	84
	Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt		M	emo	Item			
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General			11	P/R Ded	uctic	on (\$76.	92 Bi-We	ekly)	
	Other (specify) v		, 461.52	1						
C.	Full Name of Individual (Last, First, Middle Ini NIELSEN, MICHELE, , ,	itial) or Full O	Organization Name		Date of	Re	ceipt			
	Mailing Address 6 AMHERST COURT				M M	/	D D	/ Y	YY	Y
		Chata	Zin Oodo		03		31		2021	
	City NORTH BRUNSWICK	State NJ	Zip Code 08902-4559						36176122 is Period	3
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	federal political committee.	С			<u> </u>		y	. y	76.9	92
	Name of Employer (for Individual)	Occi	upation (for Individual)		М	emo	Item			
	United HealthCare Services Inc	VP	Ntwk Contrctng							
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	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Ini COOK, JORDANA, , ,		Organization Name		Date of	Rec	eipt				
	Mailing Address 46 PALMETTO COVE COUR			03 / D D / Y Y Y Y 2021							
	City BLUFFTON	State SC	Zip Code 29910-9580	_				PR2575: eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>	-,	p. I		2	30.76	5
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	I	P/R Ded	uctior	n (\$115	.38 Bi-V	/eekly))	
в.	Full Name of Individual (Last, First, Middle Ini CUNNINGHAM, BRIAN, , ,	tial) or Full O	organization Name		Date of	Rec	eipt				
	Mailing Address 1711 ROLLING HILLS RD			03	/	D D 31	/ Y	2021	Y Y		
	City CHARLESTON	State WV	Zip Code 25314-2215	-				PR25753			
	FEC ID number of contributing federal political committee.	C		Amount	t of E	ach Re	eceipt th		100 76.92	2	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgmt		M	emo	Item	, j			
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.76	- F	P/R Ded	uctior	n (\$38.4	16 Bi-W€	ekly)		
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini BRATTEBO, CRAIG, , ,	tial) or Full O	Organization Name		Date of	Rec	eipt				
	Mailing Address 10202 HARMONY CIRCLE				03	/	31	/ Y	y 2021		1
	City EDEN PRAIRIE	State MN	Zip Code 55347-5019					PR2575 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>	,		9	3	84.60)
	Name of Employer (for Individual) Optum Services, Inc	ices, Inc Deputy Gen Counsel		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80		P/R Ded	uctio	n (\$192	2.30 Bi-V	/eekly))	
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\rangle	UnitedHealth Group Incorporated	PAC (l	Jnit	tedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initial FELLER, WILLIAM, , ,) or Full O	rgan	ization Name		Date of	Re	ceipt			
	Mailing Address 3715 HUNTINGTON AVE					м м 03	/	D D D 31	/ Y	y y 2021	Ŷ
	City ST LOUIS PARK	State MN		Zip Code 55416-4917						40036122 his Perioc	
	FEC ID number of contributing federal political committee.	С						7		76	.92
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) nology		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Year	r-to-Date ▼ 230.76		P/R Dedu	uctio	on (\$38.4	46 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initial UNDERWOOD, JEFFREY, , ,) or Full O	rgan	ization Name		Date of	Re	ceipt			
	Mailing Address 14625 SW SUNRISE LN						/	31	/ Y	2021	Y
	City TIGARD	State OR		Zip Code 97224-1209		Transaction ID : PR2575403361223 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С						7		153	_
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 461.52		P/R Dedu	uctic	on (\$76.9	92 Bi-We	eekly)	
C.	Full Name of Individual (Last, First, Middle Initial ANDERSON, BRADLEY, , ,) or Full O	rgan	ization Name		Date of	Re	ceipt			
	Mailing Address 4613 W 56TH ST					^M 03	/	D D D 31	/ Y	2021	Y
	City EDINA	State MN		Zip Code 55424-1558						4052612	
	FEC ID number of contributing federal political committee.	С						9		76	.92
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP S	•	on (for Individual) egy		Me	emo	Item			
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	-												
Full Name of Individual (Last, First, Middl A. VENKATESAN, CHANDRAMOULE		organization Name	[Date of	Re	ece	ipt						
Mailing Address 17698 62ND COURT NC	RTH			03 / D D / Y Y Y Y 2021									
City MAPLE GROVE	State MN	Zip Code 55311-4619	A						41016122 nis Period	3			
FEC ID number of contributing federal political committee.	C			384.60									
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Mailing Address 11671 45TH PLACE NE	03 / 31 / 2021 Transaction ID : BP2575418161222												
City SAINT MICHAEL	State MN	Zip Code 55376-4536	A	Transaction ID : PR2575418161223 Amount of Each Receipt this Period									
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Mailing Address 16492 BROOKLANE BO				^M 03	/	E	D D 31	/ Y	2021	Y			
City NORTHVILLE	State MI	Zip Code 48168-8417	A						41916122 nis Period	3			
FEC ID number of contributing federal political committee.	C					,		9	76.3	36			
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir I	upation (for Individual) Fin		M	emc	o It	em						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 229.08	P	R Ded	ucti	ion	(\$38.	18 Bi-W	eekly)				
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NAME OF COMMIT		//										
	Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individ	ual (Last, First, Middle I /IN, , ,	nitial) or Full O	rganization Name	D	Date of Receipt							
Mailing Address 705	NOTTINGHAM COURT	-			03 31 Y Y Y Y Y 2021							
City		State	Zip Code		Trans	acti	on ID :	PR2575	42196122	3		
CRANBERRY TOW	NSHIP	PA	16066-6527	A	mount	of	Each F	Receipt th	nis Period			
FEC ID number of c federal political com	U U	С		76.92								
Name of Employer (United HealthCare So	,	upation (for Individual) Bus Dvlp	[Memo Item								
Receipt For:		Aggregate	Year-to-Date ▼	_								
Primary	General	, iggi oguto		P/R Deduction (\$38.46 Bi-Weekly)								
Other (specify)	•		230.76									
Full Name of Individ B. OHARA, KARIN	ual (Last, First, Middle I I, , ,	nitial) or Full O	rganization Name	D	Date of	Re	ceipt					
Mailing Address 143			03 31 2021									
City		State	Zip Code		Trans	actio	on ID :	PR25754	42876122	3		
CHANHASSEN		MN	55317-2200	A	mount	of	Each F	Receipt th	nis Period			
FEC ID number of c federal political com	0	С		192.30								
Name of Employer (United HealthCare Se			upation (for Individual) Acctng		Me	emo	ltem					
Receipt For:		Aggregate	Year-to-Date V									
Primary Other (specify)	General ▼		576.90	P/F	R Dedu	uctio	on (\$96.	.15 Bi-We	ekly)			
Full Name of Individ	ual (Last, First, Middle I REM, , ,	nitial) or Full O	rganization Name		Date of	Re	ceipt					
Mailing Address 630	ELIZABETH ROAD				^M 03	1	31		y y 2021	Y		
City		State	Zip Code		Trans	acti	on ID :	PR2575	44136122	:3		
SAN ANTONIO		ТХ	78209-6135	A	mount	of	Each F	Receipt th	nis Period			
FEC ID number of c federal political com	U U	С					9	. ,	269.:	22		
Name of Employer (for Individual)	Occi	upation (for Individual)	- 1	Me	emo	Item					
Optum Services, Inc			Care Initiv									
Receipt For:		Aggregate	Year-to-Date V									
Primary Other (specify)	General		807.66	P/	R Ded	uctio	on (\$13	4.61 Bi-V	Veekly)			
SUBTOTAL of Receipt	s This Page (optional)	1					y	· · ·	538.4	44		
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SCHEDULE A (FEC Form 3X) DEOEIDTO

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17 version for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Inco	prporated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, MURLEY, MARY, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2775 COUNTRYSI	DE DRIVE WEST		03 31 / Y Y Y Y 2021
City ORONO	State MN	Zip Code 55356-9675	Transaction ID : PR2575443661223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, SPILKER, TIMOTHY, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 32 FITCH LANE			03 / D D / Y Y Y Y Y 2021
City NEW CANAAN	State	Zip Code 06840-5051	Transaction ID : PR2575446361223
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, C. BOOKER, ROBERT, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 16632 HANSON B	LVD NW		03 / Y Y Y Y 2021
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447261223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Info Security Officer	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$0.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (o	ptional)		1153.80
TOTAL This Period (last page this lin	e number only)		

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

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			Detailed Summary Page	X 11a 11b 11c 12								
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or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.								
\backslash	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	(C)								
Α.	Full Name of Individual (Last, First, Middle Initia FLOCCO, LOUIS, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 521 SAN BERNARDINO AVEN	IUE		03 31 Y Y Y Y Y 2021								
	City	State	Zip Code	Transaction ID : PR2575448661223								
	NEWPORT BEACH	CA	92663-4812	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		200.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼	600.00	P/R Deduction (\$100.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia RUNICE, PAUL, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 4622 BRUCE AVENUE	03 / D D / Y Y Y Y 03 31 2021										
	City	State	Zip Code	Transaction ID : PR2575451561223								
	EDINA	MN	55424-1123	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		369.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1107.00	P/R Deduction (\$184.50 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia MCGLINCH, THOMAS, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 910 MIDWEST TRAIL NORTH			03 31 / Y Y Y Y 03 2021								
	City	State	Zip Code	Transaction ID : PR2575451661223								
	LAKE ELMO	MN	55042-9658	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item								
	United HealthCare Services Inc		reasury	_								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify)		1153.80	P/R Deduction (\$67.31 Bi-Weekly)								
	JBTOTAL of Receipts This Page (optional)			953.60								

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		Use separate schedule(s)	(check only	one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12	□ <i>.</i> -		
Any information copied from such Reports and or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)									
VinitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I MURPHY, ERIC, , ,	nitial) or Full C	rganization Name	Date of	Receipt					
Mailing Address 53 37TH AVENUE SOUTH			03 / D D / Y Y Y Y 2021						
City JACKSONVILLE BEACH	State FL	Zip Code 32250-5940		of Each Rec			\$		
FEC ID number of contributing federal political committee.	С				-y	384.6	0		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Me	emo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Dedu	uction (\$192.3	30 Bi-W	'eekly)			
Full Name of Individual (Last, First, Middle I B. STUCKMAYER, SHARON, , ,	nitial) or Full C	organization Name	Date of	Receipt					
Mailing Address 24005 RIVERS EDGE ROA						y y 2021	Y		
City ROGERS	State MN	Zip Code 55374-4781		of Each Rec			1		
FEC ID number of contributing federal political committee.	С				-	76.9	12		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Me	emo Item					
Receipt For:	Aggregate	Year-to-Date ▼	_						
Primary General Other (specify) ▼		230.76	P/R Dedu	iction (\$38.46	6 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle I SADUSKE, NANETTE, , ,	nitial) or Full C	organization Name	Date of	Receipt					
Mailing Address 4276 NICOLET DRIVE	State	Zip Code	03	/ D D D 31		2021			
GREEN BAY	WI	54311-9798		of Each Rec			<u>)</u>		
FEC ID number of contributing federal political committee.	С			,	y	76.9	12		
Name of Employer (for Individual) United HealthCare Services Inc	United HealthCare Services Inc VP Compli			Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Ded	uction (\$38.46	6 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional)		••••••		 	y	538.4	.4		
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SCHEDULE A (FEC Form 3X) •

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
I LIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12						
Any information copied from such Reports ar	nd Statements ma		erson for the purpose of soliciting contributions						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. DITTBERNER, LINDSAY, , ,	e Initial) or Full O	organization Name	Date of Receipt						
Mailing Address 962 WOODVIEW CIRCLE			03 31 Y Y Y Y Y 2021						
City CARVER	State MN	Zip Code 55315-4519	Transaction ID : PR2575496961223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		153.84						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. VESLEDAHL, MATTHEW, , ,	e Initial) or Full O	organization Name	Date of Receipt						
Mailing Address 15598 MICHELE LANE									
City EDEN PRAIRIE	State MN	Zip Code 55346-2548	Transaction ID : PR2575499261223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ntwk	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SUNDAL, DEBORAH, , ,	e Initial) or Full O	organization Name	Date of Receipt						
Mailing Address 5109 WEST 66TH ST			03 / D D / Y Y Y Y 03 31 2021						
City EDINA	State MN	Zip Code 55439-1429	Transaction ID : PR2575502961223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
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	y information copied from such Reports and Sta			erson for		urpo									
or	for commercial purposes, other than using the r	name and a	address of any political committee	to solic	it coni	ribu	itions tr	om suci		tee.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initia HOWELL, NICHOLAS, , ,	al) or Full O	Organization Name	Date of Receipt											
	Mailing Address 300 ORANGE GROVE AVENU	E		M	03 / D D / Y Y Y Y 03 2021										
	City SOUTH PASADENA	State CA	Zip Code 91030-1616						51006122 iis Perioc						
	FEC ID number of contributing federal political committee.	С					p. 1.		384	.60					
	Name of Employer (for Individual) Optum Services, Inc		eupation (for Individual) P Bus Dev		Me	mo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R	Dedu	ctio	n (\$192	30 Bi-W	/eekly)						
в.	Full Name of Individual (Last, First, Middle Initia MUNSON, RICHARD, , ,	al) or Full O	Organization Name	Da	te of	Rec	eipt								
	Mailing Address 4707 HAZELTINE LANE			M	03	/	D D 31	/ Y	y y 2021	Y					
	City EAGAN	State MN	Zip Code 55123-2172						51246122	-					
	FEC ID number of contributing federal political committee.	С		IOUIII			eceipt tr	iis Perioc 192							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)											
С.	Full Name of Individual (Last, First, Middle Initia KELLY, MARGARET, , ,	al) or Full O	Organization Name	Da	te of	Rec	eipt								
	Mailing Address 23420 COVELLO STREET			- L	03 ^M	/	D D 31	L	2021						
	City WEST HILLS	State CA	Zip Code 91304-5333						51806122 iis Perioc	-					
	FEC ID number of contributing federal political committee.	С		ļĻ	_	,	, ,	9	92	.30					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt		Me	mo	ltem								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.90	P/R	Dedu	ctio	n (\$46.′	15 Bi-We	eekly)						
s	UBTOTAL of Receipts This Page (optional)		•••••			,		,	669.	20					
т	OTAL This Period (last page this line number of	nly)													

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11	EMIZED RECEIPTS			h category of the d Summary Page		× 11a		11b	11c	12				
	ny information copied from such Reports and Sta for commercial purposes, other than using the n													
or	NAME OF COMMITTEE (In Full)	lame and a	daress of	any political committee	tos	Olicit con	ומרוטנ	utions in	om suci		<u>.</u>			
	UnitedHealth Group Incorporated	I PAC (l	JnitedF	lealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia KAPLAN, ERIC, , ,	l) or Full O	rganizatio	n Name		Date of Receipt								
	Mailing Address 193 PARTRIDGE LANDING					03 / 31 / 2021								
	City GLASTONBURY	State CT	_					52406122 iis Period	3					
	FEC ID number of contributing federal political committee.	С						y		384.	30			
	Name of Employer (for Individual) Optum Services, Inc		upation (fo P CInt Rela	r Individual) tionship		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	ate ▼ 1153.80		P/R Dedu	uctio	ın (\$192	.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia COHEN, SANFORD, , ,	l) or Full O	rganizatio	n Name		Date of	Red	ceipt						
	Mailing Address 28 CRESCENT LANE				03	/	D D D 31	/ Y	2021	Y				
	City LEVITTOWN	State NY	Zip C 117						52616122 is Period	3				
	FEC ID number of contributing federal political committee.	С				<u></u>	-	384.	30					
	Name of Employer (for Individual) United HealthCare Services Inc	Occi		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	ate ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia HUNTER, ROBERT, , ,	l) or Full O	rganizatio	n Name		Date of	Red	ceipt						
	Mailing Address 5420 COUNTRYSIDE ROAD					03	/	^D 31	L	2021				
	City EDINA	State MN	Zip C 5543	ode 36-2524						52836122 is Period	3			
	FEC ID number of contributing federal political committee.	С				<u> </u>		y	,	384.	30			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	•	r Individual)		Me	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Da		P/R Ded	uctic	on (\$192	30 Bi-V	/eekly)					
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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions								
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	JnitedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Initia HERNANDEZ, MAYRENE, , ,	l) or Full C	rganization Name	Date of Receipt								
	Mailing Address 850 SW 189TH AVENUE			03 / D / Y Y Y Y 2021								
	City PEMBROKE PINES	State FL	Zip Code 33029-6047	Transaction ID : PR2575529261223								
		112	33029-0047	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /led Dir	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia HOLOVNIA, KRISTEN, , ,	l) or Full C	rganization Name	Date of Receipt								
	Mailing Address 4610 LAKEVIEW DRIVE			03 / D D / Y Y Y Y 2021								
	City	State	Zip Code	Transaction ID : PR2575533061223								
	EDINA	MN	55424-1518	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia HILL, JANE, , ,	l) or Full C	rganization Name	Date of Receipt								
	Mailing Address 34301 299TH PLACE			03 31 2021								
	City	State	Zip Code	Transaction ID : PR2575533161223								
	AITKIN	MN	56431-5914	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	538.44								
т	OTAL This Period (last page this line number or	ıly)	••••••									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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				or each category of the Detailed Summary Page	×	_	11a 13		11	1b 1		11c 15		12	1 47
	y information copied from such Reports and Statem for commercial purposes, other than using the name					for	the p		005	se o		oliciting	cont		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (L	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) of MULLANEY, SUSAN, , ,	r Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 169 HUNNEWELL STREET	toto		Zin Codo		03 / D D / Y Y Y Y Y 2021									
	5	tate /IA		Zip Code 02494-1421	-	Transaction ID : PR2575535161223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.						iount	or	⊏a	acri I	neo	eipt th	15 26	76.9	2
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt			Me	emo) It	em					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 230.76	 P	?/R	Dedu	uctic	on	(\$38	3.46	6 Bi-We	ekly))	
B.	Full Name of Individual (Last, First, Middle Initial) of HAMLIN, THOMAS, , ,	r Full O	rgar	nization Name		Da	ate of	Re	ce	ipt					
	Mailing Address 2800 NEWMAN					Mom / D D / Y									
	,	tate FX		Zip Code 77098-1408											
	FEC ID number of contributing federal political committee.	;										76.9	2		
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) rrl Med Dir		L	Me	emo) It	em					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initial) of SUN, TONY, , ,	r Full O	rgar	nization Name		Da	ate of	Re	ce	ipt					
	Mailing Address 8408 ENSLEY PLACE					L	03	/	L	31			202	- 1 C	
	,	tate ≺S		Zip Code 66206-1402	-				-			R2575			5
	FEC ID number of contributing federal political committee.	;					iount					, ,	13 F C	76.9	2
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Dir/CMO			Me	∋mo	b lt	em					
	Receipt For: Agg Primary General Other (specify)	gregate	egate Year-to-Date ▼ 230.76					P/R Deduction (\$38.46 Bi-Weekly)							
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т	OTAL This Period (last page this line number only).			••••••					-			-		_	

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	-								
UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middl A. ROSENZWEIG, MARTIN, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 116 DAVID RD			03 31 Y Y Y Y Y 2021						
City BALA CYNWYD	State PA	Zip Code 19004-2315	Transaction ID : PR2575540661223						
		10007 2010	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		153.84						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) wrl CMO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. STEINBRECHER, HOLLY, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2101 LILAC LANE			03 / D D / Y Y Y Y Y 2021						
City	State TX	Zip Code	Transaction ID : PR2575544561223						
FRISCO		75034-3652	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. STUEVE, EDWARD, , ,	e Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 16700 56TH PLACE N			03 / D D / Y Y Y Y 2021						
City PLYMOUTH	State MN	Zip Code 55446-3011	Transaction ID : PR2575556261223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		638.44						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page		×	11a 13		-	11b 14		11c 15	12	17		
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		rp	ose c		oliciting	g contrib	outions		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Un	itedHealth Group PA	NC)										
Α.	Full Name of Individual (Last, First, Middle Initial) MILLER, MAXIMILLIAN, , ,	or Full C	Orga	nization Name		Date of Receipt									
	Mailing Address 6939 HARRIET AVENUE S														
	City RICHFIELD	State MN		Zip Code 55423-2344								5795612			
		C		33423-2344		Amount of Each Receipt this Perio							od 6.92		
	Name of Employer (for Individual)		•	tion (for Individual)	1	1	Mem	10	Item			_			
	United HealthCare Services Inc Receipt For: A Primary General Other (specify) ▼ I		M A Yea	ar-to-Date ▼ 230.76		R De	duct	tio	n (\$3	8.4	6 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial) WINSOR, ELIZABETH, , ,	or Full C	Orga	nization Name		Date	of R	lec	ceipt						
	Mailing Address 57 WILDERS PASS			_		Mom / D / Y									
	City CANTON	State CT		Zip Code 06019-2259											
	FEC ID number of contributing federal political committee.	С						-	,		-	384	4.60		
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Reg		Memo Item											
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) HARRIS, EUGENE, , ,	or Full C	Orga	nization Name		Date of Receipt									
	Mailing Address 2832 HARBORSIDE WAY					[™] 03		/	D 3		/ Y	2021 Y	Y		
	City SOUTHPORT	State NC		Zip Code 28461-8373								5854612			
		С				anou				ne	,	iis Peric 19:	a 2.30		
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) VP of Brkr SIs			Mem	10	ltem						
	Receipt For: A Primary General Other (specify)	vggregate	gregate Year-to-Date ▼ 576.90					P/R Deduction (\$96.15 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			••••••	. [, .		9	65;	3.82		
т	OTAL This Period (last page this line 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	✗ 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group PA	.C)								
Α.	Full Name of Individual (Last, First, Middle Initial MORABITO, RICHARD, , ,) or Full C	organization Name	Date of Receipt								
	Mailing Address 335 TUCKER HILL ROAD			03 / D D / Y Y Y Y 2021								
	City MIDDLEBURY	State CT	Zip Code 06762-2430	Transaction ID : PR2575586161223								
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 76.92								
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initial) or Full C	organization Name	Date of Receipt								
	Mailing Address 208 STATION CIR NO			03 / D D / Y Y Y Y 03 31 2021								
	City HUDSON	State WI	Zip Code 54016-9555	Transaction ID : PR2575586661223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ision CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initial SOLLER, BRIAN, , ,) or Full C	organization Name	Date of Receipt								
	Mailing Address 1120 S 2ND STREET UNIT 614	1 -		03 / D D / Y Y Y Y 2021								
	City MINNEAPOLIS	State MN	Zip Code 55415-1375	Transaction ID : PR2575586761223								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg CIO	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		••••••	538.44								
т	OTAL This Period (last page this line number on	ly)	••••••									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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	IEMIZED RECEIPIS		for each category of the Detailed Summary Page	¥ 11a │ 11b │ 11c │ 12									
			Solariou Summary Fugo	13 14 15 16									
	formation copied from such Reports and Stat commercial purposes, other than using the n			rson for the purpose of soliciting contributions to solicit contributions from such committee.									
	ME OF COMMITTEE (In Full)												
	nitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)									
	l Name of Individual (Last, First, Middle Initia ISCH, SHAWNA, , ,	l) or Full O	Organization Name	Date of Receipt									
	iling Address 320 PRESERVE COURT			03 / D D / Y Y Y Y 03 31 2021									
City		State	Zip Code	Transaction ID : PR2575592161223									
CF	IANHASSEN	MN	55317-8717	Amount of Each Receipt this Period									
	C ID number of contributing eral political committee.	С		384.60									
	ne of Employer (for Individual) ted HealthCare Services Inc		upation (for Individual) P Clin Ops	Memo Item									
	point For:		Year-to-Date ▼	-									
	Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
	I Name of Individual (Last, First, Middle Initia ILLER, MICHAEL, , ,	l) or Full O	Organization Name	Date of Receipt									
Mai	iling Address 1 CANAL STREET 802			03 31 Y Y Y Y 2021									
City	1	State	Zip Code	Transaction ID : PR2575595661223									
BC	STON	MA	02114-2019	Amount of Each Receipt this Period									
	C ID number of contributing eral political committee.	С		384.60									
	me of Employer (for Individual) um Services, Inc		upation (for Individual) Business Development Exe	Memo Item									
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
	Name of Individual (Last, First, Middle Initia VERSON, LISA, , ,	l) or Full O	Organization Name	Date of Receipt									
Ma	ling Address 13341 CARRACH AVENUE			03 31 Y Y Y Y 2021									
City		State	Zip Code	Transaction ID : PR2575603261223									
RC	DSEMOUNT	MN	55068-4774	Amount of Each Receipt this Period									
	C ID number of contributing eral political committee.	С		384.60									
	ne of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) Strat Initiv	Memo Item									
Red	Ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
	TOTAL of Receipts This Page (optional)		r	1153.80									

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	11b	11c	12	47					
Any information copied from such Reports and or for commercial purposes, other than using												
NAME OF COMMITTEE (In Full)	and name and a	aarooo or arry pointoar committee			on such	Commute						
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle GOODMAN, BENJAMIN, , ,	Initial) or Full C	rganization Name	Date of	Receipt								
Mailing Address 13828 EVERGREEN COU	RT		м м 03	03 31 2021								
City APPLE VALLEY	State MN	Zip Code 55124-9257		action ID : F			3					
FEC ID number of contributing federal political committee.	С			-		384.6	50					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CFO		emo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Ded	uction (\$192	.30 Bi-W	'eekly)						
Full Name of Individual (Last, First, Middle B. COSTA, JOEL, , ,	Initial) or Full C	rganization Name	Date of	Receipt								
Mailing Address 775 WESTCHESTER AVE			M M 03	/ D D 31	/ Y	y y 2021	Y					
City SHAKOPEE	State MN	Zip Code 55379-4557		action ID : F			}					
		55379-4557	Amount	of Each Re	eceipt th	is Period						
FEC ID number of contributing federal political committee.	C			230.76								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item									
Receipt For:	Aggregate	Year-to-Date 🔻										
Other (specify) ▼		692.28	P/R Ded	uction (\$115.	.38 Bi-W	eekly)						
Full Name of Individual (Last, First, Middle WIGHT, MARIA, , ,	Initial) or Full C	rganization Name	Date of	Receipt								
Mailing Address 5 ROANOKE ROAD			03 M	/ D D 31		2021						
City SUNFISH LAKE	State MN	Zip Code 55118-4706		action ID : I			3					
FEC ID number of contributing federal political committee.	С			. , .	. y	76.9	2					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Ded	uction (\$38.4	16 Bi-We	ekly)						
SUBTOTAL of Receipts This Page (optional)						692.2	8					
TOTAL This Period (last page this line numb	er only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 82 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle	Initial) or Full C	organization Name							
A. KING, SARAH, , , Mailing Address 23 GARDEN CITY ROAD			Date of Receipt						
Maining Address 23 GARDEN CITY ROAD			03 31 2021						
City	State	Zip Code	Transaction ID : PR2575612861223						
DARIEN	СТ	06820-5343	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
Optum Services, Inc Receipt For:		P SIs							
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify)		1153.80	·····,						
Full Manage of the Science of the Sc		New Stand Street Street	-						
Full Name of Individual (Last, First, Middle WAULTERS, SCOTT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4 HEMLOCK COURT			03 / D D / Y Y Y Y 2021						
City MANALAPAN	State NJ	Zip Code 07726-4254	Transaction ID : PR2575622161223 Amount of Each Receipt this Period						
FEC ID number of contributing	_								
federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		, 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. THOMPSON, BRIAN, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 17829 63RD AVE N			03 31 2021						
City	State	Zip Code	Transaction ID : PR2575634661223						
MAPLE GROVE	MN	55311-4650	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UHC CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1153.80						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11								
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 1 erson for the purpose of soliciting contributions to solicit contributions from such committee								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle WILSON, STEPHEN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2420 DURHAM MANOR D	RIVE		03 / D D / Y Y Y Y 2021								
City FRANKLIN	State TN	Zip Code 37064-5266	Transaction ID : PR2575636161223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1152.00	P/R Deduction (\$192.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. CLARK, TERRENCE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8 COOPER AVENUE			03 / D D / Y Y Y Y 2021								
City EDINA	State MN	Zip Code 55436-1315	Transaction ID : PR2575636961223								
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item								
Receipt For:		ef Marketing Officer	_								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. CABANILLAS, MARIA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2411 WORDSWORTH ST			03 / D D / Y Y Y Y Y 2021								
City HOUSTON	State TX	Zip Code 77030-1833	Transaction ID : PR2575637361223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			1153.20								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check or	(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 the NAME OF COMMITTEE (In Full)					butions i	rom sucr	Commu	ee.				
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I HERMAN, CRAIG, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9609 WYOMING CIRCLE			M 03	03 / D D / Y Y Y Y 03 31 2021								
City BLOOMINGTON	State MN	Zip Code 55438-1628					5026122 is Period	3				
FEC ID number of contributing federal political committee.	С			_	-	-	384.6	60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svc		Nemo	tem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I B. KANE, HEATHER, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt							
Mailing Address 7624 N MOUNTAIN VIEW P	ASS			03 / 0 0 / 2021 Transaction ID : PR2575657461223								
City PARADISE VALLEY	State AZ	Zip Code 85253-2844					5746122 is Period	3				
FEC ID number of contributing federal political committee.	С			384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. PIZZANO, KATHRYN, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt							
Mailing Address 387 DEPOT HILL ROAD			03		31		2021					
City POUGHQUAG	State NY	Zip Code 12570-5763					56216122 is Period	3				
FEC ID number of contributing federal political committee.	С			_	, .		28.8	34				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations		vlemo	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.52	P/R De	ducti	on (\$14.	.42 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional)					,	,	798.0)4				
TOTAL This Period (last page this line numbe	r only)	••••••			-	-						

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171			Use separate schedule(s)	(che	eck only	on	e)			
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	
	y information copied from such Reports and Sta									
or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	address of any political committee	to so	licit con	tridi	utions t	rom sucr	i committ	ee.
\rangle	UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia ALLEN, CARL, , ,	l) or Full Oi	Organization Name		Date of	Re	ceipt			
	Mailing Address 8675 AZURE SKY DRIVE				м м 03	/	D D D 31	/ Y	y y 2021	Y
	City LAS VEGAS	State NV	Zip Code 89129-2227						6936122 is Period	3
FEC ID number of contributing federal political committee.							y 1		78.0	00
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO		Ме	mo	Item			
Receipt For: Aggreen and and a second and a secon			Year-to-Date ▼ 234.00	P	/R Dedu	ictic	on (\$39.	00 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initia LEON, LINDA, , ,	l) or Full Oi	Organization Name		Date of	Re	ceipt			
	Mailing Address 19 ENSIGN LANE	- 1			03	/	31	/ Y	2021	Y
	City MASSAPEQUA	State NY	Zip Code 11758-7839						7186122 is Period	3
	FEC ID number of contributing federal political committee.	С			Amount	U			384.6	60
	Name of Employer (for Individual) United HealthCare Services Inc	Occu GP		Me	mo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	P	/R Dedu	ctio	ın (\$192	2.30 Bi-W	'eekly)	
C.	Full Name of Individual (Last, First, Middle Initia BOGATYRENKO, VICTORIA, , ,	l) or Full Oi	Organization Name		Date of	Re	ceipt			
	Mailing Address 98 FIVE MILE RIVER ROAD	Otata	2.0.1		03	/	31		2021	
	City DARIEN	State CT	Zip Code 06820-6234						57546122 is Period	3
	FEC ID number of contributing federal political committee.	С					,		115. ⁻	18
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 345.54	P	/R Dedu	uctio	on (\$57.	59 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)		•				, .	,	577.7	78
т	OTAL This Period (last page this line number on	ıly)	•				, .	-		

Use separate schedule(s)

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	Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)		, p	······································				
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middle MITCHELL, JILL, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 11499 ASHLEY COURT			M M / D / Y				
City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251	Transaction ID : PR2575678361223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) United HealthCare Services Inc							
Receipt For: Primary General Other (specify) \mathbf{v}	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle SIMONSON, KELLY, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 10982 SANCTUARY COVE	COURT		03 / D D / Y Y Y Y 03 31 2021				
City LAS VEGAS	State NV	Zip Code 89135-9126	Transaction ID : PR2575682361223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		92.30				
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	-				
Other (specify) ▼		276.90	P/R Deduction (\$46.15 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. STIDMAN, CHRISTOPHER, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 6504 CHEROKEE TRAIL			03 / D D / Y Y Y Y 2021				
City EDINA	State MN	Zip Code 55439-1109	Transaction ID : PR2575683861223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Mktg	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			553.82				
TOTAL This Period (last page this line number	er only)						

SCHEDULE A (FEC Form 3X) DEOFIDTO

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171			Use separate schedule(s)	(ch	neck only	/ or	ne)	L		
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{\ }$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporated	PAC (L	UnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia OCHIPINTI, JOSEPH, , ,	l) or Full Or	Organization Name		Date of	Re	ceipt			
	Mailing Address 20 DEAN STREET				м м 03	/	31) / Y	y y 2021	Y
	City ANNAPOLIS	State MD	Zip Code 21401-2716	_					38576122 is Period	3
FEC ID number of contributing federal political committee.						U			384.	60
			upation (for Individual) n Plan CEO		Me	emo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80]	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)	
B.	Full Name of Individual (Last, First, Middle Initia KALBACHER, JEAN, , ,	l) or Full Or	Organization Name		Date of	Re	ceipt			
Mailing Address 4952 EAST DARTMOUTH STREET					03	1	D D D 31		y y 2021	Y
	City MESA	State AZ	Zip Code 85205-6458						8836122 is Period	3
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Hith Plan CEO			176.92					
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 530.76] F	P/R Dedu	uctic	on (\$88.	46 Bi-We	ekly)	
C.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	Organization Name		Date of	Re	ceipt			
	Mailing Address 707 STONINGTON ROAD				03	/	31		ү ү 2021	
	City SILVER SPRING	State MD	Zip Code 20902-1549				-		59286122 is Period	3
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		384.	60
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) SVP Corp Strat			Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80] '	P/R Ded	uctio	on (\$19:	2.30 Bi-W	/eekly)	
s	UBTOTAL of Receipts This Page (optional)			•			, .	.,	946.	12
т	OTAL This Period (last page this line number or	ıly)		•				- .		

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ILEIVIIZED KEGEIP13		for each category of the Detailed Summary Page	X 11a 11b	11c	12			
Any information copied from such Reports and								
or for commercial purposes, other than using t	ne name and a	ddress of any political committee	to solicit contributions	from sucr	Committe	e.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	C)					
Full Name of Individual (Last, First, Middle FARRELL, STEPHEN, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 8 LINDSAY LANE			03 3 [,]		y y 2021	Y		
City ORLEANS	State MA	Zip Code 02653-4720	Transaction ID Amount of Each			3		
FEC ID number of contributing federal political committee.	С			-	76.9	2		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$3	3.46 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle B. PROKOCKI, ELIZABETH, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 9091 KORNBRUST DR			03 3 ⁴		2021	Ŷ		
City LONE TREE	State CO	Zip Code 80124-5333	Transaction ID Amount of Each			6		
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$15	92.30 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle] THIERY, LINDA , , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 999 LABEAUX AVE NE			03 / D 3	1	2021			
City HANOVER	State MN	Zip Code 55341-9292	Transaction ID Amount of Each			3		
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$3	8.46 Bi-We	eekly)			
SUBTOTAL of Receipts This Page (optional).					538.4	4		
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

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	Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	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							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat							
Full Name of Individual (Last, First, Middle In MILSON, D ELLEN, , ,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 400 STUART STREET 25D			03 31 / Y Y Y Y Y 2021				
City BOSTON	State MA	Zip Code 02116-5011	Transaction ID : PR2575708861223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHlth Grp	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle In VOLLRATH, MICHELLE, , ,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 7647 MARKER ROAD			03 31 2021				
City SAN DIEGO	State CA	Zip Code 92130-5616	Transaction ID : PR2575719861223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	s l						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Dir Client Mngt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)				
Full Name of Individual (Last, First, Middle In C. CAIN, STEVE, , ,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 4 COUNTRYSIDE CT	01-1-	7.0.4	03 / D D / Y Y Y Y Y 2021				
City DANVILLE	State CA	Zip Code 94506-1126	Transaction ID : PR2575724361223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		230.76				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			730.74				
TOTAL This Period (last page this line number	r only)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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	EWIZED RECEIPTS		Detailed Summary Page	×	11a		111	b	11c	12							
			, ,		13		14		15	16	17						
	y information copied from such Reports and State for commercial purposes, other than using the na																
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)													
Α.	Full Name of Individual (Last, First, Middle Initial) GROSKLAGS, JEFFREY, , ,	Name of Individual (Last, First, Middle Initial) or Full Organization Name OSKLAGS, JEFFREY, , ,									Date of Receipt						
	Mailing Address 3233 TIMBERWOLF CIRCLE				03 31 2021												
	City	State	Zip Code		Transaction ID : PR2575735761223												
	PRIOR LAKE	MN	55372-3272	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С		192.30													
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CFO		Memo Item												
	Pagaint For:		Year-to-Date ▼	\neg													
	Primary General Other (specify) ▼	576.90	P	P/R Deduction (\$96.15 Bi-Weekly)													
В.	Full Name of Individual (Last, First, Middle Initial) KRAL, JESSICA, , ,		Date of	Re	ceip	pt											
	Mailing Address 4358 COOLIDGE AVE						03 / D D / Y Y Y Y 03 31 2021										
	City	State	Zip Code				-			7361612	-						
	SAINT LOUIS PARK	MN	55424-1020	/	Amount	of	Ead	ch Re	ceipt th	nis Perio	d						
	FEC ID number of contributing federal political committee.	С					-		-	384	1.60						
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP IT					Memo Item										
	Receipt For: A Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.80					on (\$192.	30 Bi-W	/eekly)							
с.	Full Name of Individual (Last, First, Middle Initial) MURRAY, THOMAS, , ,) or Full C	Organization Name		Date of	Re	ceip	pt									
	Mailing Address 10 CIRCLE WEST				03	/	D	31	/ Y	y y 2021	Ŷ						
	City	State	Zip Code		Trans	acti	ion	ID : F	PR2575	7365612	23						
	EDINA	MN	55436-1313	/	Amount	of	Ead	ch Re	ceipt th	nis Perio	d						
	FEC ID number of contributing federal political committee.	С				_	9			384	1.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO		M	emo) Ite	em									
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)											
S	UBTOTAL of Receipts This Page (optional)		•••••				9			961	.50						
Т	OTAL This Period (last page this line number only	y)															

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

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12				
			13 14 15 16 17 erson for the purpose of soliciting contributions				
or for commercial purposes, other than using t	ne name and a	aaress of any political committee	e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Middle I LEWIS, ELIZABETH, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 675 PLEASANT VIEW ROA	VD		03 / D D / Y Y Y Y 2021				
City CHANHASSEN	State MN	Zip Code 55317-9509	Transaction ID : PR2575737461223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Actuary	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I CESARETTI, GINA, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 5020 CIRCLE DOWN			03 / D D / Y Y Y Y Y 2021				
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739061223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Strategy	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I PORTZ, THOMAS, , ,	,	rganization Name	Date of Receipt				
Mailing Address 2119 SHERIDAN HILLS RE		Zip Code	03 / 0 / Y Y Y Y 03 31 2021				
City WAYZATA	State MN	Zip Code 55391-2327	Transaction ID : PR2575744561223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		200.00				
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Fin	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			661.52				
TOTAL This Period (last page this line number	er only)						

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)				
II EIVILED RECEIFIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
			person for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (UnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middle PROBST, PETER , , ,	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 1927 SAUNDERS AVEN	-		03 / D D / Y Y Y Y 03 31 2021				
City SAINT PAUL	State MN	Zip Code 55116-2016	Transaction ID : PR2575744661223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		200.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Affordability	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. PINERSKI, JENNIFER, , ,	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 7501 HART LN			03 / D D / Y Y Y Y 2021				
City AUSTIN	State TX	Zip Code 78731-2237	Transaction ID : PR2575752861223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. LAMOINE, DAVID, , ,	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 11945 143RD STREET			03 / D D / Y Y Y Y 2021				
City LARGO	State FL	Zip Code 33774-2953	Transaction ID : PR2575755161223 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Director Data Analytics	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optiona	l)		353.84				
TOTAL This Period (last page this line num	ber only)						

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a 11b 11c 12					
			13 14 15 16 17 Derson for the purpose of soliciting contributions a to solicit contributions from such committee					
NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committe	e to solicit contributions from such committee.					
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle FULTON, RYAN, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 805 LANEWOOD LANE N	1		03 31 2021					
City PLYMOUTH	State MN	Zip Code 55447-4347	Transaction ID : PR2575756961223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. EKLO, BENJAMIN, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3942 CAMPELLO CURVE			03 31 2021					
City CHASKA	State MN	Zip Code 55318-4639	Transaction ID : PR2575761861223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. HOWARTH, CRAIG, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1820 NAPOLI DRIVE			03 / D D / Y Y Y Y 03 31 2021					
City APEX	State NC	Zip Code 27502-9659	Transaction ID : PR2575762461223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			846.12					
TOTAL This Period (last page this line numb	per only)							

SCHEDULE A (FEC Form 3X) DEOFIDTO

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17			Use separate schedule(s)	(cheo	ck only	or or	ne)	L		
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	
	y information copied from such Reports and Sta									
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	name and a	address of any political committee	to soli	cit con	itrid	utions t	rom sucr		ee.
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia CUNNINGHAM, MICHAEL, , ,	ll) or Full O	Organization Name	D	ate of	Re	ceipt			
	Mailing Address 122 MAHOGANY WAY				^M 03	/	31) / Y	2021	Y
	City UPPER GWYNEDD	State PA	Zip Code 19446-6084						76786122 iis Period	3
FEC ID number of contributing federal political committee.									384.	60
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) OO NA Acct	1	Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1153.80	P/ł	R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Initia PAIK, JESSICA, , ,	l) or Full O	Organization Name	D	ate of	Re	ceipt			
	Mailing Address 18 BUTTONWOOD LANE EAST				м м 03	/	31	/ Y	y y 2021	Y
	City RUMSON	State NJ	Zip Code 07760-1010						78316122	3
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) RVP Clnt Mgmt Svc			Amount of Each Receipt this Period 384.60					
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1153.80	P/F	R Dedu	ıctic	on (\$192	2.30 Bi-W	/eekly)	
с.	Full Name of Individual (Last, First, Middle Initia SUAREZ, MARIO, , ,	ll) or Full O	Organization Name	D	ate of	Re	ceipt			
	Mailing Address 21294 SMOKEHOUSE CT			44	03	/	31		y y 2021	
	City ASHBURN	State VA	Zip Code 20147-5316						78736122 iis Period	3
	FEC ID number of contributing federal political committee.	С					,	,	76.	92
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Gen Mgmt		Me	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 230.76	P/I	R Dedu	uctio	on (\$38	.46 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)		•				,	. ,	846.	12
т	OTAL This Period (last page this line number or	וy)	••••••				.			

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions the to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	4C)						
Full Name of Individual (Last, First, Middle BERGDOLL, JENNIFER, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 523 LOS DOLCES ST		03 31 2021							
City LAS VEGAS	State NV	Zip Code 89138-4559	Transaction ID : PR2575793761223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JELINEK, TROY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 16601 S MOUNTAIN STO	NE TRAIL		03 31 2021						
City	State	Zip Code	Transaction ID : PR2575795661223						
PHOENIX	AZ	85048-2080	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. WIX, LACOSTA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 910 MANILA ST			03 / D D / Y Y Y Y 2021						
City NASHVILLE	State TN	Zip Code 37206-3437	Transaction ID : PR2575800061223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		230.76						
TOTAL This Period (last page this line num	per only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	5	for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, ot	her than using the name and a		erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In UnitedHealth Grou	,	JnitedHealth Group PA	AC)						
Full Name of Individual (Las GALIAN, SANDRA, , ,	st, First, Middle Initial) or Full O	Date of Receipt							
Mailing Address 120 SEQU			03 / D D / Y Y Y Y 2021						
City WEST ISLIP	State	Zip Code 11795-4549	Transaction ID : PR2575803261223						
FEC ID number of contribut federal political committee.			Amount of Each Receipt this Period						
Name of Employer (for Indiv United HealthCare Services	,	upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary Gen Other (specify) ▼		Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Las LEVINE, CAROL, , ,	st, First, Middle Initial) or Full O	Date of Receipt							
Mailing Address 9100 LARK	SPUR LANE		03 / D D / Y Y Y Y 2021						
City EDEN PRAIRIE	State MN	Zip Code 55347-2004	Transaction ID : PR2575803361223 Amount of Each Receipt this Period						
FEC ID number of contribut federal political committee.	ing C		384.60						
Name of Employer (for Indi Optum Services, Inc	,	upation (for Individual) ? Cust Strategy	Memo Item						
Receipt For: Primary Gen Other (specify) ▼		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Las C. HJERPE, ADAM, , ,	st, First, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 13932 UTA			03 / D D / Y Y Y Y 2021						
City SAVAGE	State MN	Zip Code 55378-2159	Transaction ID : PR2575806261223						
FEC ID number of contribut federal political committee.			Amount of Each Receipt this Period						
Name of Employer (for Indiv United HealthCare Services		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary Gen Other (specify)		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This	Page (optional)		846.12						
TOTAL This Period (last page	this line number only)								

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middl A. RUSSELL, LAURIE, , ,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3108 SONIA DRIVE			03 / D D / Y Y Y Y Y 2021										
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2575812161223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		78.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middl B. LATINO, DAYNA, , ,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 126 RAINBOW TRAIL			03 / D D / Y Y Y Y 2021										
City	State	Zip Code	Transaction ID : PR2575813261223										
VERNON	СТ	06066-5950	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. SCHENEMAN, STEPHEN, , ,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 428 8TH ST			03 / D D / Y Y Y Y 2021										
City HUNTINGTON BEACH	State CA	Zip Code 92648-4629	Transaction ID : PR2575813461223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Affordability	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	al)		231.84										
TOTAL This Period (last page this line nun	nber only)												

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	ig the name and a												
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Mide SHAPIRO, DAVID, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5215 MORGAN AVENU			03 / D D / Y Y Y Y 03 / 31 / 2021										
City MINNEAPOLIS	State MN	Zip Code 55419-1026	Transaction ID : PR2575814261223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Cnsmr Off	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Mide B. TAYLOR, DUSTIN, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3712 NE 34TH UNIT 2C			03 / D / Y Y Y Y 2021										
City VANCOUVER	State WA	Zip Code 98665	Transaction ID : PR2575818161223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) k Regn Pres	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Mide C. NESTOR, MICHAEL, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 8 HUMBLE LANE			03 / D D / Y Y Y Y 2021										
City WESTON	State CT	Zip Code 06883-2509	Transaction ID : PR2575821761223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		77.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) g Dir Optuml Cons	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	al)		538.52										
TOTAL This Period (last page this line nu	mber only)												

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than us			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Mid MCNATT, RICHARD, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt 03 / D D / Y Y Y Y 03 / 31 / 2021 Transaction ID : PR2575824961223									
Mailing Address 1120 KENSINGTON C	1											
	State	Zip Code										
ALPHARETTA	GA	30022-6274	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Ops & Reg Field SIs	Memo Item									
Receipt For:		Year-to-Date ▼	-									
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Mid B. KAUFMAN, PHILIP, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1580 BOHNS POINT F	ROAD		03 / D D / Y Y Y Y Y 2021									
City	State	Zip Code	Transaction ID : PR2575829861223									
WAYZATA	MN	55391-9309	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Mic C. SCHMITT, MARIE, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3045 25TH AVENUE			03 31 2021									
City	State	Zip Code	Transaction ID : PR2575830061223									
SAN FRANCISCO	CA	94132-1541	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc		VP CInt Relationship	_									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optic	nal)	••••••	846.12									
TOTAL This Period (last page this line n	umber only)	•••••										

SCHEDULE A (FEC Form 3X) -

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(ch	eck only	/ or	ne)							
	ED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12					
	ation copied from such Reports and Sta nercial purposes, other than using the n													
	DF COMMITTEE (In Full)													
Unite	dHealth Group Incorporated	I PAC (U	InitedHealth Group PA	AC)										
	ne of Individual (Last, First, Middle Initia ER, ALYSIA, , ,	l) or Full Or	ganization Name	Date of Receipt										
Mailing	Address 22331 W 44TH TER													
City SHAWN	IEE	State KS	Zip Code 66226-2511	Transaction ID : PR2575830561223 Amount of Each Receipt this Period										
	number of contributing political committee.	С												
Optum S	f Employer (for Individual) Services, Inc		pation (for Individual) Sen Mgmt		Me	emo	Item							
	For: imary General ther (specify) ▼	Aggregate	/ear-to-Date ▼ 230.76		P/R Dedu	uctio	on (\$38.	46 Bi-We	ekly)					
B. HENF	ne of Individual (Last, First, Middle Initia RY, STEPHANIE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
Mailing /	Address 8970 VINCENT CIRCLE	State	Zip Code	03 / 31 / 2021 Transaction ID : PR2575831061223										
	IINGTON	MN	55431-1900						3106122 is Period	3				
	number of contributing political committee.	С		76.92										
	f Employer (for Individual) Services, Inc		pation (for Individual) irector Technology	Memo Item										
	For: imary General ther (specify) ▼	Aggregate	/ear-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
	ne of Individual (Last, First, Middle Initia DE, MARY, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Address 9324 N AERIE CLIFF				03	1	31		2021					
City FOUNT	AIN HILLS	State AZ	Zip Code 85268-6358						33746122 is Period	3				
	number of contributing political committee.	С			<u> </u>		y .	y	115.	38				
United HealthCare Services Inc			pation (for Individual) led Clin Ops		Me	emc	tem							
	For: imary General ther (specify)	Aggregate	/ear-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)										
SUBTOTA	L of Receipts This Page (optional)		•••••	•			,	,	269.2	22				
TOTAL Th	nis Period (last page this line number or	ly)		•	_ .		,							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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		Use separate schedule(s)	(check on	(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				purpo									
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	ie name and a	doress of any political committee	e to solicit co	ntribu	tions fro	om such	Committe	ee.					
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle In BOROCH, BLAIR, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 800 BELFRY DRIVE													
City BLUE BELL	State PA	Zip Code 19422-1210	Transaction ID : PR2575849961223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		80.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	M	lemo	Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Dec	ductior	n (\$40.0	0 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle II B. GOLDEN, WILLIAM, , ,	nitial) or Full C	rganization Name	Date o	f Rec	eipt								
Mailing Address 106 SOUND COURT			03 / D D / Y Y Y Y 2021										
City NORTHPORT	State NY	Zip Code 11768-3527					5936122 is Period	3					
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment CEO	M	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle In C. COTTINGTON, NYLE BRENT, ,		rganization Name	Date o	f Rec	eipt								
Mailing Address 15050 47TH STREET NE			03		D D D 31		y y 2021						
City SAINT MICHAEL	State MN	Zip Code 55376-1613					36536122 is Period	3					
FEC ID number of contributing federal political committee.	С			,			384.6	60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng		lemo	ltem								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)							849.2	20					
TOTAL This Period (last page this line numbe	r only)	••••••				-							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
			person for the purpose of soliciting contributions te to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle A. ADAMO, BRENT, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3109 E DESERT LN			03 / ¹ 2021										
City PHOENIX	State AZ	Zip Code 85042-7198	Transaction ID : PR2575867861223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Software Engineering	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. ROSS, CHRISTY, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 211 JIM CANNON RD			03 / D D / Y Y Y Y Y 03 31 2021										
City VAN ALSTYNE	State TX	Zip Code 75495-2803	Transaction ID : PR2575873361223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		77.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. PEZHMAN, PAYMAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3016 GROVELAND SCH	1		03 / D D / Y Y Y Y 2021										
City WAYZATA	State MN	Zip Code 55391-2816	Transaction ID : PR2575883561223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)		538.52										
TOTAL This Period (last page this line num	ber only)												

Use separate schedule(s)

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
	y information copied from such Reports and State for commercial purposes, other than using the nar												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) MARGHERIO, MICHAEL, , ,	or Full O	rganization Name	Date of Receipt 03 / 31 / 2021 Transaction ID : PR2575916361223									
	Mailing Address 6412 JEFFERSON STREET	_											
	City KANSAS CITY	State MO	Zip Code 64113-1542										
		C	041131342	Amount of Each Receipt this Period 76.92									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initial) OLSON, TRUDY, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 7208 WOODDALE AVE SOUTH			03 / D D / Y Y Y Y 2021									
	City EDINA	State MN	Zip Code 55435-4156	Transaction ID : PR2575918761223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		76.92 Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Svcs										
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) MCGOLDRICK, CHRISTOPHER, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 48 MOUNTAIN TERRACE ROAD			03 / D D / Y Y Y Y 2021									
	City WEST HARTFORD	State CT	Zip Code 06107-1533	Transaction ID : PR2575930461223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) /P SIs & Bus Dev	Memo Item									
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			538.44									
т	OTAL This Period (last page this line number only)	••••••••••••••••••••••••••••••••••••••										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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		Detailed Summary Page	×	11a 13		11		11c	12	47			
Any information copied from such Reports a or for commercial purposes, other than using				or the		pos	se of s	oliciting					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	-												
Full Name of Individual (Last, First, Middl A. MATTERA, RICHARD, , ,	e Initial) or Full C	rganization Name	[Date of	Re	ecei	pt						
Mailing Address 640 LOCUST HILLS DRI	VE			03 31 2021									
City WAYZATA	State MN	Zip Code 55391-1973		Transaction ID : PR2575938461223									
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G Chief Dev Officer		Me	emc	o Ite	em						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P	/R Ded	ucti	ion ((\$192.	30 Bi-V	Veekly)				
Full Name of Individual (Last, First, Middl B. RILEY, FELICITY, , ,	e Initial) or Full C	rganization Name		Date of Receipt									
Mailing Address 3330 EDMUND BLVD													
City MINNEAPOLIS	State MN	Zip Code 55406-2348	-			-			94336122 nis Period	3			
FEC ID number of contributing federal political committee.	С			192.30 Memo Item									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middl DONAHUE, JEANINE, , ,	e Initial) or Full C	rganization Name		Date of	Re	ecei	pt						
Mailing Address 164 MORNINGSIDE DRI				^M 03	1		31	/ Y	y y 2021	Y			
City MANDEVILLE	State LA	Zip Code 70448-7571							95926122 nis Period	3			
FEC ID number of contributing federal political committee.	С					,		,	76.9	92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms		M	emo	o Ite	em						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	l)								653.8	32			
TOTAL This Period (last page this line num	nber only)	•				-							

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle ANEFF, WAYNE, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1158 DESERT ROCK DRI			03 / D D / Y Y Y Y 2021										
City REXBURG	State ID	Zip Code 83440-3697	Transaction ID : PR2575961861223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Sales	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. SALVO, GIANCARLO, , ,	Initial) or Full C	Date of Receipt											
Mailing Address 1027 SW 149 LANE			03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City SUNRISE	State FL	Zip Code 33326-1957	Transaction ID : PR2575964961223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg Sales Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle LEMKE, HEATHER, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 4135 TRILLIUM LANE EAS	ST State	Zip Code	03 31 2021										
City MINNETRISTA	MN	55364-7730	Transaction ID : PR2575965861223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		96.14										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.42	P/R Deduction (\$48.07 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			249.98										
TOTAL This Period (last page this line numb	er only)												

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1										
Any information copied from such Reports and Sta or for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle Initia A. FRANK, DANIEL, , ,	al) or Full O	rganization Name	Date of Receipt										
Mailing Address 1373 PRAIRIE MEADOW RD			03 31 2021										
City	State	Zip Code	Transaction ID : PR2575970461223										
MINNETRISTA	MN	55359-6701	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ff Clin Off	Memo Item										
Receipt For:	Aggregate	Year-to-Date V											
Primary General		1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Other (specify)	L	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
Full Name of Individual (Last, First, Middle Initia B. SIEBERT, GREGORY, , ,	al) or Full O	rganization Name	Date of Receipt										
Mailing Address 46 VIA BELLEZA			03 / D D / Y Y Y Y 2021										
City	State	Zip Code	Transaction ID : PR2575979661223										
SAN CLEMENTE	CA	92673-6910	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		200.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item										
Receipt For:		Year-to-Date ▼											
Primary General Other (specify) ▼		600.00	P/R Deduction (\$100.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle Initiant)	al) or Full O	rganization Name	Date of Receipt										
Mailing Address 257 WEST GRANTLEY			03 31 2021										
City	State	Zip Code	Transaction ID : PR2575987961223										
ELMHURST	IL	60126-2237	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit COO	Memo Item										
Receipt For:		Year-to-Date ▼											
Primary General Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			969.20										
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EMIZED RECEIPTS		Detailed Summary Page	×	-		111	> [11c		2			
An	y information copied from such Reports and Stat	tements ma	ay not be sold or used by any pe	erson f	13 or the j	purc	14 0056	e of s	15 soliciting		6 ributio	17 ons		
	for commercial purposes, other than using the n													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initial SCHULTZ, STACY, , ,	l) or Full C	rganization Name		Date of Receipt									
	Mailing Address 4012 S XERXES AVENUE			Model Model <td< td=""></td<>										
	City	State	Zip Code											
	MINNEAPOLIS	MN	55410-1146											
	FEC ID number of contributing federal political committee.	С			76.92									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel		Me	emo	lte	m						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/	/R Dedu	uctic	on (\$38.4	6 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia CHAMBUNDABONGSE, KUNJORN,		Date of Receipt											
	Mailing Address 9730 46TH STREET				03 31 2021									
	City	State	Zip Code				-		R25760			_		
	WATERTOWN	MN	55388-9333	/	Amount	of	Eac	ch Re	eceipt th	is Per	riod			
	FEC ID number of contributing federal political committee.	С			384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia BRIGGS, MARC, , ,	l) or Full C	rganization Name		Date of	Re	ceip	ot						
	Mailing Address 13534 TUSCALEE HILL CIR				^M 03	/	D	31	/ Y	y 202				
	City DRAPER	State UT	Zip Code 84020-5653						PR2576					
	FEC ID number of contributing federal political committee.	C			Amount	of	Eac	ch Re	ceipt th		riod 84.60)		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo) Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			.						8	46.12	2		
т	OTAL This Period (last page this line number on	ly)					-				-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 108 OF

				Detailed Summary Page	×	11a		-	1b	\neg	11c	12			
	y information copied from such Reports and State								se of						
or	for commercial purposes, other than using the na														
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	Uni	tedHealth Group PA	(C)	_	_	_	_	_	_				
Α.	Full Name of Individual (Last, First, Middle Initial) SONERHOLM, KIMBERLY, , ,) or Full O	Drgar	nization Name		Date of	Re	cei	ipt						
	Mailing Address 3380 SHELBORNE WOODS PAR	1				03 31 Y Y Y Y 2021									
	City CARMEL	State IN		Zip Code 46032-8101	Transaction ID : PR2576033261223 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С	_			384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo	o Ito	em						
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1153.80	P/	/R Dedu	uctic	on	(\$192	2.3	0 Bi-W	'eekly)			
	Full Name of Individual (Last, First, Middle Initial) BYRNES, CHRISTOPHER, , ,) or Full O	Drgar	nization Name	Date of Receipt										
	Mailing Address 3920 GLENWOOD STREET			7. 0	03 / D D / Y Y Y Y Y 2021										
	City DULUTH	State MN		Zip Code 55804-1403	Transaction ID : PR2576042861223 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upat P Op	ion (for Individual) ps		Me	emo	o Ite	em						
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1153.80	P/	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial) KANDALAFT, KEVIN, , ,) or Full O	Drgar	nization Name		Date of	Re	cei	ipt	_					
	Mailing Address 4189 WINDSOR POINT PLACE			Zie Oct		03 -	1	L	31			2021			
	City EL DORADO HILLS	State CA		Zip Code 95762-3797								04366122 is Period	3		
	FEC ID number of contributing federal political committee.	С	_				_	y		-	9	384.6	30		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Me	emo	o It	tem						
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•				,		T t	9	1153.8	30		
Т	OTAL This Period (last page this line number only	y)			ĺ	_			_	Ť	7				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 109 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle STONE, LAURA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1485 COUNTY RD 286			M M / D D / Y Y Y Y 03 31 2021						
Collinsville	State TX	Zip Code 76233	Transaction ID : PR2576045161223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. NELSON, KRISTA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3320 SHAVERS LAKE RC			03 / D D / Y Y Y Y Y 2021						
City WAYZATA	State MN	Zip Code 55391-3341	Transaction ID : PR2576047961223						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Growth Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MONICAL, KENT, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9795 E PIEDRA DRIVE			03 / D D / Y Y Y Y 2021						
City SCOTTSDALE	State AZ	Zip Code 85255-9231	Transaction ID : PR2576051361223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) , Medicare STARS	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			653.82						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 110 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
		ay not be sold or used by any p	erson for the purpose of soliciting contributions						
	the name and a	ddress of any political committe	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle HUANG, JAMES, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6838 IDLEWOOD WAY			03 31 2021						
City EDEN PRAIRIE	N PRAIRIE State Zip Code MN 55346-3519								
FEC ID number of contributing federal political committee.	76.92								
Name of Employer (for Individual) Optum Services, Inc	Occi VP (Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. REX, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 503 HARRINGTON ROAD	03 31 2021								
City WAYZATA	State MN	Zip Code 55391-1512	Transaction ID : PR2576060061223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G CFO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. MCEWAN, JOSHUA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4916 ALDRICH AVE SOU			03 / D D / Y Y Y Y 2021						
City MINNEAPOLIS	State MN	Zip Code 55419-5353	Transaction ID : PR2576085761223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	384.60							
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item								
Receipt For: Primary General Other (specify)									
SUBTOTAL of Receipts This Page (optional)		846.12						
TOTAL This Period (last page this line num	ber only)								

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathe name and a	L ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)					
Full Name of Individual (Last, First, Middle A. GRANT, AMY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 34 FAIRLAWN DR			03 31 2021					
City WALLINGFORD	Zip Code 06492-2588	Transaction ID : PR2576089061223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	76.92							
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. DUDA, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5208 RICHWOOD DRIVE			03 31 2021					
City EDINA	State MN	Zip Code 55436-2322	Transaction ID : PR2576089961223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Corp Dev	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle FREIBERG, BRIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9605 LEXINGTON CT	State	Zip Code	03 31 2021					
City WESTON	WI	54476-6730	Transaction ID : PR2576093661223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		153.84					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Strategy	Memo Item					
Primary General Other (specify)								
SUBTOTAL of Receipts This Page (optional)			423.06					
TOTAL This Period (last page this line numb	er only)							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS						(check only one)							
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		2	17		
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	g cont	ributio	ons		
	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Init PALMER, BRYAN, , ,	tial) or Full O	Organization Name		Date of	Re	ceipt						
	Mailing Address 346 COUNTRY CLUB DRIVE				03 31 2021								
	City TEQUESTA	State FL	Zip Code 33469-1944					PR2576					
					Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.						-		3	384.60)		
	Name of Employer (for Individual)		upation (for Individual)		M	emo	Item						
	United HealthCare Services Inc	Reg	gn Growth Off										
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		1153.80	P/	/R Ded	uctio	on (\$192	2.30 Bi-V	Veekly	/)			
в.	Full Name of Individual (Last, First, Middle Init LESUEUR, REHN, , ,	tial) or Full O	Organization Name	[Date of	ⁱ Re	ceipt						
	Mailing Address 254 JASPERS CIR S				м м 03	/	D D 31	/ Y	, 202	י י 1			
	City	State	Zip Code		Trans	acti	on ID :	PR2576	09896	1223			
	CHASKA	MN	55318-3210	A	Amount	t of	Each R	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С								76.92	2		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Mktg Bus Dev		M	emo	Item						
	Receipt For:		Year-to-Date ▼	_									
	Primary General Other (specify) ▼	Aggregate	230.76	P/R Deduction (\$38.46 Bi-Weekly)									
_	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	Organization Name										
C.	DIAMOND, TIFFANY, , ,				Date of	_	•				_		
	Mailing Address 5 HARVEY DRIVE				03	1	D D D 31	/ Y	202		ŕ		
	City GOFFSTOWN	State NH	Zip Code 03045-2315					PR2576					
	FEC ID number of contributing		00040 2010	/	Amount	t of	Each R	eceipt th	iis Pe	riod	-		
	federal political committee.	C					y	y y		76.92	2		
	Name of Employer (for Individual)Occupation (for Individual)Optum Services, IncVP Gen Mgmt				M	emc	ltem						
	Receipt For:	Aggregate	Year-to-Date ▼										
Primary General 230.7 Other (specify)					/R Ded	ucti	on (\$38.	46 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)								5	538.44	1		
				- i		-	7	9	-	-	=		
ΙT	OTAL This Period (last page this line number	only)	•••••••	-			-	-		-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				for each category of the Detailed Summary Page			1a 3		11 14	- F	110	; [_	2 6	17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements maintenants maintenants	ay r addr	not be sold or used by any pe ess of any political committee	ersor e to s	n for	the	purp	pos	se of	solicit	ing o uch	conti	ributi	ons
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth Group PA	NC)										
Α.	Full Name of Individual (Last, First, Middle Initial) MELNICK, BRADLEY, , ,	or Full C	Drga	nization Name		Date of Receipt									
	Mailing Address 5185 KELSEY TERRACE				03 31 / Y Y Y Y Y										
	City EDINA	State MN		Zip Code							PR25				•
		IVIIN		55436-1174	_	Am	ount	of	Ea	ch R	eceip	this:	; Pei	riod	
	FEC ID number of contributing federal political committee.	С							,	_			3	384.6	0
	Name of Employer (for Individual) Optum Services, Inc		cupa Ops	tion (for Individual)			Me	emo) Ite	эm					
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻											
	Primary General Other (specify) ▼		-	1153.80		P/R	Ded	uctic	on	(\$192	2.30 B	i-We	ekly	r)	
в.	Full Name of Individual (Last, First, Middle Initial) LIRETTE, KARL, , ,	or Full C	Drga	nization Name		Da	te of	Re	cei	pt					
	Mailing Address 9 WEST WOODLAWN DRIVE							03 / D D / Y Y Y Y 2021							
	City	State		Zip Code		Т	rans	acti	on	ID :	PR25	7613	1896 [.]	1223	
	DESTREHAN	LA		70047-2535	_	Am	nount	of	Ea	ch R	eceip	this	; Pei	riod	
	FEC ID number of contributing federal political committee.			С				76.92							
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) an CEO			Me	emo) Ite	эm					
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 230.76		P/R	Dedu	uctic	on ((\$38.4	46 Bi-	Wee	kly)		
с.	Full Name of Individual (Last, First, Middle Initial) GROSSMAN, MICHAEL, , ,	or Full C	Drga	nization Name		Da	te of	Re	cei	pt					
	Mailing Address 15725 56TH AVE N						03 ^M	/	Γ	D D D	/		y 202	1 1	Y
		State		Zip Code					-		PR25	-			3
	PLYMOUTH	MN		55446-2984	_	Am	nount	of	Ea	ch R	eceip	this	; Pei	riod	
	FEC ID number of contributing federal political committee.	С					_		,	_	,		3	884.6	0
	Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncDivision COO							emo	o Ite	эm					
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 1153.80		P/R	Ded	uctio	on	(\$192	2.30 B	i-We	∍ekly	/)	
s	UBTOTAL of Receipts This Page (optional)				•	Г				_			8	346.1	2
Т	OTAL This Period (last page this line number only	y)			-	Ē			-					-	

FOR LINE NUMBER:

PAGE 114 OF

IT.	EMIZED RECEIPTS				(check only one)							
TTEMIZED RECEIPTS			for each category of the Detailed Summary Page	× 11a		11b	11c 15	12	17			
Ar	y information copied from such Reports and s for commercial purposes, other than using the	Statements ma e name and a	I ay not be sold or used by any p ddress of any political committe	erson for th	ie pur contri	rpose of	soliciting	g contribu	utions			
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
А.	Full Name of Individual (Last, First, Middle In FRIDNER, JOHN, , ,	itial) or Full O	rganization Name	Date	of R	eceipt						
	Mailing Address 782 PENFIELD DR				03 31 2021							
	City CAROL STREAM	State IL	Zip Code 60188-4738					14756122 nis Perioc				
	FEC ID number of contributing federal political committee.	С				-	-		.00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) NA VP SIs/Gen		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R D	educt	ion (\$39.	00 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle In LENTZ, MICHEL, , ,	itial) or Full O	rganization Name	Date	of R	eceipt						
	Mailing Address 4004 FOREST GLEN DRIVE			03		31	/ Y	y y 2021	Y			
	City	State PA	Zip Code					15356122	-			
	GREENSBURG	PA	15601-9062	Amou	unt of	Each R	eceipt th	nis Perioo	1			
	FEC ID number of contributing federal political committee.	С				-		115	.38			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ec Dir		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R De	∍ducti	ion (\$57.	69 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle In PAUNOVICH, VUKASIN, , ,	itial) or Full O	rganization Name	Date	of R	eceipt						
	Mailing Address 1209 KEITH RD			03	3	31	JL	2021	_			
	City WAKE FOREST	State NC	Zip Code 27587-7301					3067612	-			
	FEC ID number of contributing federal political committee.	С				, .	, <u>,</u>	384	.60			
	Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) Seg CIO		Mem	o Item						
	Primary General Other (specify)	Year-to-Date ▼ 1153.80	P/R D	educt	tion (\$19:	2.30 Bi-V	Veekly)					
s	UBTOTAL of Receipts This Page (optional)							577.	.98			
Т	OTAL This Period (last page this line number	only)			_							

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I BENSON, JEAN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 14951 HIGHLAND COURT	NE		M M / D D / Y Y Y Y 03 31 2021						
City PRIOR LAKE	State MN	Zip Code 55372-4109	Transaction ID : PR2576310961223 Amount of Each Receipt this Period						
FEC ID number of contributing									
federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group CFO	Memo Item						
Receipt For:		Year-to-Date ▼							
Primary General	, iggi ogulo		P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify) V		1153.80							
Full Name of Individual (Last, First, Middle II B. LONG, PAUL, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12352 PRINCETON AVE			03 31 2021						
City	State	Zip Code	Transaction ID : PR2578734961223						
EDEN PRAIRIE	MN	55347-1936	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Primary General Other (specify) ▼		, 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2659 E LAKE OF THE ISLE	S PKWY		03 31 2021						
City	State	Zip Code	Transaction ID : PR2578741061223						
MINNEAPOLIS	MN	55408-1052	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	Memo Item						
Receipt For:		Year-to-Date ▼	-						
Primary General Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line numbe	r only)								

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Use separate		Use separate schedule(s)	(check only one)							
ITEMIZED REC			for each category of the Detailed Summary Page	¥ 11a		11b	11c 15	12	17	
			ay not be sold or used by any pe ddress of any political committee	rson for th		pose of	soliciting	contributi	ions	
NAME OF COMMIT		d PAC (L	JnitedHealth Group PA	C)						
Full Name of Indivio A. ASNER, BARTL	dual (Last, First, Middle Initia EY, , ,	al) or Full Oi	rganization Name	Date	of Re	eceipt				
Mailing Address 25	OFFSHORE			M 03		D D 31	/ Y	2021	Y	
City NEWPORT BEACH	1	State CA	Zip Code 92657-2162					319461223 is Period	}	
FEC ID number of federal political com					- 41-	384.6	0			
Optum Services, Inc										
Receipt For: Primary Other (specify	Aggregate Teal-to-Date +						.30 Bi-W	/eekly)		
Full Name of Indivio B. DUFFEY, KRIS	dual (Last, First, Middle Initia STY, , ,	al) or Full Oi	rganization Name	Date	of Re	eceipt				
	095 N 109TH PLACE			03		D D 31	/ Y	y y 2021	Y	
City SCOTTSDALE		State AZ	Zip Code 85262-3293					323261223	<u> </u>	
FEC ID number of federal political com	0	С			Amount of Each Receipt this Period					
Name of Employer Optum Services, Inc			upation (for Individual) ef Clin Off		Mem	o Item				
Receipt For: Primary Other (specify	General	Aggregate	Year-to-Date ▼ 1153.80	P/R De	educti	on (\$192	.30 Bi-W	/eekly)		
Full Name of Individ C. CIAVOLA, LA	dual (Last, First, Middle Initia URA, , ,	al) or Full O	rganization Name	Date	of Re	eceipt				
	58 DELOACH COURT	1		03		D D D 31	/ Y	ү ү 2021	Y	
City FRISCO		State TX	Zip Code 75034-7436					824361223 is Period	}	
FEC ID number of federal political com	0	С				y .	, ,	384.6	0	
Name of Employer (for Individual) Occupation (for Individual) Optum Services, Inc SVP Ops					Mem	o Item				
Receipt For: Primary Other (specify	General /)	Aggregate	Year-to-Date ▼ 1153.80	P/R D	educt	ion (\$192	2.30 Bi-W	/eekly)		
SUBTOTAL of Receip	ots This Page (optional)		•••••			, .	,	1153.8	0	
TOTAL This Period (I	ast page this line number or	nly)				-				

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle BUSBEE, NATHANAEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 611 ORPINGTON RD			03 / D D / Y Y Y Y 03 31 2021						
City BALTIMORE	State MD	Zip Code 21229-2128	Transaction ID : PR2578826761223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. MILLER, TRACI, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 729 PINE TRAIL	1-		03 / D D / Y Y Y Y 03 31 2021						
City	State	Zip Code	Transaction ID : PR2578829961223						
ARNOLD	MD	21012-1628	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For:	Aggregate	Year-to-Date V	1						
Primary General Other (specify) ▼		346.14	P/R Deduction (\$57.69 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. FARMER, RACHEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1846 SOUTH COLUMBIN	E STREET		03 / D D / Y Y Y Y 2021						
City BATON ROUGE	State LA	Zip Code 70808-5227	Transaction ID : PR2595208361223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		307.68						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle BOWES, DOUGLAS, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 583 BATTERY STREET 90	8N		M M / D D / Y Y Y Y Y 03 31 2021							
City SEATTLE										
FEC ID number of contributing federal political committee.	92.30									
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.90	P/R Deduction (\$46.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle SNYDER, MARY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 156 HIGH WINDS DRIVE			03 31 Y Y Y Y Y 2021							
City YARMOUTH	State ME	Zip Code 04096-5958	Transaction ID : PR2595229361223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. HAREWOOD, JUNIOR, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 223 MOUNT VERNON CO	VE		03 / D D / Y Y Y Y 2021							
City SANDY SPRINGS	State GA	Zip Code 30328-4130	Transaction ID : PR2595231561223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)										
SUBTOTAL of Receipts This Page (optional).			861.50							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to collicit contributions						
NAME OF COMMITTEE (In Full)	ng the name and a	ddress of any political committe	e to solicit contributions from such committee.						
UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mide SHORT, MARIANNE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2215 SUMMIT AVENUE			03 31 2021						
City SAINT PAUL	State MN	Zip Code 55105-1002	Transaction ID : PR2601133561223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mide B. WILLIAMS, DAVID, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10 SOUTHERN OAKS I	DRIVE		03 31 2021						
City CLINTON	State MS	Zip Code	Transaction ID : PR2601151161223						
	MIS	39056-9772	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Mide C. FRIAS, LORRAINE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 855 ST CLAIR AVENU	5 #1		03 31 Y Y Y Y Y 2021						
City SAINT PAUL	State MN	Zip Code 55105-3283	Transaction ID : PR2601159061223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optior	al)		538.44						
TOTAL This Period (last page this line nu	mber only)	······							

FOR LINE NUMBER:

PAGE 120 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. PERERA, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1201 UNITY AVE N			03 / D D / Y Y Y Y Y 03 31 2021						
City GOLDEN VALLEY	State MN	Zip Code 55422-4735	Transaction ID : PR2601168861223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. RODRIGUEZ, ROGER, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4825 DAVIS ROAD			03 / D D / Y Y Y Y Y 2021						
City MIAMI	State FL	Zip Code 33143-6141	Transaction ID : PR2601176861223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCBEATH, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2537 RED ARROW DRIVE	E		03 / D D / Y Y Y Y 03 31 2021						
City LAS VEGAS	State NV	Zip Code 89135-1628	Transaction ID : PR2605708961223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual)) Med Grp Physn	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			846.12						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 121 OF

	,	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	i using the name and a	duress of any political committee							
UnitedHealth Group Inco	prporated PAC (L	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, HUTCHINS, LEIGH, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 16786 RAINY VAL	E AVE		03 / D D / Y Y Y Y 2021						
City RIVERSIDE	State CA	Zip Code 92503-6535	Transaction ID : PR2605717861223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Primecare Medical Network, Inc		upation (for Individual) D Med Grp Non Physn	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, B. DAVIS, KELLY, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2285 N POWHATA			03 / D D / Y Y Y Y 2021						
City ARLINGTON	State	Zip Code 22205-2113	Transaction ID : PR2605734261223						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, LEIGHPITSTICK, EMILY,		rganization Name	Date of Receipt						
Mailing Address 17307 97TH DR S			03 / D D / Y Y Y Y 2021						
City SNOHOMISH	State WA	Zip Code 98296-8168	Transaction ID : PR2605735261223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Itwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (c	ptional)		346.14						
TOTAL This Period (last page this lin	e number only)								

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ıт.			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12						
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
<u>.</u>	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia MALONE, TRACY, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 900 S 22ND ST			03 / D D / Y Y Y Y 2021						
	City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736961223 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Initia PETERSON, ERIC, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1080 WILLIAMSBURG LN			03 / D D / Y Y Y Y Y 2021						
	City ZIONSVILLE	State IN	Zip Code 46077-1158	Transaction ID : PR2605750461223						
	FEC ID number of contributing federal political committee.	C	40077-1130	Amount of Each Receipt this Period 76.92						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 945 MINERS RIDGE COURT			03 / D D / Y Y Y Y 2021						
	City INCLINE VILLAGE	State NV	Zip Code 89451-8801	Transaction ID : PR2607806761223 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc			upation (for Individual) Dps	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			538.44						
т	OTAL This Period (last page this line number or	nly)	••••••							

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	the name and a	uuress or any pointcal committe	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle WELDON, BRIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 1155 MOERS DRIVE			03 31 YYYYY 02 2021
City CHASKA	State MN	Zip Code 55318-4629	Transaction ID : PR2608055561223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle LANDO, LISA, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 60 PINEAPPLE STREET APT 3J	State	Zin Codo	03 / D D / Y Y Y Y Y 2021
City BROOKLYN	NY	Zip Code 11201-6839	Transaction ID : PR2608059561223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	-
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. SAVOIE, DANA, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 8756 STONEFIELD LN			M M / D D / Y Y Y Y 31 2021
City CHANHASSEN	State MN	Zip Code 55317-4713	Transaction ID : PR2609809561223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		153.84
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			307.68
TOTAL This Period (last page this line numb	per only)		

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 rerson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle BODELL, LESLIE, , ,		rganization Name	Date of Receipt					
Mailing Address 18710 34TH AVENUE NOF			03 31 Y Y Y Y Y 2021					
City PLYMOUTH	State MN	Zip Code 55447-1000	Transaction ID : PR2609811361223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. WRIGHT, NORMAN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 11347 E LA JUNTA ROAD			03 / D D / Y Y Y Y Y 2021					
City SCOTTSDALE	State AZ	Zip Code 85255-5791	Transaction ID : PR2609812361223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Customer Officer	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	-					
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. PATEL, KETAN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 1811 PITCAIRN DRIVE	01-1-	7. 0.4	03 / D D / Y Y Y Y 2021					
City COSTA MESA	State CA	Zip Code 92626-4702	Transaction ID : PR2612523361223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item					
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			846.12					
TOTAL This Period (last page this line numb	er only)							

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			Use separate schedule		heck only	y one	e)	L				
			for each category of the Detailed Summary Pag		× 11a		11b	11c	12	— 1 - 7		
	tion copied from such Reports and Sta nercial purposes, other than using the r					purpo						
	F COMMITTEE (In Full) dHealth Group Incorporated	d PAC (L	JnitedHealth Grou	p PAC)								
	e of Individual (Last, First, Middle Initia ENS, J, , ,	al) or Full Or	rganization Name		Date of	Rec	eipt					
Mailing A	ddress 93 CONSERVATION ROAD				03	/	D D 31	/ Y	y y 2021	Y		
City SUFFIEI	_D	State CT	Zip Code 06078-2442						5 2856122 is Period			
	number of contributing olitical committee.	С							76.	92		
Optum S	Employer (for Individual) ervices, Inc		upation (for Individual) ctor Technology		Me	emo	Item					
	For: mary General her (specify) ▼	Aggregate	Year-to-Date ▼ 230.7	6	P/R Ded	uctior	n (\$38.4	l6 Bi-We	ekly)			
	e of Individual (Last, First, Middle Initia R, MICHAEL, , ,	al) or Full Or	rganization Name		Date of	Rec	eipt					
	ddress 2383 HIGHOVER TRAIL				03	/	D D 31	/ Y	y y 2021	Y		
City CHANHA	ASSEN	State MN	Zip Code 55317-4744	-					3056122 is Period	-		
	number of contributing olitical committee.	С		384.60								
	Employer (for Individual) ealthCare Services Inc	Occi SVP		Me	emo	Item						
	For: mary General ner (specify) ▼	Aggregate	ggregate Year-to-Date ▼ 1153.80				n (\$192.	.30 Bi-W	eekly)			
	e of Individual (Last, First, Middle Initia	al) or Full Or	rganization Name		Date of	Rec	eipt					
	ddress 10 WOODLAND ROAD	01-1-	The Oak		03	/	D D D 31		2021			
City EDINA		State MN	Zip Code 55424-1631						53326122 is Period			
FEC ID number of contributing federal political committee.		С				. ,		, y	92.	30		
Name of Employer (for Individual) Occupation (for Individual) Optum Services, Inc VP IT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Other (specify)			Occupation (for Individual) VP IT				Memo Item					
			Year-to-Date ▼ 276.9		P/R Ded	uctior	n (\$46.1	15 Bi-We	eekly)			
SUBTOTAI	L of Receipts This Page (optional)			►		. ,		,	553.	82		
TOTAL Thi	is Period (last page this line number or	nly)		►								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				for each category of the Detailed Summary Page		×	11a 13] 11 14	ŀ		11c 15			17
	y information copied from such Reports and State for commercial purposes, other than using the na						or the		pos	se of	f sol	liciting	contr	ibuti	ons
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Uni	itedHealth Group P <i>i</i>	AC)										
Α.	Full Name of Individual (Last, First, Middle Initial) HASSLINGER, CHRISTOPHER, , ,	or Full C	Drgai	nization Name		D	ate o	f Re	ece	ipt					
	Mailing Address 23261 WOODLAND RIDGE DRIV					I	03	1	l	31		/ Y	Y 202	ү 1	Y
		State MN		Zip Code	_							26133			
	LAKEVILLE	IVIIN		55044-7293		A	moun	t of	Ea	ich F	lece	eipt thi	s Per	iod	
	FEC ID number of contributing federal political committee.	С							-		_	-	3	84.6	0
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Dev			М	emo	b It	em					
	Receipt For:		Yea	ar-to-Date 🔻											
	Primary General Other (specify) ▼		-	1153.80]	P/F	R Ded	uctio	on	(\$19)	2.30) Bi-W	eekly))	
в.	Full Name of Individual (Last, First, Middle Initial) BURKHOLDER, CHAD, , ,	or Full C	Drgai	nization Name		D	ate o	f Re	ece	ipt					
	Mailing Address 2423 DUBONNET DRIVE	-				ſ	03	/	ľ	31		/ Y	2021		Y
	City MACUNGIE	State PA		Zip Code 18062-8857	_				-			26150 eipt thi			
	FEC ID number of contributing federal political committee.	С			384.60						0				
	Name of Employer (for Individual) Optum Services, Inc		cupa Ops	tion (for Individual)			М	emo	o It	em					
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1153,80]	P/F	R Ded	uctic	on	(\$192	2.30) Bi-We	eekly))	
с.	Full Name of Individual (Last, First, Middle Initial) BARELA, ERNEST, , ,	or Full C	Drgai	nization Name		D	ate o	f Re	ece	ipt					
	Mailing Address 12059 VIBRATO COURT					ſ	^M 03	/	ľ	31		/ Y	202 ⁷		Y
	City	State		Zip Code			Trans	sacti	ior	ID :	PR	26150	8086	1223	
	LAS VEGAS	NV		89138-4654		A	moun	t of	Ea	ch F	lece	eipt thi	s Per	iod	
	FEC ID number of contributing federal political committee.	С				Ę			y		_	9	3	84.6	0
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Gen Mgmt						Memo Item							
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 1153.80]	P/I	R Dec	luctio	on	(\$19	12.30) Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)				<u> </u>	Γ					_		11	53.8	0
т	OTAL This Period (last page this line number only	y)		······	- -	ĺ			-			-		-	

Use separate schedule(s)

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ITEMIZED RECEIPTS	Use separate schedule(s)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	-							
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Midd A. SOLOMON, RANDALL, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 760 HAIGHT STREET			M M / D / Y					
City SAN FRANCISCO	State CA	Zip Code 94117-3317	Transaction ID : PR2615671561223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Behvrl Med Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. BIRNBAUM, MICHAEL, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 55 DEAN STREET		Zin Onde	03 / D D / Y Y Y Y Y 2021					
City BROOKLYN	State NY	Zip Code 11201-6245	Transaction ID : PR2615671661223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIthcare Econ	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. KNUTSON, DIANE, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5321 EMPIRE LANE NO			03 / D D / Y Y Y Y 2021					
City PLYMOUTH	State MN	Zip Code 55446-3723	Transaction ID : PR2615923961223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Pricing	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		538.44					
TOTAL This Period (last page this line num	nber only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EIVIZED RECEIPTS		Detailed Summary Page	🗶 11a 🗌 11b 🗌 11c 🔤 12					
				13 14 15 16 1					
	y information copied from such Reports and Sta for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	C)					
Α.	Full Name of Individual (Last, First, Middle Initi OSTRANDER, ROBERT, , ,	al) or Full C	organization Name	Date of Receipt					
	Mailing Address 18 BARTON COURT			03 / D / Y Y Y Y 2021					
	City	State	Zip Code	Transaction ID : PR2615960661223					
	PLEASANT HILL	CA	94523-2029	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		76.92					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼	1					
	Primary General Other (specify) ▼	P/R Deduction (\$38.46 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initi TRAW, KEVIN, , ,	al) or Full C	rganization Name	Date of Receipt					
	Mailing Address 518 13TH ST			03 31 2021					
	City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	Transaction ID : PR2617365661223 Amount of Each Receipt this Period 76.92 Memo Item					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230,76	P/R Deduction (\$38.46 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initi DOMB, JULIET, , ,	al) or Full C	organization Name	Date of Receipt					
	Mailing Address 28 MARLBOROUGH ST APT 1			03 31 Y Y Y Y 2021					
	City	State	Zip Code	Transaction ID : PR2618988761223					
	BOSTON	MA	02116-2133	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		192.30					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify)	1	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			346.14					
	OTAL This Period (last page this line number o								

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I BROWN, ROGER, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 512 EAST STATE AVE			03 31 Y Y Y Y Y 2021						
City PHOENIX	State AZ	Zip Code 85020-4940	Transaction ID : PR2622557961223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. OLSON, MARK, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 13454 E JEWELL AVE	Chata	Zin Oode	03 / D D / Y Y Y Y Y 2021						
City AURORA	State CO	Zip Code 80012-5465	Transaction ID : PR2622561661223						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mamt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. MOURAS, DENNIS, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6376 MARSH ROAD			03 31 / Y Y Y Y 2021						
City COTTRELLVILLE	State MI	Zip Code 48039-1314	Transaction ID : PR2623702961223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		Memo Item						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			846.12						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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(check only one)

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or for commercial purposes, other than usin			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Midd MULES, REBECCA, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1136 BATTERY AVENU			03 31 / Y Y Y Y Y 2021					
City BALTIMORE	State MD	Zip Code 21230-4112	Transaction ID : PR2624442661223					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60					
Name of Employer (for Individual)		upation (for Individual) Govt Affs	Memo Item					
United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. STALLWOOD, GREGG, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4842 JUNIPER DR			M M / D D / Y Y Y Y 03 31 2021					
City PALM HARBOR	State FL	Zip Code 34685-2688	Transaction ID : PR2625499061223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. COLLETTE, CHRISTOPHER,		rganization Name	Date of Receipt					
Mailing Address 4776 MANITOU ROAD			03 / D D / Y Y Y Y 2021					
City EXCELSIOR	State MN	Zip Code 55331-9400	Transaction ID : PR2625499561223					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UnitedHIth Grp	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	al)		1153.80					
TOTAL This Period (last page this line nur	nber only)							

SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)	(check only	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12	□			
Any information copied from such Reports and or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)					III SUCI	COMMITTE				
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of	Receipt						
Mailing Address 5120 MIRROR LAKES DRIV	Έ		03	/ D D 31	/ Y	y y 2021	Y			
City EDINA	State MN	Zip Code 55436-1342		of Each Red			3			
FEC ID number of contributing federal political committee.	С			-gr.		384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Mktg Off	Me	mo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Dedu	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. SMITH, LISA, , ,	nitial) or Full C	rganization Name	Date of	Receipt						
Mailing Address 5040 INTERLACHEN BLUF	=		03	/ D D 31	/ Y	y y 2021	Y			
City EDINA	State MN	Zip Code 55436-1360		ction ID : Pl of Each Red			3			
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Segment CMO	Me	mo Item						
Receipt For:		Year-to-Date ▼		-						
Other (specify) ▼		1153.80	P/R Dedu	ction (\$192.3	30 Bi-W	eekly)				
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of	Receipt						
Mailing Address 2232 AUTUMN COVE CIRC			M M 03	/ D D 31	/ Y	ү ү 2021	Y			
City FLEMING ISLAND	State FL	Zip Code 32003-3230		of Each Red			3			
FEC ID number of contributing federal political committee.	С			9	y	384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Dedu	iction (\$192.3	30 Bi-W	eekly)				
SUBTOTAL of Receipts This Page (optional)				,	y	1153.8	0			
TOTAL This Period (last page this line numbe	r only)				-					

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. CARIGAN, BARBARA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5589 W TECO AVENUE			03 31 Y Y Y Y 2021						
City LAS VEGAS	State NV	Zip Code 89118-2805	Transaction ID : PR2625534661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		153.84						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Hun	upation (for Individual) nan Capital Partner Mgr	Memo Item						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. HINES, GREGORY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3710 P STREET			03 / D D / Y Y Y Y 2021						
City SACRAMENTO	State CA	Zip Code 95816-6733	Transaction ID : PR2626886561223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle STOCKSTAD, LYNNE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5190 MEADVILLE STREE	1		03 / D D / Y Y Y Y 2021						
City EXCELSIOR	State MN	Zip Code 55331-8790	Transaction ID : PR2626915561223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Chief Mktg Off	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			923.04						
TOTAL This Period (last page this line numb	er only)	······							

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 1 erson for the purpose of soliciting contributions									
	g the name and a	ddress of any political committe	e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middl GRABSKI, BENJAMIN , , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 17772 63RD AVENUE No	ORTH		03 / 31 / 2021 Transaction ID : PR2627731661223 Amount of Each Receipt this Period									
City MAPLE GROVE	State MN	Zip Code 55311-4649										
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middl B. DUKART, JENNIFER, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2541 DRESDEN LANE			03 / D D / Y Y Y Y 2021									
City GOLDEN VALLEY	State MN	Zip Code 55422-3617	Transaction ID : PR2627749161223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middl C. PARIS, KATHERINE, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 17365 62ND AVE N			03 / D D / Y Y Y Y 03 31 2021									
City MAPLE GROVE	State MN	Zip Code 55311-6405	Transaction ID : PR2628320661223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	I)		538.44									
TOTAL This Period (last page this line num	ber only)											

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. VANDERWALDE, LAMBERT, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 45 AUDUBON CAUSEWAY	, 		M M / D D / Y Y Y Y Y 03 31 2021									
City LANTANA	State FL	Zip Code 33462-4756	Transaction ID : PR2628332361223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHG Research-Corp Affairs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. PIAZZA, ELIZABETH, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 117 HILLSIDE LN			03 31 YYYYY 2021									
City POTTSTOWN	State PA	Zip Code 19465-8583	Transaction ID : PR2628334161223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. KORNHAUSER, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 180 SUMMIT LANE			03 / D D / Y Y Y Y Y 2021									
City BALA CYNWYD	State PA	Zip Code 19004-2931	Transaction ID : PR2628335761223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 347.76	P/R Deduction (\$57.96 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			577.44									
TOTAL This Period (last page this line number	er only)											

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171			Use separate schedule(s)	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11									
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
$\overline{\langle}$	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Initi ERICKSON, ALYSSA, , ,	al) or Full O	Organization Name	Date of Receipt									
	Mailing Address 6430 POLARIS LANE N			03 31 / Y Y Y Y Y 2021									
	City MAPLE GROVE	State MN	Zip Code 55311-4320	Transaction ID : PR2628798961223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		192.30									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initi THOMPSON, BRUCE, , ,	al) or Full O	Organization Name	Date of Receipt									
	Mailing Address 2826 HEDGEROW DRIVE			03 / D D / Y Y Y Y Y 2021									
	City	State TX	Zip Code	Transaction ID : PR2628833661223									
	DALLAS FEC ID number of contributing	C	75235-7590	Amount of Each Receipt this Period									
	federal political committee.	U		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initi RILEY, LORI, , ,	al) or Full O	Organization Name	Date of Receipt									
	Mailing Address 5636 JAMES AVENUE SOUTH		7.0.4	M M / D D / Y Y Y Y 03 31 2021									
	City MINNEAPOLIS	State MN	Zip Code 55419-1611	Transaction ID : PR2628834061223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			961.50									
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		Use separate schedule(s)	(check on	ly one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	<u> </u>					
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or for commercial purposes, other than using th	ie name and a	lucress of any political committee	e lo solicit co	ntributior	IS IFOR SUC	in committ	ee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I SAYEED, OMER, , ,	nitial) or Full C	organization Name	Date o	f Receipt	t							
Mailing Address 2239 HOLLISTON AVE			03	التنا لنبا لتنا								
City ALTADENA	State CA	Zip Code 91001-3213	Transaction ID : PR2632078261223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С				· · ·	76.9	92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	M	lemo Iter	n							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Dec	duction (\$	38.46 Bi-W	'eekly)						
Full Name of Individual (Last, First, Middle I DREFAHL, JASON, , ,	nitial) or Full C	organization Name	Date o	f Receipt	t							
Mailing Address 6104 FOX MEADOW LN			03		31 ^y	2021	Y					
City EDINA	State MN	Zip Code 55436-1217			D:PR2632							
FEC ID number of contributing federal political committee.	С					384.6	60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ision COO	M	lemo Iter	n							
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1153.80	P/R Ded	luction (\$	192.30 Bi-V	Veekly)						
Full Name of Individual (Last, First, Middle I OTTESON, WILLIAM, , ,	nitial) or Full C	organization Name	Date o	f Receipt	t							
Mailing Address 4545 OXFORD AVE	Otota	Zin Ood-	03		31	2021						
City EDINA	State MN	Zip Code 55436-1405			D:PR2632		3					
FEC ID number of contributing federal political committee.	С				· · ·	384.6	60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel		lemo Iter	n							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Dec	duction (\$	6192.30 Bi-\	Weekly)						
SUBTOTAL of Receipts This Page (optional)				,	,	846.1	2					
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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				Detailed Summary Page		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	Un	itedHealth Group PA	NC)										
Α.	Full Name of Individual (Last, First, Middle Initi GORSUCH, KIRSTEN, , ,	al) or Full C	Orga	nization Name		Date c	of Re	eceipt							
	Mailing Address 2780 COUNTRYSIDE DRIVE	WEST				03 / D D / Y Y Y Y 03 31 2021									
	City	State		Zip Code		Tran	sact	ion II):	PR2632	0878	36122	3		
	ORONO	MN		55356-9676	_	Amour	t of	Each	۱R	eceipt th	nis F	'eriod			
	FEC ID number of contributing federal political committee.	С						-				384.6	60		
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) omm		N	lemo	o Item	ı						
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	Primary General Other (specify) ▼		-	1153.80		P/R Deo	ducti	on (\$	192	2.30 Bi-V	Veek	dy)			
	Full Name of Individual (Last, First, Middle Initi TUFFIN, MICHAEL, , ,	al) or Full C	Drga	nization Name		Date c	of Re	eceipt							
	Mailing Address 5904 ASHBY MANOR PLACE					03	/		D 31	/ Y) 221	Y		
	City	State		Zip Code		Trans	sact	ion IC) : I	PR2632	0879	96122	3		
	ALEXANDRIA	VA		22310-2267	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				<u> </u>		Ţ		-	_	384.6	60		
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) ovt Affs		N	lemo	o Item	ı						
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	Primary General Other (specify) ▼		,	576.90		P/R Dec	lucti	on (\$′	192	2.30 Bi-W	/eek	dy)			
	Full Name of Individual (Last, First, Middle Initi MEENTS, BENJAMIN, , ,	al) or Full C	Orga	nization Name		Date c	of Re	eceipt	:						
	Mailing Address 24995 GLEN ROAD					03	/		31	/ Y		021 [°]	Y		
	City	State		Zip Code		Tran	sact	ion II	D :	PR2632	088	16122	3		
	EXCELSIOR	MN		55331-8549	_	Amour	t of	Each	۱R	eceipt th	nis F	'eriod			
	FEC ID number of contributing federal political committee.	С						9	2	,	_	76.9	92		
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)		N	lem	o Iten	n						
	Optum Services, Inc	VPI	Mktę]											
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻											
	Other (specify)		-	230.76		P/R Deo	ducti	ion (\$	38.	46 Bi-W	eekl	у)			
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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				or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16					Г	17				
	y information copied from such Reports and State for commercial purposes, other than using the nar					or the		rp	ose c		oliciting	g contri	ibutio		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	Jni	itedHealth Group PA	NC)										
Α.	Full Name of Individual (Last, First, Middle Initial) WALTHOUR, JOHN, , ,	or Full O	rgai	nization Name	C	Date of Receipt									
	Mailing Address 5049 COLFAX AVE S				03 31 2021 Transaction ID : PR2632877061223										
	City MINNEAPOLIS	State MN		Zip Code 55419-1145											
		C	ï			\mou	nt of	T E	acn	Red	ceipt th		100 84.60		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	•	tion (for Individual)		ſ	Mem	10	Item						
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Yea	ar-to-Date ▼ 1153.80	P/	R De	duct	tio	n (\$1	92.:	30 Bi-W	/eekly)			
B.	Full Name of Individual (Last, First, Middle Initial) HAPGOOD, WADE, , ,	or Full O	rgai	nization Name		Date	of R	ec	eipt						
	Mailing Address 330 NW 82ND					м 03		/	3		/ Y	2021]	
	Сіty ТОРЕКА	State KS		Zip Code 66617-2223		Transaction ID : PR263416706122 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				115.38									
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) t Affs		I	Mem	0	Item						
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	ur-to-Date ▼ 346.14	P/	R De	duct	ioi	n (\$57	7.69	9 Bi-We	ekly)			
С.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgai	nization Name		Date	of R	ec	eipt						
	Mailing Address 670 TOURNAMENT DRIVE					[™] 03		/	D 3		/ Y	y 2021			
	City AVON LAKE	State OH		Zip Code 44012-2285							R2634				
		C	ï			Inou			ach	Red	ceipt th		77.00		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO			Mem	10	Item						
	Receipt For: A Primary General Other (specify) I	ggregate	Yea	ur-to-Date ▼ 231.00	P/	'R De	duct	tio	n (\$3	8.5	0 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)								,			57	76.98		
Т	OTAL This Period (last page this line number only	·)							_		-		-		

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PAGE 139 OF

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	D RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12				
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	ercial purposes, other than using the n	ame and a	doress of any political committee	to so	Dicit con	ITTID	utions 1	rom sucr	n committ	ee.			
	Health Group Incorporated	I PAC (L	JnitedHealth Group PA	C)									
	e of Individual (Last, First, Middle Initia EY, JOHN, , ,	l) or Full Oi	rganization Name	Date of Receipt 03 / 31 / 2021 Transaction ID : PR2634170361223 Amount of Each Receipt this Period									
Mailing Ac	ldress 425 N 15TH ST												
City NASHVIL	LE	State TN	Zip Code 37206-2774										
	umber of contributing litical committee.	С							76.9	92			
United He	Employer (for Individual) althCare Services Inc		ipation (for Individual) Gen Mgmt		Me	emo	Item						
Receipt Fo		Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
	of Individual (Last, First, Middle Initia 5, JOHN, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt						
	Idress 1923 SHIVER DR				03) / Y	2021	Y					
City ALEXAND)RIA	State VA	Zip Code 22307-1629				-		5666122	3			
FEC ID nu	umber of contributing litical committee.	С		Amount of Each Receipt this Period 384.60									
	Employer (for Individual) althCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt Fo		Aggregate	Year-to-Date ▼ , 1153,80	F	P/R Dedu	uctic	on (\$192	2.30 Bi-W	/eekly)				
	of Individual (Last, First, Middle Initia	l) or Full O	rganization Name		Date of	Re	ceipt						
Mailing Ac	dress 1311 HAMLIN STREET NE				03	/	31) / Y	y y 2021	Y			
City WASHING	GTON	State DC	Zip Code 20017-2451						88856122 is Period	3			
	umber of contributing litical committee.	С			<u> </u>		y .	, ,	384.0	60			
United He	Employer (for Individual) althCare Services Inc		upation (for Individual) Sovt Affs		Me	emo	ltem						
Receipt Fo		Year-to-Date ▼ 1153.80	F	P/R Dedu	uctio	on (\$19	2.30 Bi-W	/eekly)					
SUBTOTAL	of Receipts This Page (optional)						,	,	846. <i>*</i>	12			
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
I LIVILLU RECEITIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			13 14 15 16 17 rerson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Mic A. POWER, ROBERT, , ,	Idle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 20 SMITH LANE			03 / D D / Y Y Y Y 2021									
City SAINT JAMES	State NY	Zip Code 11780-3810	Transaction ID : PR2634892861223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Mic B. PAYET, KEITH, , ,	Idle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 9608 STONEBLUFF D			03 / D D / Y Y Y Y Y 2021									
City BRENTWOOD	State	Zip Code 37027-1468	Transaction ID : PR2635440061223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Mic C. MIRAU, ANTHONY, , ,	Idle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 770 HAWKCREST CIF	1		03 / D D / Y Y Y Y Y 2021									
City CHANHASSEN	State MN	Zip Code 55317-4860	Transaction ID : PR2635444261223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		192.30									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svcs	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optio	nal)		653.82									
TOTAL This Period (last page this line n	umber only)											

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			13 14 15 16 17 berson for the purpose of soliciting contributions be to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Mid EICHENLAUB, MANDIE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 6607 CINDY LANE			03 31 2021									
City HOUSTON	State TX	Zip Code 77008-5110	Transaction ID : PR2635448561223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Mid ROOS, THOMAS, , ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3199 KAGEN AVE NE	Otata	Zin Oode	03 / D D / Y Y Y Y 2021 Transaction ID : PP 2625451261222									
City SAINT MICHAEL	State MN	Zip Code 55376-3416	Transaction ID : PR2635451261223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Chief Acctng Off	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Mid C. MADONDO, JOHN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 147 BLUEBELL WAY			M M / D D / Y Y Y Y 03 / 31 2021									
City FRANKLIN	State TN	Zip Code 37064-6784	Transaction ID : PR2636726161223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	nal)		538.44									
TOTAL This Period (last page this line nu	mber only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×] 11a			111	- H	11		12		
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F											Such	comm		
<u> </u>	Full Name of Individual (Last, First, Middle Initial) of DEMPSEY, MICHAEL, , ,	or Full O	rgar	ization Name	[Date of Receipt									
	Mailing Address 6614 PARKWOOD LANE				03 31 Y Y Y Y 2021										
	5	State MN		Zip Code 55436-1734					-				263612	-	
						Amoi	unt o	of I	Ead	ch Re	eceip	ot this	s Perioo 76	.92	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Dev			Mer	no	lte	em					
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 230.76	P/	/R D	eduo	ctic	on ((\$38.4	46 B	i-Wee	ekly)		
B.	Full Name of Individual (Last, First, Middle Initial) (HILL, DAVID, , ,	or Full O	rgar	ization Name		Date	of I	Red	ceij	pt					
	Mailing Address 1800 RIDGE AVENUE UNIT 303					M 03		/		31	/	Y	2021	Y	
	City SEVANSTON	State IL		Zip Code 60201-5980					-				2656122 s Period		
	FEC ID number of contributing federal political committee.						_	_	,			y	76	.92	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Gen Counsel Mgr			Mer	no	lte	em					
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 230.76	P/	'R De	educ	ctio	on (\$38.4	16 Bi	i-Wee	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial) o	or Full O	rgar	nization Name		Date	of I	Red	ceij	pt					
	Mailing Address 20840 SAWMILL ROAD					[™] 03	3	/	L	31	/	L	2021 Y		
	City S JORDAN	State MN		Zip Code 55352-9633									275612		
	FFC ID number of contributing					Amol			Ead	CH RE	eceit		s Perioo 192	_	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt			Mer	no	lte	əm					
	Dessint For			r-to-Date ▼ 576.90		/R D	edu	ctic	on ((\$96.′	15 B	i-We	ekly)		
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SCHEDULE A (FEC Form 3X) - DEAEIDTA

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116	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a 13		11b 14	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the p		oose of		contribu	tions			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)									
	Full Name of Individual (Last, First, Middle Initia HAUSCHILDT, TODD, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt						
	Mailing Address 111 4TH AVE N UNIT 703				03 / D D / Y Y Y Y 2021								
	City MINNEAPOLIS	State MN	Zip Code 55401-1538		Transaction ID : PR2638114761223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>		-	і - др.	76.	92			
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia ZEGLINSKI, MICHAEL, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 1 TRIMONT LANE #610A City	State	Zip Code		M M 03	/	D D D 31	JL	y y 2021				
	PITTSBURGH	PA	15211-1206				-		70186122 iis Period	3			
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80]	P/R Dedu	uctic	on (\$192	2.30 Bi-W	/eekly)				
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 85 LITTLE POND RD				03 ^M	/	31	/ Y	ү ү 2021	Y			
	City NORTHBOROUGH	State MA	Zip Code 01532-1686						70836122 iis Period	3			
	FEC ID number of contributing federal political committee.	С					,	. ,	384.	60			
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Clnt Relationship		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
S	JBTOTAL of Receipts This Page (optional)		••••••	•			,	. ,	846.	12			
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×			11b	11c	12					
Any information copied from such Reports and	d Statements ma	ay not be sold or used by any p		13 r the p	Jurp	14 bose of	15 soliciting	16 contribu	17 tions				
or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle SMITH, ANTHONY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1 ROCKAWAY AVE				03 / D D / Y Y Y Y 2021									
City MARBLEHEAD	State MA	Zip Code 01945-1726		Transaction ID : PR2639746261223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C					7		76.	92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt		Me	emo	Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle WIGGIN, MATTHEW, , ,	Initial) or Full C	rganization Name	Di	ate of	Re	ceipt							
Mailing Address 6 MIDDLEBROOK RD				03	/	D 10 31) / Y	y y 2021	Y				
City WEST HARTFORD	State CT	Zip Code 06119-1014				-		75936122	3				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	10	Me	emo	Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R	t Dedu	ictic	on (\$57.	69 Bi-We	eekly)					
Full Name of Individual (Last, First, Middle C. ZUCCO, BETHANY, , ,	Initial) or Full C	rganization Name	Di	ate of	Re	ceipt							
Mailing Address 5212 JAMES AVE S				03	/	31) / Y	y y 2021	Y				
City MINNEAPOLIS	State MN	Zip Code 55419-1137				-		76006122 nis Period	3				
FEC ID number of contributing federal political committee.	С					,	 ,	384.	60				
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Mktg		Me	emo	Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/F	R Dedu	uctio	on (\$19	2.30 Bi-V	Veekly)					
SUBTOTAL of Receipts This Page (optional)						,	.,	576.	90				
TOTAL This Period (last page this line numb	er only)					-							

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle FLEMING, SUSAN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2016 N HOWE ST UNIT 1S			03 31 / Y Y Y Y Y 2021						
City CHICAGO	State IL	Zip Code 60614-4414	Transaction ID : PR2639773761223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. DUTTA, SUMIT, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1112 W WRIGHTWOOD A			03 / D D / Y Y Y Y 2021						
City CHICAGO	State IL	Zip Code 60614-1315	Transaction ID : PR2639773861223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	ů l								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Seg Chief Med Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle NELSON, ELLEN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 11882 TILDEN PLACE	State	Zip Code	03 31 2021						
WELLINGTON	FL	33414-6056	Transaction ID : PR2639795361223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc Receipt For:	VP	upation (for Individual) Clnt Svc Acct Mgmt	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line numb	er only)								

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)								
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	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a			SOLICIT COL		DULIONS		1 commu	ee.			
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle Initial) or A. SMITH, DELYLE, , ,			rganization Name		Date of	f Re	eceipt						
	Mailing Address PO BOX 447				м м 03	/	D 31		y y 2021	Y			
	City MT PROSPECT	State IL	Zip Code 60056-0447						80156122 iis Period	3			
	FEC ID number of contributing federal political committee.	С						-	76.9	92			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology		M	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	1	P/R Deduction (\$38.46 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Ini WEBER, ALISSA, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 10633 NW 74TH PLACE				03 / D D / Y Y Y Y 03 31 2021								
	City JOHNSTON	State Zip Code IA 50131-2342							16106122 : his Period	3			
	FEC ID number of contributing federal political committee.	°						115.38					
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Fin			Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14]	P/R Deduction (\$57.69 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Ini STOW, CHRISTINA, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 4709 ALTON PL NW		7.0		03 ^M		31		үүү 2021				
	City WASHINGTON	State DC	Zip Code 20016-2041						46646122 iis Period	3			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y		384.6	60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Public Affairs		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	1	P/R Ded	lucti	on (\$19	2.30 Bi-V	Veekly)				
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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. ESTESS, SHARON, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 128 ASHBROOKE TRAIL			03 31 2021							
City	State	Zip Code	Transaction ID : PR2640876561223							
MADISON	MS	39110-6855	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	VP	Gen Mgmt								
Receipt For:	Aggregate	Year-to-Date V								
Other (specify)		230.76	P/R Deduction (\$38.46 Bi-Weekly)							
		Apr Apr An	·							
Full Name of Individual (Last, First, Middle B. METKO, SARA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 23665 HIGHVIEW LANE	1-		03 / D D / Y Y Y Y 03 31 2021							
City LAKEVILLE	State MN	Zip Code	Transaction ID : PR2640877361223							
	_	55044-6025	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻	1							
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. ADVANI, PROTIMA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 7618 BRITTANY PARC CT			03 / D D / Y Y Y Y 03 31 2021							
	State VA	Zip Code	Transaction ID : PR2642024161223							
FALLS CHURCH	VA	22043-2907	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Rsch	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			538.44							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

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			Use separate schedule(s)			(check only one)						
	EMIZED RECEIPTS			each category of the tailed Summary Page	>	1 1a		11b	11c		12	
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	for commercial purposes, other than using the n	ame and a	ddress	s of any political committee	to so	Dicit cor	ntrib	utions	from su	ch c	ommitte	e.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jnite	edHealth Group PA	C)							
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BRUECKMAN, BRIAN, , ,						Date of	Re	ceipt				
	Mailing Address 261 BLACK NUGGET LN					03	/	D 31	D /		2021	Y
	City CLE ELUM	State WA	Z	ip Code 98922-3246					PR264 Receipt			3
	FEC ID number of contributing federal political committee.							,			384.6	0
	Name of Employer (for Individual) United HealthCare Services Inc		•	n (for Individual) Operations		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initia MARTIN, STEPHANIE, , ,	l) or Full O	rganiz	ation Name		Date of	Re	ceipt				
	Mailing Address 7002 N VIA DE MANANA					M M / D / Y						Y
	City SCOTTSDALE	State AZ				Transaction ID : PR2642818061223 Amount of Each Receipt this Period						i
	FEC ID number of contributing federal political committee.	С				153.84					4	
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) PS Market VP SIs AM			_	M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.52			P/R Deduction (\$76.92 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganiz	ation Name		Date of	Re	ceipt				
	Mailing Address 4825 PENN AVE S	-				03	/	D 31			2021	Y
	City MINNEAPOLIS	State MN		ip Code 55419-5258					: PR264 Receipt			3
	FEC ID number of contributing federal political committee.	С						,	. ,		76.9	2
	Name of Employer (for Individual) United HealthCare Services Inc		upation of of St	n (for Individual) aff		M	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.76				P/R Deduction (\$38.46 Bi-Weekly)						
s	JBTOTAL of Receipts This Page (optional)			•••••							615.3	6
т	OTAL This Period (last page this line number on	ly)						,			1 4	

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FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc VP Govt Affs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 576.90 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City State Zip Code MIDDLETON MA 01949-1669	13 14 15 16 17 for the purpose of soliciting contributions					
or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FOX, ELIZABETH, , , Mailing Address 1021 NORTH GARFIELD STREET #308 City ARLINGTON VA 22201-2559 FEC ID number of contributing federal political committee. Name of Employer (for Individual) United HealthCare Services Inc Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City MIDDLETON MIDDLETON MIDDLETON Maining Address 5 OGDEN LANE	Date of Receipt					
UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FOX, ELIZABETH, , , Mailing Address 1021 NORTH GARFIELD STREET #308 City State ARLINGTON FEC ID number of contributing federal political committee. Name of Employer (for Individual) United HealthCare Services Inc Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City State Mailing Address 5 OGDEN LANE	03 / D D / Y Y Y Y 03 31 2021					
A. FOX, ELIZABETH, , , Mailing Address 1021 NORTH GARFIELD STREET #308 City ARLINGTON FEC ID number of contributing federal political committee. Name of Employer (for Individual) United HealthCare Services Inc Name of Employer (for Individual) United HealthCare Services Inc Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City MIDDLETON MA 01949-1669	03 / D D / Y Y Y Y 03 31 2021					
#308 City State Zip Code ARLINGTON VA 22201-2559 FEC ID number of contributing C federal political committee. C Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc VP Govt Affs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 576.90 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City State Zip Code MIDDLETON MA 01949-1669	03 31 2021					
ARLINGTON VA 22201-2559 FEC ID number of contributing federal political committee. C C Name of Employer (for Individual) Occupation (for Individual) VP Govt Affs United HealthCare Services Inc VP Govt Affs VP Govt Affs Receipt For: Aggregate Year-to-Date ▼ 576.90 Primary General 576.90 576.90 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City State Zip Code 01949-1669	Transaction ID · PP26/2832061223					
FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc VP Govt Affs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 576.90 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City State Zip Code MIDDLETON MA 01949-1669						
federal political committee. Image: Committee of the service of	Amount of Each Receipt this Period					
United HealthCare Services Inc VP Govt Affs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 576.90 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City State MIDDLETON	192.30					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 576.90 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City State MIDDLETON	Memo Item					
B. CRESTA, BRIAN, , , Mailing Address 5 OGDEN LANE City MIDDLETON State Zip Code MA 01949-1669	P/R Deduction (\$215.00 Bi-Weekly)					
City State Zip Code MIDDLETON MA 01949-1669	Date of Receipt					
MIDDLETON MA 01949-1669						
FEO ID south as of a solution	Transaction ID : PR2642837561223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	76.92					
Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncDir Mktg Bus Dev	Memo Item					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 230.76	/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RUDOLPH, CLAYTON, , ,	Date of Receipt					
Mailing Address 4937 RUSSELL AVENUE SOUTH	M M / D D / Y Y Y Y 03 31 2021					
City State Zip Code MINNEAPOLIS MN 55410-1916	Transaction ID : PR2643199361223 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	192.30					
Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncM A VP	Mama Itam					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 576.90	Memo Item					
SUBTOTAL of Receipts This Page (optional)	P/R Deduction (\$96.15 Bi-Weekly)					

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle CRAGLE, STEVE, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6604 MOHAWK TRAIL			03 31 Y Y Y Y Y 2021						
City EDINA	State MN	Zip Code 55439-1030	Transaction ID : PR2643200661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. NEELY, MARC, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1159 BUFFALO RIDGE RD			03 / D D / Y Y Y Y Y 2021						
City CASTLE PINES	State CO	Zip Code 80108-8190	Transaction ID : PR2643203161223						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCKOY, PHILIP, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 927 LINCOLN AVE			03 / D D / Y Y Y Y 2021						
City SAINT PAUL	State MN	Zip Code 55105-3149	Transaction ID : PR2644651661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp CIO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1153.80						
TOTAL This Period (last page this line number	er 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						
Any information copied from such Reports and									
or for commercial purposes, other than using t	ne name and a	duress of any political committee	to solicit contributions from such comm	ittee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	NC)						
Full Name of Individual (Last, First, Middle A. ZIRKELBACH, ANGELA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 916 G STREET NW APT #301			03 / D D / Y Y Y 2021	Y					
City WASHINGTON	State DC	Zip Code 20001-4573	Transaction ID : PR26446602612 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		11	5.38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CHAPMAN, GREGORY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1724 SECOND STREET	1-:		03 / D D / Y Y Y Y 03 31 2021						
City NEW ORLEANS	State LA	Zip Code 70113-1632	Transaction ID : PR26451030612						
	_	10113-1032	Amount of Each Receipt this Peric	a					
FEC ID number of contributing federal political committee.	C		100.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		300.00	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MISTRY, RASHMITA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4037 RALEIGH AVE S			03 [/] 31 [/] 2021						
City ST LOUIS PARK	State MN	Zip Code 55416-2921	Transaction ID : PR26451691612 Amount of Each Receipt this Period	-					
FEC ID number of contributing federal political committee.	С			4.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			59	9.98					
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	aleu PAC (I	United realth Group P/	чС <i>)</i>						
Full Name of Individual (Last, First, Middle MAHRT, JONATHAN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2785 DIVISION STREET			03 31 Y Y Y Y Y 2021						
City SAINT PAUL	State MN	Zip Code 55109-1676	Transaction ID : PR2645176961223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment COO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. PRICE, CASSANDRA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 7903 S 193 AVENUE			03 / D D / Y Y Y Y 03 31 2021						
City GRETNA	State NE	Zip Code 68028-5017	Transaction ID : PR2646263661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. HOFFMAN, SHERRI, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 3409 DEEP WILLOW AVE	NUE		M M / D D / Y						
City PIKESVILLE	State MD	Zip Code 21208-3116	Transaction ID : PR2646294661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			538.44						
TOTAL This Period (last page this line numb	er only)								

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ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	(check only one)							
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	y information copied from such Reports and S											
or	for commercial purposes, other than using the	name and a	address of any political committee	e to so	olicit cor	ntrib	utions f	from such	n committ	ee.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	NC)								
A.	Full Name of Individual (Last, First, Middle Init STANKIEWICZ, DENNIS, , ,	tial) or Full C	Organization Name		Date of	Re	ceipt					
	Mailing Address 17761 WEAVER LAKE DRIVE				^M 03	1	31) / Y	y y 2021	Y		
	City MAPLE GROVE	State MN	Zip Code 55311-1328	_				PR26463 Receipt th	30406122 is Period	3		
	FEC ID number of contributing federal political committee.	С			<u> </u>				384.6	50		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor		M	emc	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Init SWENSSON, CHARLES, , ,	tial) or Full C	Organization Name		Date of	Re	ceipt					
	Mailing Address 18153 66TH PLACE N					03 / D D / Y Y Y Y Y Y 2021						
	City MAPLE GROVE	State MN	Zip Code 55311-4590						0396122	3		
	FEC ID number of contributing	f contribution				to t	Each H	Receipt th				
	federal political committee.	C			384.60							
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Mktg			Memo Item							
	Receipt For:	Aggregate										
	Other (specify) ▼		, 1153,80		P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init ROSENHAUS, MORGANNE, , ,	tial) or Full C	organization Name		Date of	Re	ceipt					
	Mailing Address 724 FARRAGUT STREET NV	V			03	/	31		y y 2021	Y		
	City WASHINGTON	State DC	Zip Code 20011-4012	-				PR26984 Receipt th	10986122 is Period	3		
	FEC ID number of contributing federal political committee.	С					,		115.:	38		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14		P/R Ded	ucti	on (\$57	.69 Bi-W€	eekly)			
s	UBTOTAL of Receipts This Page (optional)						, .	. ,	884.5	58		
Г	OTAL This Period (last page this line number	only)		-	<u> </u>							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)		_								
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name								
A. ZENICK, GEOFFREY, , ,			Date of Receipt							
Mailing Address 7714 TWISTED OAKS CIR			03 31 / Y Y Y Y 03 2021							
City DALLAS	State TX	Zip Code	Transaction ID : PR2698410861223							
		75231-4711	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Optum Services, Inc	SVF	P Sales								
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General		230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Other (specify) V		7	1							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name								
B. GROSSMAN, BEVERLY, , ,			Date of Receipt							
Mailing Address 5 BROOKSIDE AVE			03 / D D / Y Y Y Y 2021							
City	State	Zip Code	Transaction ID : PR2699179861223							
MENANDS	NY	12204-2301	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	-							
Primary General	, iggi oguto		P/R Deduction (\$96.15 Bi-Weekly)							
Other (specify) v		, 576.90								
Full Name of Individual (Last, First, Middle I C. DOWLING, MELODY, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 14205 INDEPENDENCE Co	OURT		M = M / D = D / Y = Y = Y							
0.4	Otata		03 31 2021							
City BASEHOR	State KS	Zip Code 66007-5203	Transaction ID : PR2699182561223							
			Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Dir	Med Clin Ops								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		230.76	P/R Deduction (\$38.46 Bi-Weekly)							
		Aga Aga Aga Aga	-							
SUBTOTAL of Receipts This Page (optional)			346.14							
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

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(check only one)

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TEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 11						
	y information copied from such Reports and Stat for commercial purposes, other than using the n									
\setminus	NAME OF COMMITTEE (In Full)									
/	UnitedHealth Group Incorporated			.C)						
۹.	Full Name of Individual (Last, First, Middle Initia AHLSTROM, ALEXIS, , ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address 3421 OAKWOOD TERRACE			03 / D D / Y Y Y Y 2021						
	City	State DC	Zip Code	Transaction ID : PR2699187161223						
	WASHINGTON		20010-1819	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
	Pagaint For:		Year-to-Date ▼	_						
	Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
3.	Full Name of Individual (Last, First, Middle Initia ZHOU, JINGXIN, , ,	l) or Full O	Organization Name	Date of Receipt						
C M F	Mailing Address 12011 FAIRVIEW CT			03 31 2021						
	City	State	Zip Code	Transaction ID : PR2699187861223						
	MINNETONKA	MN	55343-4516	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	76.92								
	Name of Employer (for Individual) Optum Services, Inc	Occi Dir	upation (for Individual) Fin	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
).	Full Name of Individual (Last, First, Middle Initia GALIMI, GAVIN, , ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address 410 S JUANITA AVENUE			03 / D D / Y Y Y Y 2021						
	City	State	Zip Code	Transaction ID : PR2700913161223						
	REDONDO BEACH	CA	90277-3824	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		123.06						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 369.18	P/R Deduction (\$61.53 Bi-Weekly)						
	UBTOTAL of Receipts This Page (optional)		F	584.58						

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I WAYLAND, CHARLES, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7615 SWEETBRIAR RD			03 31 2021						
City RICHMOND	State VA	Zip Code 23229-6619	Transaction ID : PR2700924661223 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. MCSWEENEY, ERIN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1128 EDINGTON PLACE			03 / D D / Y Y Y Y 2021						
	State FL	Zip Code	Transaction ID : PR2701818061223						
MARCO ISLAND		34145-2006	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Staff - UHG CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. OCONNELL, DANIEL, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3325 W 18TH AVENUE			03 / D D / Y Y Y Y 2021						
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819661223						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			999.96						
TOTAL This Period (last page this line numbe	er only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using th											
NAME OF COMMITTEE (In Full)	unu d										
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle In BRUCE, JAMIE, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1433 POWDER DRIVE			03 31 Y Y Y Y 2021								
City O FALLON	State MO	Zip Code 63366-1398	Transaction ID : PR2701823061223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle II B. SPARKS, KEVIN, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 10681 S CEDAR NILES BLV			03 / D D / Y Y Y Y Y Y 2021								
City OLATHE	State KS	Zip Code 66061-7415	Transaction ID : PR2701825561223								
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		576.90	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In KRAMER, NANCY, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4672 BITTERN LANE			03 / D D / Y Y Y Y 2021								
City LEBANON	State OH	Zip Code 45036-7562	Transaction ID : PR2702501461223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc	Occ Dir F	upation (for Individual) RN	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		•	653.82								
TOTAL This Period (last page this line numbe	r only)										

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b 11c	12	_ 47						
Any information copied from such Reports and or for commercial purposes, other than using												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	.C)									
Full Name of Individual (Last, First, Middle A. MERZLICKER, CAREY, , ,	Initial) or Full C	rganization Name	Date of Re	ceipt								
Mailing Address 950 BENTLEY PARK CIRC)LE		03 / D D / Y Y Y Y Y 2021									
City O FALLON	State MO	Zip Code 63368-8022	Transaction ID : PR2703246961223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C			тт.	76.9	2						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo	Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. YOUNG, DAVID, , ,	Initial) or Full C	rganization Name	Date of Re	ceipt								
Mailing Address 654 CHISWELL CT			03	31 / Y	y 2021	Y						
City BRENTWOOD	State TN	Zip Code 37027-3109		on ID : PR27036 Each Receipt th								
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deductio	on (\$192.30 Bi-W	′eekly)							
Full Name of Individual (Last, First, Middle C. HOROHO, PATRICIA, , ,	Initial) or Full C	rganization Name	Date of Re	ceipt								
Mailing Address 335 MUIRFIELD LOOP			03 /	31	y y 2021							
City REUNION	State FL	Zip Code 34747-6409		ion ID : PR2704 ² Each Receipt th		5						
FEC ID number of contributing federal political committee.	C			, , ,	384.6	0						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo	Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)				, , , , , , , ,	846.1	2						
TOTAL This Period (last page this line numb	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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	WIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
or fo	information copied from such Reports and State r commercial purposes, other than using the na			rson for the purpose of soliciting contributions										
	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)										
	ull Name of Individual (Last, First, Middle Initial) DELANY, ANDREW, , ,) or Full C	Date of Receipt											
	ailing Address 209 GARLAND AVENUE			03 31 Y Y Y Y Y										
	ity DECATUR	State GA	Zip Code	Transaction ID : PR2704196361223										
	JECATUR	GA	30030-4940	Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	С		384.60										
	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item										
R	eceipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼	.99.09410	1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	ull Name of Individual (Last, First, Middle Initial)	Date of Receipt												
M	ailing Address 500 ADAMS AVENUE			03 31 2021										
	ity iLENCOE	State IL	Zip Code 60022-1865	Transaction ID : PR2705063461223 Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	С		384.60 Memo Item										
	ame of Employer (for Individual) ptum Services, Inc		upation (for Individual) s Segment CEO											
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	ull Name of Individual (Last, First, Middle Initial)) or Full C	Organization Name	Date of Receipt										
	ailing Address 3300 RILMAN RD			03 31 2021										
	ity	State	Zip Code	Transaction ID : PR2705063561223										
	TLANTA	GA	30327-1508	Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	s a l												
	ame of Employer (for Individual) ptum Services, Inc		upation (for Individual) ? Ops	Memo Item										
R [eceipt For: Primary General Other (specify)		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SU	BTOTAL of Receipts This Page (optional)			1153.80										
	TAL This Period (last page this line number onl													

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle BUNTEN, BRIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 401 TATLOW DR												
City COLUMBIA	State MO	Zip Code 65203-6130	Transaction ID : PR2705070561223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. SPADE, NATHAN, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1060 ELLIOTT LANE			03 / D D / Y Y Y Y 2021									
City YORK	State PA	Zip Code 17403-3421	Transaction ID : PR2705987061223									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)									
Full Name of Individual (Last, First, Middle BARBARO, PHILIP, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 670 ARBUTUS STREET			03 / D D / Y Y Y Y 2021									
City MIDDLETOWN	State CT	Zip Code 06457-7106	Transaction ID : PR2705988261223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		426.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) National Sales	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 733.68	P/R Deduction (\$213.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			695.22									
TOTAL This Period (last page this line numb	per only)											

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)		any pointed committee									
UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle KMIEC, ADAM, , ,	,	Organization Name	Date of Receipt								
Mailing Address 4736 PRAIRIE DUNES W	ΑY		Model Model <td< td=""></td<>								
City EAGAN	State MN	Zip Code 55123-2352									
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle BARTHOLET, DANIEL, , ,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 5918 VALEWOOD DRIVE			03 / D D / Y Y Y Y Y 2021								
City MINNETONKA	State MN	Zip Code 55345-6545	Transaction ID : PR2706451161223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		Allount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MULDOON, ALLISON, , ,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 2500 CLARENDON BLVD APT 129			M M / D D / Y Y Y Y 03 31 2021								
City ARLINGTON	State VA	Zip Code 22201-3835	Transaction ID : PR2706452761223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			961.50								
TOTAL This Period (last page this line numb	per only)										

Use separate schedule(s)

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							(check only one)							
	RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
	n copied from such Reports and Sta ial purposes, other than using the i					purp								
\	COMMITTEE (In Full)													
UnitedH	ealth Group Incorporated	d PAC (L	InitedHealth Group PA	AC)										
Full Name c A. MOORE,	f Individual (Last, First, Middle Initia KEVIN, , ,	al) or Full Or	ganization Name		Date of	Rec	ceipt							
Mailing Addr	ress 9405 EAGLE NEST LANE				03 / D D / Y Y Y Y 2021									
City MIDDLETO	N	State WI	Zip Code 53562-5647						1535612 is Period					
	ber of contributing cal committee.	C					,		158	.80				
United Healt	nployer (for Individual) hCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item							
Receipt For: Primar Other		Aggregate Y	Year-to-Date ▼ 411.27] P	P/R Deduction (\$229.00 Bi-Weekly)									
Full Name c B. HUNT, T	f Individual (Last, First, Middle Initia IMOTHY, , ,	al) or Full Or	ganization Name		Date of	Rec								
	ress 5594 MARSHALL HOUSE CT				03 / D D / Y Y Y Y 03 31 2021									
City BURKE		State VA	Zip Code 22015-2141	-					140612					
FEC ID num	ber of contributing cal committee.	С			Amount of Each Receipt this Period									
Name of En Optum Servi	nployer (for Individual) ces, Inc		pation (for Individual) Gen Mgmt		Memo Item									
Receipt For: Primar Other		Aggregate	Year-to-Date ▼ , 230.76	P	/R Dedu	uctio	n (\$38.4	l6 Bi-We	ekly)					
	f Individual (Last, First, Middle Initia ERG, EDWARD, , ,	al) or Full Or	ganization Name		Date of	Rec	eipt							
	ress 8625 APPLETON COURT				03	1	D D D 31	/ Y	y y 2021	Y				
City ANNANDAL	E	State VA	Zip Code 22003-3806						5148612 is Period					
	ber of contributing cal committee.	С					9	,	76	5.92				
Name of Employer (for Individual) Optum Services, Inc			pation (for Individual) ion CEO		Me	emo	ltem							
Receipt For: Primar Other		Year-to-Date ▼ 230.76		P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of	f Receipts This Page (optional)			•			9		312	.64				
TOTAL This F	Period (last page this line number o	nly)	••••••	•			,							

SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)			(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×			11b	11c	12					
Any information copied from such Reports and			erson fo										
or for commercial purposes, other than using t	he name and a	ddress of any political committee	e to solic	cit con	itrib	utions	from suc	h commit	tee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle ERICKSON, ELIZABETH, , ,	Initial) or Full C	organization Name	Da	ate of									
Mailing Address 5301 CLINTON AVENUE			03 31 Y Y Y Y 2021										
City MINNEAPOLIS	State MN	Zip Code 55419-1427		Transaction ID : PR2740516161223 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C								.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P, Industry & Ntwk Rel		Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle DELANEY, KEVIN, , ,	Initial) or Full C	organization Name	Da	ate of	Re	ceipt							
Mailing Address 2876 GENEVA ST				03	/	D 1							
City DENVER	State CO	Zip Code 80238-3035				-		75926122 his Perioc	-				
FEC ID number of contributing federal political committee.	C					y		76	.92				
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Fin				Item							
Receipt For:	Aggregate	Year-to-Date ▼		-									
Other (specify) ▼		230.76	P/R	Dedu	ıctic	on (\$38	.46 Bi-W	eekly)					
Full Name of Individual (Last, First, Middle PONS, NATALIE , , ,	Initial) or Full C	organization Name	Da	ate of	Re	ceipt							
Mailing Address 3209 GALLERIA UNIT 803 City	State	Zip Code		03	/	31		2021					
EDINA	MN	55435-2547						7619612 his Perioc					
FEC ID number of contributing federal political committee.	С		ļĘ	_		y .	. ,	384	.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment Gen Counsel		Memo Item									
Receipt For: Primary General Other (specify)	Primary General					P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).						,		846	.12				
TOTAL This Period (last page this line number	er only)												

Use separate schedule(s)

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
or	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions										
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) FEHR, STEPHANIE, , ,	or Full O	rganization Name	Date of Receipt										
	Mailing Address 6601 BLACKFOOT PASS	0.1	7.0.1											
	City EDINA	State MN	Zip Code 55439-1103	Transaction ID : PR2748020561223										
		С		Amount of Each Receipt this Period 384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item										
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) PROCHNO, MICHAEL, , ,	Date of Receipt												
	Mailing Address 4640 ST JAMES GATE			M M M M M Y										
	City EXCELSIOR	State MN	Zip Code 55331-9397											
	FEC ID number of contributing federal political committee.	С		76.92 Memo Item										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt											
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) WEISS, RACHEL, , ,	or Full O	rganization Name	Date of Receipt										
	Mailing Address 38 ADAMS STREET NW			03 / D D / Y Y Y Y 2021										
	City WASHINGTON	State DC	Zip Code 20001-1026	Transaction ID : PR2749722861223 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		76.92										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			538.44										
т	OTAL This Period (last page this line number only	/)	•	· · · · · · · · · · · · · · · · · · ·										

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
> UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name										
A. SEVERANCE, DAVID, , ,			Date of Receipt									
Mailing Address 2160 N MARION ST			03 / D D / Y Y Y Y 2021									
City DENVER	State CO	Zip Code 80205-5245	Transaction ID : PR2750288161223									
			Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc	Sr N	/led Dir										
Receipt For:	Aggregate	Year-to-Date ▼	D/D Deduction (*20.40 Di Maeluk)									
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)									
			-									
Full Name of Individual (Last, First, Middle B. ORIE, TIMOTHY, , ,	Date of Receipt											
Mailing Address 23 BISHOP LANE												
		1	03 31 2021									
City	State MA	Zip Code	Transaction ID : PR2754244161223									
		01776-1701	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name	-									
C. MUSSLEWHITE, ROBERT, , ,			Date of Receipt									
Mailing Address 3033 UNIVERSITY TERR	ACE NW		03 31 2021									
City	State	Zip Code	Transaction ID : PR2754659961223									
WASHINGTON	DC	20016-3462	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item									
Optum Services, Inc	Bus	Segment CEO										
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)									
Other (specify)		1153.80	F/R Deduction (\$192.50 Di-weekly)									
SUBTOTAL of Receipts This Page (optional)		846.12									
TOTAL This Period (last page this line numb												

Use separate schedule(s)

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TEMIZED RECEIPTS		Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle SIMON, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1388 DIAMOND COURT			03 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
City PITTSBURGH	State PA	Zip Code 15241-1220										
		13241-1220	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
Optum Services, Inc	SVF	P Advisory Svc										
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
			1									
Full Name of Individual (Last, First, Middle 3. KONTOR, JOHN , , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 123A SPA VIEW AVE			03 31 2021									
City	State	Zip Code	Transaction ID : PR2754673661223									
ANNAPOLIS	MD	21401-3542	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svc	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		, 576.90	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. MAACK, JONATHAN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4480 DEXTER ST NW			03 31 2021									
City	State	Zip Code	Transaction ID : PR2754707461223									
WASHINGTON	DC	20007-1113	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			961.50									
TOTAL This Period (last page this line number	er only)											

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116	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	12	<u> </u>				
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
<u></u>	NAME OF COMMITTEE (In Full)													
$\left \right $	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)										
	Full Name of Individual (Last, First, Middle Initia BOTHRA, SIDDHARTH, , ,	l) or Full Or	rganization Name		Date of Receipt									
	Mailing Address 17200 SE 45TH STREET			03 31 2021										
City Stat BELLEVUE WA			Zip Code 98006-6510		Transaction ID : PR2754720761223									
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops		Me	emc	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80		P/R Ded	uctio	on (\$19:	2.30 Bi-W	/eekly)					
	Full Name of Individual (Last, First, Middle Initia CHRISTY, MICHAEL, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 3024 FOUNTAIN WAY			03 / 31 / 2021 Transaction ID : PR2755315261223										
	City SHAKOPEE	State MN	Zip Code 55379-5424											
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Dev Mktg		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initia MAYER, SHANNON, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 13159 DANUBE LANE				03 ^M	/	31) / Y	y y 2021	Ŷ				
	City ROSEMOUNT	State MN	Zip Code 55068-4378					PR2755						
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1			.92				
Optum Services, Inc			upation (for Individual) Gen Mgmt		Me	emo	tem Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76		P/R Deduction (\$38.46 Bi-Weekly)									
SI	JBTOTAL of Receipts This Page (optional)		••••••				, .	. ,	653	.82				
т	OTAL This Period (last page this line number or	ıly)		-			-							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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	EWIZED RECEIPTS			or each category of the Detailed Summary Page	×	-	1a 2		11	- F	_	11c	12				
or	/ information copied from such Reports and State						the p			se of	sol						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (I	Uni	tedHealth Group P/	AC)												
۹.	Full Name of Individual (Last, First, Middle Initial) WEILER, KATHY, , ,	or Full C	Drgar	nization Name	[Date of Receipt											
	Mailing Address 1250 CANTON AVENUE				03 / D D / Y Y Y Y 03 31 2021 Transaction ID : PR2755347661223												
	City MILTON	State MA		Zip Code 02186-2414													
	FFC ID number of contributing			02100-2414	/	Amount of Each Receipt this Period 384.60											
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) gment CMO		Memo Item											
	Bassint For:			r-to-Date ▼ 1153.80	Р.	/R	Dedu	uctic	on	(\$192	2.30) Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CRAIG, RYAN, , ,							Date of Receipt									
	Mailing Address 696 WOODLAND HILL COURT						03	/	Ľ	31		/ Y	y y 2021	Y			
	City MEDINA	State MN		Zip Code 55340-2300	/	Transaction ID : PR2755534161223 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C				76.92											
	Name of Employer (for Individual) Jnited HealthCare Services Inc	Occupation (for Individual) Chief Talent Officer						Memo Item									
Ì	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 230.76	P/	P/R Deduction (\$38.46 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Initial) ABRAHAM, SANTIAGO, , ,	or Full C	Drgar	nization Name		Dat	te of	Re	cei	ipt							
	Mailing Address 2637 ARCOLA LANE						03 ^M	/	Ľ	31		/ Y	y y 2021	Y			
	City WAYZATA	State MN		Zip Code 55391-9703									521612				
		C				Amount of Each Receipt thi							384 s	_			
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) CIO			Me	emo) It	em							
Ì	Receipt For: A Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 1153.80	P	P/R Deduction (\$192.30 Bi-Weekly)											
รเ	JBTOTAL of Receipts This Page (optional)				•						Ì		846	.12			
тс	OTAL This Period (last page this line number only)										47.1					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EMIZED RECEIFTS		Detailed Summary Page	×	11a		11	- H	_	1c	12	
	y information copied from such Reports and State for commercial purposes, other than using the nar							se of		citing		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I								Jiii	50011	0011111	
<u> </u>	Full Name of Individual (Last, First, Middle Initial) CHA, STEPHEN, , ,	or Full O	Organization Name		Date of	Re	cei	ipt				
	Mailing Address 1740 POTOMAC AVENUE SOUT	HEAST			м м 03	1		31	/	Y	ү ү 2021	Y
	City WASHINGTON	State DC	Zip Code 20003-3135	A			-				673612 s Perio	-
	FEC ID number of contributing federal political committee.	C					,			y	384	.60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir/CMO		Me	emo) Ite	em				
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Year-to-Date ▼ 1153.80	P/	R Ded	uctic	on	(\$192	2.30	Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initial) DUPLECHIEN, RITCHIE, , ,	or Full O	Organization Name		Date of	Re	cei	ipt				
	Mailing Address 617 CHASE TREE ST				м м 03	/	Ľ	31	/	Y	y y 2021	Y
	City LAS VEGAS	State NV	Zip Code 89144-4502								2 98612 s Perio	
	FEC ID number of contributing federal political committee.	C					,			,	76	.92
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Mktg		Me	emo) Ite	em				
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 230.76	P/I	R Dedi	uctic	on ((\$38.4	46 B	i-Wee	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial) KRAUTKRAMER, MITCHELL, , ,	or Full O	Organization Name		Date of	Re	cei	ipt				
	Mailing Address 8729 COTTONWOOD LANE				^M 03		L	31		L	y y 2021	_
	City EDEN PRAIRIE	State MN	Zip Code 55347-2216	A			-				957612 S Perio	-
	FEC ID number of contributing federal political committee.	C				_	y			,	76	.92
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir N	upation (for Individual) M A		M	emo	o Ite	em				
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 230.76	P/	R Ded	uctio	on	(\$38.4	46 B	si-Wee	ekly)	
s	UBTOTAL of Receipts This Page (optional)						,			,	538	.44
т	OTAL This Period (last page this line number only)					_					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	ιC)								
Full Name of Individual (Last, First, Middle Ini A. ASHENHURST, KARLA, , ,	itial) or Full C	organization Name	Date of Receipt								
Mailing Address 295 N ELM GROVE ROAD UNIT C	Ototo	Zie Oede	03 / D D / Y Y Y Y Y 03 31 2021								
City BROOKFIELD	State WI	Zip Code 53005-6212	Transaction ID : PR2756173661223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In MASONER, AUDREY, , ,	itial) or Full C	organization Name	Date of Receipt								
Mailing Address 15400 MAPLE STREET			03 31 2021								
City OVERLAND PARK	State KS	Zip Code 66223-3262	Transaction ID : PR2756359861223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In C. HERMELINGIII, THEODORE, , ,	itial) or Full C	organization Name	Date of Receipt								
Mailing Address 117 5TH STREET			03 / D D / Y Y Y Y 2021								
City WILMETTE	State IL	Zip Code 60091-3405	Transaction ID : PR2756521661223								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify)	1	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			576.90								
TOTAL This Period (last page this line number	only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

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IT.			Use separate schedule(s)	(check only one)										
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a ☐ 11b ☐ 11c ☐ 12										
	y information copied from such Reports and Sta													
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	name and a	address of any political committee	to solicit contributions from such committee.										
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia SATTERWHITE, ERIN, , ,	l) or Full O	Drganization Name	Date of Receipt										
	Mailing Address 2209 PARIS AVENUE N			03 / D D / Y Y Y Y 2021										
	City WEST LAKELAND	State MN	Zip Code 55082-1357	Transaction ID : PR2757435761223 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		76.92										
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Gen Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia MALLEY, KENNETH, , ,	l) or Full O	Drganization Name	Date of Receipt										
	Mailing Address 764 WEST SADDLE RIVER RO	AD		03 31 Y Y Y Y 2021										
	City HO HO KUS	State NJ	Zip Code 07423-1645	Transaction ID : PR2757436661223 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) /P Gen Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initia AZAM, MISHAEL, , ,	l) or Full O	Drganization Name	Date of Receipt										
	Mailing Address 629 JEFFERSON AVENUE	-		03 / D D / Y Y Y Y 2021										
	City CHERRY HILL	State NJ	Zip Code 08002-3704	Transaction ID : PR2759343861223 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		77.00										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) ernal Affs Dir	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			538.52										
т	OTAL This Period (last page this line number or	ıly)												

Use separate schedule(s)

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		Use separate schedule(s)	(check on	ly one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b		12					
Any information copied from such Reports and											
or for commercial purposes, other than using t	ine name and a	lucress of any political committe	e lo solicit co	IOIJUUUIIJIII	is from su	cri committ	ee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle BROWN, KAROOM, , ,	Initial) or Full C	organization Name	Date o	f Receip	t						
Mailing Address 11711 SAVONA WAY			03 / D D / Y Y Y Y 03 31 2021								
City ORLANDO	State FL	Zip Code 32827-7267			D : PR275		3				
FEC ID number of contributing federal political committee.	С					384.	60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	M	lemo Itei	n						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Dec	luction (\$	\$192.30 Bi-	Weekly)					
Full Name of Individual (Last, First, Middle HUNT, BRITTNEY, , ,	Initial) or Full C	organization Name	Date o	f Receip	t						
Mailing Address 3360 MICANOPY TRAIL	1-		03	/ D	31	2021	Y				
City TALLAHASSEE	State FL	Zip Code 32312-3670			D : PR2759		3				
FEC ID number of contributing federal political committee.	С					76. ⁻	92				
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) External Affs Dir			m						
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		230.76	P/R Ded	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle SCHLAIFER, MARISSA, , ,	Initial) or Full C	organization Name	Date o	f Receip	t						
Mailing Address 1050 N STUART ST #400	State	Zin Code	03		31	2021					
City ARLINGTON	VA	Zip Code 22201-5727			D: PR275		3				
FEC ID number of contributing federal political committee.	С			. ,	,	384.	60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs		lemo Ite	m						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Dec	duction (S	\$192.30 Bi-	Weekly)					
SUBTOTAL of Receipts This Page (optional).				. ,	,	846.	12				
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12	Г	
	y information copied from such Reports and Star for commercial purposes, other than using the n									ibutio	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia DIFRONZO, CHRISTINE, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 6 CRAIG LN				м м 03	/	31	Y / C	202 <i>°</i>	Y Y 1	
	City HINGHAM	State MA	Zip Code 02043-3411					PR2759 Receipt t			
	FEC ID number of contributing federal political committee.	С								76.92	
	Name of Employer (for Individual) Optum Services, Inc	Occu VP N	upation (for Individual) Mktg		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76		P/R Dedu	uctio	on (\$38	.46 Bi-W	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia KELLOGG, PETER, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 1515 JEFFERSON AVENUE	1			м м 03	/	31) / Y	y 2021]
	City NEW ORLEANS	State LA	Zip Code 70115-4120				-	PR2759 Receipt t			
	FEC ID number of contributing federal political committee.	С								76.92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.76	F	P/R Dedu	ıctic	on (\$38.	.46 Bi-W	eekly)		
С.	Full Name of Individual (Last, First, Middle Initia ROBERT, MICHAEL, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 79373 FITZGERALD CHURCH ROAD	State	Zin Oode		03	'	31		2021		
	City COVINGTON	LA	Zip Code 70435-7809					PR2759			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. y		76.92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli		Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76		P/R Dedi	uctio	on (\$38	.46 Bi-W	'eekly)		
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
\setminus	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)								
Α.	Full Name of Individual (Last, First, Middle Initi DECKER, WYATT, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1482 HUNTER DRIVE			03 / D D / Y Y Y Y 2021								
	City WAYZATA	State MN	Zip Code 55391-9658	Transaction ID : PR2760134061223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initi GRUHN, GINA, , ,	ial) or Full O	organization Name	Date of Receipt								
	Mailing Address 13 WEATHER VANE DRIVE			03 / D D / Y Y Y Y 03 31 2021								
	City	State	Zip Code	Transaction ID : PR2760769461223								
	MORRISTOWN	NJ	07960-4758	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153,80	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initi MASTEN, DALE, , ,	ial) or Full O	organization Name	Date of Receipt								
	Mailing Address 9845 BENNINGTON DRIVE			03 / D D / Y Y Y Y 2021								
	City SHARONVILLE	State OH	Zip Code 45241-3619	Transaction ID : PR2760775861223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
	UBTOTAL of Receipts This Page (optional)			1153.80								

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 berson for the purpose of soliciting contributions te to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorport	ated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. DELMONICO, SUSAN, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 12 MULBERRY CIRCLE			03 31 Y Y Y Y Y 2021								
City JOHNSTON	State RI	Zip Code 02919-2519	Transaction ID : PR2760781761223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		230.76								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. GALLE, JOHN, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 5314 VALLARTA DRIVE			03 31 2021								
City	State MO	Zip Code	Transaction ID : PR2760798861223								
SAINT LOUIS	MO	63128-3516	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle	Initial) or Full C		-								
c. BARR, CHRISTY M, , ,			Date of Receipt								
Mailing Address 6348 CARRIAGE OAK W		1	03 / D D / Y Y Y Y 2021								
City LIBERTY TWP	State OH	Zip Code 45011-2763	Transaction ID : PR2760819661223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional))		384.60								
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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171			Use separate schedule(s)	(ch	neck only	y or	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	12	,	7
	y information copied from such Reports and Sta for commercial purposes, other than using the r									utions	7
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	(C)							
A.	Full Name of Individual (Last, First, Middle Initia CRAWFORD, KEVIN, , ,	ll) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 127 CHUZZLEWIT DOWN				03	1	31) / Y	y y 2021	Y	
	City BRENTWOOD	State TN	Zip Code 37027-7627					PR2760			
	FEC ID number of contributing federal political committee.	С							230).76]
	Name of Employer (for Individual) United HealthCare Services Inc		ıpation (for Individual) ırnal Affs Dir		Me	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.28		P/R Ded	uctio	on (\$11	5.38 Bi-V	Veekly)		
в.	Full Name of Individual (Last, First, Middle Initia VELASCO, JOEL, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 6352 31 PLACE NW ST	01-1-	7		03	/	31) / Y	2021	Ŷ	
	City WASHINGTON	State DC	Zip Code 20015-2358					PR27609			
	FEC ID number of contributing federal political committee.	C				. 01		Receipt th		u 1.60]
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Intl Relations		Me	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)		
с.	Full Name of Individual (Last, First, Middle Initia WINN, JOSEPH, , ,	ll) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 4401 GREGG ROAD				03 ^M	1	31		y y 2021	Ŷ	
	City BROOKEVILLE	State MD	Zip Code 20833-1033					PR2760			
	FEC ID number of contributing federal political committee.	С					, .		269	9.22]
	Name of Employer (for Individual) United HealthCare Services Inc		ıpation (for Individual) rnal Affs Dir		M	emo	tem Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.66		P/R Ded	ucti	on (\$13	4.61 Bi-V	Veekly)		
s	UBTOTAL of Receipts This Page (optional)		••••••				, .	. ,	884	1.58]
т	OTAL This Period (last page this line number or	וy)	••••••	-			-				1

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle OBRIEN, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 11017 CAVELL CIR			03 31 Y Y Y Y Y						
City BLOOMINGTON	State MN	Zip Code 55438-2284	Transaction ID : PR2761138261223						
		33430 2204	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		96.14						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Dir	Тах							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼		288.42	P/R Deduction (\$48.07 Bi-Weekly)						
			1						
Full Name of Individual (Last, First, Middle B. ARYA, RAJIV, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4 GALWAY ROAD			03 31 2021						
City	State	Zip Code	Transaction ID : PR2762648761223						
SKILLMAN	NJ	08558-1731	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director, Advisory Svcs	Memo Item						
Receipt For:		Year-to-Date ▼	—						
Primary General	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify) v		230.76							
Full Name of Individual (Last, First, Middle C. SONNIER, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 301 DEMONBREUN ST U	NIT 1805		M M / D D / Y Y Y Y 03 31 2021						
City	State	Zip Code	Transaction ID : PR2762649961223						
NASHVILLE	TN	37201-2248	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		230.76						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Dir I	Mktg Bus Dev							
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		692.28	P/R Deduction (\$115.38 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			403.82						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Any information copied from such Reports an or for commercial purposes, other than using	d Statomonte ma												
in property, enter that doing			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
Full Name of Individual (Last, First, Middle CLAYTON, JUSTIN, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 163 BRIER RIDGE DRIVE			03 31 / Y Y Y Y 2021										
City DURHAM	State NC	Zip Code 27703-0339	Transaction ID : PR2762749961223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		153.84										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)										
Full Name of Individual (Last, First, Middle WHITLOW, JENNIFER, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 2101 VIRGINIA AVE			03 / D D / Y Y Y Y 2021										
City MCLEAN	State VA	Zip Code 22101-4942	Transaction ID : PR2762750961223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D Untd Advc HIth Eqty & SVP	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle . TARVESTAD, KATHERINE, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5095 KELSEY TERR	04-44	Zie Och	03 / D D / Y Y Y Y 2021										
City EDINA	State MN	Zip Code 55436-2717	Transaction ID : PR2762955961223 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)		•	923.04										

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	COMMITTEE (In Full)												
United	Health Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
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Mailing Ad	dress 6609 DOVRE DR				м м 03	/	D D D 31	/ Y	ү ү 2021	Y			
City EDINA		State MN	Zip Code 55436-1711						08056122				
	umber of contributing		33430-1711	_ A	Amount	of I	Each Re	eceipt th	iis Perioc	1			
	imber of contributing itical committee.	С					y		384	.60			
Name of E Optum Ser	Employer (for Individual) rvices, Inc		upation (for Individual) Innovation		Me	emo	Item						
Receipt Fo		Aggregate	Year-to-Date ▼ 1153.80	P/	'R Dedu	uctic	n (\$192	.30 Bi-V	/eekly)				
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Mailing Ad	dress 18505 6TH AVENUE N				м м 03	/	D D D 31	/ Y	y y 2021	Y			
City		State	Zip Code						7996122	-			
		MN	55447-3318		Amount	of I	Each Re	eceipt th	iis Perioc	1			
	imber of contributing litical committee.	С			_		y	-	384	.60			
	Employer (for Individual) IthCare Services Inc	Occu Dir N	upation (for Individual) M A		Me	emo	Item						
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Othe	ary General er (specify) ▼		1153.80	P/	R Dedu	ictio	n (\$192.	.30 Bi-W	/eekly)				
	of Individual (Last, First, Middle Initia , JENNIFER, , ,) or Full Oi	rganization Name		Date of	Ree	ceipt						
Mailing Ad	dress 3347 RIVER LANDINGS BLVD				03	/	D D D 31	/ Y	2021	Ŷ			
City HILLIARD	1	State OH	Zip Code 43026-7800				-		1803612 iis Perioc	-			
	umber of contributing itical committee.	С						,		.00			
	Employer (for Individual) althCare Services Inc		ipation (for Individual) rnal Affs Dir		Me	emo	ltem						
Receipt Fo		Aggregate	Year-to-Date ▼ 268.92	P/	/R Dedu	uctic	on (\$48.0	00 Bi-We	eekly)				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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			Detailed Summary Page	×			11b	-	11c		12	<u> </u>
	y information copied from such Reports and St for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)	name allu a	adioso of any political committee	.0 50			auor	10 11	Sin Su			
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)								
۹.	Full Name of Individual (Last, First, Middle Initi LEFF, ERIN, , ,	al) or Full O	rganization Name	[Date of	Re	ceip	t				
	Mailing Address 2633 WEST VIEWMONT WAY	WEST			м м 03	1		31	1	Y Y 2	021	Y
	City SEATTLE	State WA	Zip Code 98199-3018		Trans							3
	FEC ID number of contributing federal political committee.	С				U	,		, j		384.0	60
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? Clin Ops		Me	emc	lter	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P	/R Dedi	uctio	on (\$	192	.30 Bi-	Wee	kly)	
	Full Name of Individual (Last, First, Middle Initi FOLEY, BARBARA, , ,	al) or Full O	rganization Name		Date of	Re	ceip	t				
	Mailing Address 6260 BLACK FOX WAY				м м 03	1		о 31	/	Y Y 2	ү 021	Y
	City TALLAHASSEE	State FL	Zip Code 32312-4504	-	Trans:		-				-	3
	FEC ID number of contributing federal political committee.	С		_		-				92.3	30	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Me	emc	lter	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/	P/R Deduction (\$46.15 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initi RICHARDSON, GENEVRA, , ,	al) or Full O	rganization Name		Date of	Re	ceip	t				
	Mailing Address 3618 N 51ST PLACE				03	/	D	31	/		021	Y
	City PHOENIX	State AZ	Zip Code 85018-6158	-	Trans		-		PR277			3
	FEC ID number of contributing federal political committee.	С			_		y		,		384.	60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	lter	n				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P	/R Ded	ucti	on (\$	192	2.30 Bi-	Wee	kly)	
s	JBTOTAL of Receipts This Page (optional)		•••••				9		. ,		861.5	50

SCHEDULE A (FEC Form 3X) DEAEIDTA

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	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions								
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	.C)								
A.	Full Name of Individual (Last, First, Middle Initia HAUSMAN, ERIC, , ,	l) or Full Oi	rganization Name	Date of Receipt								
	Mailing Address 1617 WEST 25TH STREET											
City State MINNEAPOLIS MN			Zip Code 55405-2466	Transaction ID : PR2778612761223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia BAKER, OMAR, , ,	Date of Receipt										
	Mailing Address 505 WEST 19TH STREET MANHATTAN	01-1-	7- 0-1-	03 / D D / Y Y Y Y 2021								
	City NEW YORK	State NY	Zip Code 10011-2883	Transaction ID : PR2778986661223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Strat Intv & CMO HIth Svc	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia PIERINI, RYAN, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 3761 SAN YSIDRO WAY	03 / D D / Y Y Y Y 03 31 2021										
	City SACRAMENTO	State CA	Zip Code 95864-2866	Transaction ID : PR2778987361223 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	P/R Deduction (\$38.46 Bi-Weekly)								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76									
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ITEMIZED RECEIPTS		Use separate schedule(s)		(check only one)									
11		for each category of the Detailed Summary Page			× 11a		11b	11c	12				
Ar	y information copied from such Reports and S	Statements ma	ay not be sold or used by any pe	erson	13 for the	pur	14 pose of	15 soliciting	16 contribu	l 17 tions			
	for commercial purposes, other than using the												
\setminus	NAME OF COMMITTEE (In Full)	laite di la altia Onavia DA											
	UnitedHealth Group Incorporate	United Health Group PA	AC)										
V	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name												
Α.	DOCIMO, ANNE, , ,				Date of	Re	eceipt						
	Mailing Address 338 S 4TH STREET				M M 03	1	31	О / Ү	2021	Y			
	City	State Zip Code			Transaction ID : PR2779271861223								
	PHILADELPHIA	PA	19106-4217		Amount	t of	Each F	Receipt th	is Period				
	FEC ID number of contributing	С							384.	60			
	federal political committee.	U			<u></u>	-	-J	y-					
	Name of Employer (for Individual)	Occupation (for Individual)			M	emo	ltem						
	United HealthCare Services Inc	Mkt											
	Receipt For: Primary General	Aggregate				(040	0 00 D' M	, ,, ,					
	Other (specify) V			P/R Deduction (\$192.30 Bi-Weekly)									
R	Full Name of Individual (Last, First, Middle Ini JACKSON, KYLE, , ,	tial) or Full O	rganization Name		Date of	Re	ceint						
υ.	Mailing Address 3230 INDIAN HILLS DR			Date of Receipt									
						03 31 2021							
	City	State	Zip Code						23666122	3			
	MARIETTA	GA 30068-3250			Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) ⁄t Affs Dir	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼		P/R Deduction (\$57.69 Bi-Weekly)								
	Primary General	_	346.14	6									
	Other (specify) v												
C.	Full Name of Individual (Last, First, Middle Ini LEWIS, PATRICIA, , ,	itial) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 10823 ROCK RUN DRIVE				M = M / D = D / Y = Y = Y								
					03	Ι.	31		2021				
	City POTOMAC	State MD	Zip Code 20854-1749		Transaction ID : PR2782439361223 Amount of Each Receipt this Period								
	FEC ID number of contributing				Amoun		Laciir	ieceipt til		_			
	federal political committee.	C				_	y	y	384.	60			
	Name of Employer (for Individual)	ited HealthCare Services Inc EVP Human Capital				emo	ltem						
	United HealthCare Services Inc												
	Receipt For:	Aggregate Year-to-Date V											
	Other (specify)			P/R Deduction (\$192.30 Bi-Weekly)									
Γ	l				_	-			00.4	-0			
S	UBTOTAL of Receipts This Page (optional)		•	•			y		884.	58			
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle GHAZANFARIANTALEGHANI, AZIT	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name GHAZANFARIANTALEGHANI, AZITA, , ,									
Mailing Address 1039 MOUNTAIN AVE	01-1-	7. 0.4	03 / D D / Y Y Y Y 2021							
City BERKELEY HEIGHTS	State NJ	Zip Code 07922-2343	Transaction ID : PR2782602161223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) Optum Care, Inc.		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle ROMANOW, KATHLEEN, , ,	Date of Receipt 03 31 2021									
Mailing Address 6804 MARBURY ROAD										
City BETHESDA	State MD	Zip Code 20817-6052	Transaction ID : PR2782733061223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle PERRA, MATTHEW, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 3708 WASHINGTON STR	03 / D D / Y Y Y Y 2021									
City KENSINGTON	State MD	Zip Code 20895-3443	Transaction ID : PR2783257261223 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		653.82							
TOTAL This Period (last page this line numl	ber only)	•••••								

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		Use separate schedule(s)	(check only one)								
IIEWIIZED KEGEIF13		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. SABAL, PETER, , ,	Date of Receipt										
Mailing Address 6151 WILLOW ROCK ST			03 / D D / Y Y Y Y 03 31 2021								
City LAS VEGAS	State NV	Zip Code 89135-1482	Transaction ID : PR2783559961223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. OWEN, CHRISTOPHER, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name OWEN, CHRISTOPHER, , ,										
Mailing Address 29 CHAMPIONS LANE			03 31 Y Y Y Y Y 2021								
	State TX	Zip Code	Transaction ID : PR2786908661223								
		78257-1292	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item								
Receipt For:	Aggregate	Year-to-Date V	7								
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. CONWAY, PATRICK, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 190 WINDING RIVER RD	Mailing Address 190 WINDING RIVER RD										
City WELLESLEY	State MA	Zip Code 02482-7320	Transaction ID : PR2787875561223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Im Exec	P/R Deduction (\$192.30 Bi-Weekly)								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80									
SUBTOTAL of Receipts This Page (optional).			846.12								
TOTAL This Period (last page this line number	er only)										

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SCHEDULE A (FEC Form 3X) _____

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 person for the purpose of soliciting contributions te to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle CLARKE, LACEY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 15 MILO STREET			03 31 2021								
City HUDSON	State NY	Zip Code 12534-2722	Transaction ID : PR2789668261223 Amount of Each Receipt this Period 153.84								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)								
Full Name of Individual (Last, First, Middle SARGENT, PATRICK, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SARGENT, PATRICK, , ,										
Mailing Address 8493 SILVERVIEW CT	03 / D D / Y Y Y Y 2021										
City LORTON	State VA	Zip Code 22079-4404	Transaction ID : PR2790273061223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle BILLS, MATTHEW, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 18961 DEVONSHIRE ST			03 / D D / Y Y Y Y Y 03 31 2021								
City BEVERLY HILLS	State MI	Zip Code 48025-4031	Transaction ID : PR2790558761223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		96.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt	P/R Deduction (\$48.00 Bi-Weekly)								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00									
SUBTOTAL of Receipts This Page (optional)		634.44								
TOTAL This Period (last page this line numl	ber only)										

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	λC)								
Full Name of Individual (Last, First, Middle I A. HAMDORF, JON, , ,	Date of Receipt										
Mailing Address 17600 W 84TH STREET			M M / D D / Y Y Y Y 03 31 2021								
City LENEXA	State KS	Zip Code 66219-8062	Transaction ID : PR2791330861223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. POPEJOY, NANCY, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name POPEJOY, NANCY,										
Mailing Address 1680 MARSH HAWK CIRCL	.E		Date of Receipt 03 / 03 / 2021								
City CASTLE ROCK	State CO	Zip Code 80109-9594	Transaction ID : PR2791740861223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		184.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 553.80	P/R Deduction (\$92.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C. SMITH, TAMEEKA, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1605 PARK AVE	03 / D D / Y Y Y Y 03 31 2021										
City RICHMOND	State VA	Zip Code 23220-2908	Transaction ID : PR2791832961223 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		P/R Deduction (\$192.30 Bi-Weekly)								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80									
SUBTOTAL of Receipts This Page (optional)			684.58								
TOTAL This Period (last page this line numbe	r only)										

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ITEMIZED RECEIPTS		Use separate schedule(s)		(check only one)										
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12		17			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	y not be sold or used by any pe ddress of any political committee	erson fo	or the	pur ntrib	pose of	soliciting	g contri	ibutio	ns			
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MORSE, SARA, , ,					Date of Receipt								
	Mailing Address 6398 VALE STREET	1			03 / D D / Y Y Y Y 2021									
City State ALEXANDRIA VA			Zip Code 22312-1435	A	Transaction ID : PR2794473461223 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Govt Affs	Memo Item										
Boosint For:			Year-to-Date ▼ 1153.80	P/	P/R Deduction (\$192.30 Bi-Weekly)									
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	Mailing Address													
	City	State Zip Code			Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С												
	Name of Employer (for Individual)	Occupation (for Individual)			Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	regate Year-to-Date ▼											
<u></u> с.	Full Name of Individual (Last, First, Middle Initia	l) or Full Oi	rganization Name		Date o	f Re	ceint							
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