Image# 201710189075789981				PAGE 1 / 318
	EPORT OF R ND DISBURS Other Than An Author	EMENTS	Office	Use Only
1. NAME OF TYP COMMITTEE (in full)	e or print ▼	Example: If typing, type over the lines.	12FE4M5	
UnitedHealth Group Incor	porated PAC (United	Health Group PAC)		
ADDRESS (number and street)	01 Pennsylvania Ave, NW			
Check if different	uite 200			
reported. (ACC)	Vashington			
2. FEC IDENTIFICATION NUMB	ER V CITY		STATE A	ZIP CODE
C C00274431	3. IS TH REPO	· · · · · · · · · · · · · · · · · · ·	AMENDE (A)	D
<ul> <li><b>4. TYPE OF REPORT</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Report (Q1)</li> </ul>	b) Monthly Report Due On: Apr 20 (	M3) Jun 20 (M6)		(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE)	(C) 12-Day PRE-Election Report for the: Election or	Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day <b>POST</b> -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election or	M = M / D = D /	Y Y Y Y Y	in the State of
5. Covering Period	01 / Y Y Y Y 01 2017	through 09		2017
I certify that I have examined this R S Type or Print Name of Treasurer	eport and to the best of my Sherwood, Susan, , ,	knowledge and belief it is t	rue, correct and comp	lete.
Signature of Treasurer	Susan, , ,	[Electronically Filed]		18 / Y Y Y Y Y 2017
NOTE: Submission of false, erroneous	, or incomplete information ma	y subject the person signing	this Report to the pena	alties of 52 U.S.C. § 3010
Office Use Only			FE	C FORM 3X Rev. 05/2016

10/18/2017 11 : 34

x

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

### UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	eport Covering the Period: From: 09	M / D D / Y Y Y Y 01 2017 To	o: 09 / 0 / Y Y Y Y 30 2017
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		242591.24
	(b) Cash on Hand at Beginning of Reporting Period	728067.67	
	(c) Total Receipts (from Line 19)	127151.78	1136186.52
	<ul><li>(d) Subtotal (add Lines 6(b) and</li><li>6(c) for Column A and Lines</li><li>6(a) and 6(c) for Column B)</li></ul>	855219.45	1378777.76
7.	Total Disbursements (from Line 31)	222350.00	745908.31
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	632869.45	632869.45
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

#### For further information contact:

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

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

#### DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:	/ 01 / Y Y Y Y 2017 To:	09 / D D / Y Y Y Y 09 30 / 2017
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:	· · ·	
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	123801.31	979119.63
(ii) Unitemized	3350.47	148366.89
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	127151.78	1127486.52
	0.00	0.00
(b) Political Party Committees		
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	-737373-	4 4 4
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	127151.78	1127486.52
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	7500.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	1200.00
<ol> <li>Transfers from Non-Federal and Levin Funds</li> </ol>		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
Γ	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
) Total Dessints (add Lines 11(d)		
<ol> <li>Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))</li> </ol>	127151.78	1136186.52
1∠, 10, 14, 10, 10, 17, and 10(0))	01.101./0	1130100.32
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	127151.78	1136186.52

Page 3

I

### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A Total This Period           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           133000.00	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	0.00
0.00	0.00
0.00	0.00
133000.00	632000.00
0.00	
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
100.00	1308.31
0.00	0.00
* *	
0.00	0.00
100.00	1308.31
7 7 7	
89250.00	112600.00
4	
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
222350.00	745908.31
222350.00	745908.31

L

### DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Total Contributions (other than loans) (from Line 11(d), page 3)</li> </ol>	127151.78	1127486.52
<ol> <li>Total Contribution Refunds (from Line 28(d))</li> </ol>	100.00	1308.31
<ol> <li>Net Contributions (other than loans) (subtract Line 34 from Line 33)</li> </ol>	127051.78	1126178.21
<ol> <li>Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))</li> </ol>	0.00	0.00
<ol> <li>Offsets to Operating Expenditures (from Line 15, page 3)</li> </ol>	0.00	0.00
<ol> <li>Net Operating Expenditures (subtract Line 37 from Line 36)</li> </ol>	0.00	0.00

### SCHEDULE A (FEC Form 3X) EMIZED DECEIDTE

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

11	EMIZED RECEIPTS		for each category of the Detailed Summary Page											
	y information copied from such Reports and Sta for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	.C)										
<u> </u>	Full Name of Individual (Last, First, Middle Initia Alderman, Frank, , ,	al) or Full O	Date of Receipt											
	Mailing Address 7 Miramichi Trail			09 25 2017										
	City Morgantown	State WV	Zip Code 26508-2928	Transaction ID : 41345543										
	FEC ID number of contributing	C	20308-2928	Amount of Each Receipt this Period 5000.00										
	federal political committee.													
	Name of Employer (for Individual) MedExpress	Occi CEC	upation (for Individual) D	Memo Item										
	Receipt For:	Aggregate	Year-to-Date <b>V</b>											
	Other (specify) ▼		5000.00											
в.	Full Name of Individual (Last, First, Middle Initia BETCHLEY, ROBERT, , ,	al) or Full O	Organization Name	Date of Receipt										
	Mailing Address 3371 EMERALD VALLEY DRIV	Έ		09 / 09 / 2017										
	City	State WI	Zip Code	Transaction ID : 41443552										
		_	54650-8746	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		0.00										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1215.86	Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$1215.86										
<u> </u>	Full Name of Individual (Last, First, Middle Initian STREB, DEBORAH, , ,	al) or Full O	Organization Name	Date of Receipt										
	Mailing Address 2201 NORTH STAR ROAD			09 30 2017										
	City UPPER ARLINGTON	State OH	Zip Code 43221-3810	Transaction ID : PR1159794147240 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) Proj Mgmt	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)		••••••	5028.00										
Т	OTAL This Period (last page this line number o	nly)												

## Use separate schedule(s)

FOR LINE NUMBER:

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	CEIDTS		Use separate schedule(s)	(check onl	y one)	L						
ITEMIZED REC	JEIF I J		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c	12					
Any information copie	ed from such Reports and Sta	tements ma	y not be sold or used by any pe ddress of any political committee	erson for the	purpose of	15 soliciting	contributi	ions				
		I PAC (L	JnitedHealth Group PA	C)								
Full Name of Indiv A. WATSON, JAN	/idual (Last, First, Middle Initia IES, , ,	l) or Full Or	rganization Name	Date of	f Receipt							
Mailing Address 6	520 SHENANDOAH DR			M M 09	/ D D 30	/ Y	үүү 2017	Y				
City LINCOLN		State NE	Zip Code 68510-5159		saction ID : t of Each R			)				
FEC ID number of federal political co	0	С				-	50.0	0				
Name of Employe United HealthCare	, ,		pation (for Individual) Gen Counsel	М	emo Item							
Receipt For: Primary Other (speci	General ífy) ▼	P/R Ded	P/R Deduction (\$25.00 Bi-Weekly)									
Full Name of Indiv B. GAUDIO, JOS	/idual (Last, First, Middle Initia SEPH, , ,	l) or Full Or	rganization Name	Date o	f Receipt							
	842 E MOUNTAIN VIEW RD	1		м м 09								
City PARADISE VALLE	=v	State AZ	Zip Code 85253-1539		action ID :			)				
FEC ID number of federal political co	f contributing	С		Amount of Each Receipt this Period								
Name of Employe United HealthCare			upation (for Individual) Plan CEO	м	emo Item							
Receipt For: Primary Other (speci	General fy) ▼	Aggregate	Year-to-Date ▼ 636.30	P/R Ded	uction (\$45.4	45 Bi-We	ekly)					
Full Name of Indiv C. WICHMANN	/idual (Last, First, Middle Initia , DAVID, , ,	l) or Full Or	rganization Name	Date o	f Receipt							
	7000 ANTRIM ROAD			09	M M / D D / Y Y Y Y							
City EDINA		State MN	Zip Code 55439-1708		saction ID : t of Each R			)				
FEC ID number of federal political co	0	С					384.6	50				
Name of Employe United HealthCare	, ,	Occu CEO	pation (for Individual)	M	emo Item							
Receipt For: Primary Other (speci	General (fy)	Aggregate	Year-to-Date ▼ 3653.70	P/R Dec	luction (\$192	2.30 Bi-W	′eekly)					
SUBTOTAL of Rece	eipts This Page (optional)						525.5	60				
TOTAL This Period	(last page this line number or	lly)	••••••									

## Use separate schedule(s)

FOR LINE NUMBER:

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116				or each category of the Detailed Summary Page		<b>X</b> 11a		] 11k	,	11c 15	12		17
	v information copied from such Reports and State or commercial purposes, other than using the na					for the		pose		oliciting	, contri	butio	ns
	VAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	itedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Initial) MEAD, BRUCE, , ,	of Individual (Last, First, Middle Initial) or Full Organization Name BRUCE, , ,											
	Mailing Address 1232 GRAY BRANCH RD					09	1	D	д 30	/ Y	2017		]
	City MCKINNEY	State TX		Zip Code 75071-6495		Trans	sacti	ion	ID : P	R11598	316147	240	
		C		75071-0495	_	Amoun	it of	Eac	:h Re	ceipt th		od 3.44	
	Name of Employer (for Individual) Optum Services, Inc	Occi	tion (for Individual)		M	lemo	o Ite	m					
i	Acceipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 3062.88		P/R Dec	ductio	on (	\$276.	72 Bi-W	/eekly)		
	Full Name of Individual (Last, First, Middle Initial) PENSHORN, JOHN, , ,	ual (Last, First, Middle Initial) or Full Organization Name OHN, , ,											
	Mailing Address 120 BLACK OAKS LANE					09	1	D	<sup>р</sup> 30	/ Y	2017	Y	]
	City WAYZATA	State MN		Zip Code 55391-1363	_					R11598 ceipt th		-	
	FEC ID number of contributing ederal political committee.	С		384.60									
	Name of Employer (for Individual) Jnited HealthCare Services Inc	Occ SVI		M	lemo	o Ite	m						
Ī	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 3653.70		P/R Ded	luctio	on (S	\$192.:	30 Bi-W	'eekly)		
	Full Name of Individual (Last, First, Middle Initial) KALLMEYER, PAUL, , ,	or Full O	Orgai	nization Name		Date o	of Re	eceip	ot				
	Mailing Address 468 HERALD DR					09	/	D	30	/ Y	2017	Ý	
	City AMBLER	State PA		Zip Code 19002-1530	_			-		R11598	-	-	
	FEC ID number of contributing elevent committee.	С				Amoun		J				0.00	
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) Gen Counsel Mgr		N	lemc	o Ite	m				
	Receipt For:     A       Primary     General       Other (specify)	Aggregate	Yea	ar-to-Date ▼ 950.00		P/R Dec	ducti	on (	\$50.0	0 Bi-We	ekly)		
รเ	JBTOTAL of Receipts This Page (optional)										103	8.04	Π
тс	TAL This Period (last page this line number only	/)			-			,		,		-	

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

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Midd QUIRK, THOMAS, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6458 ORCHID LANE			09 30 / Y Y Y Y Y						
City	State	Zip Code	Transaction ID : PR1159819147240						
DALLAS	TX	75230-4121	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		192.30						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Hlth	Care Initiv							
Receipt For:	Aggregate	Year-to-Date <b>V</b>							
Primary General		1000.05	P/R Deduction (\$96.15 Bi-Weekly)						
Other (specify) <b>v</b>		1826.85	1						
Full Name of Individual (Last, First, Midd B. BARATZ, MEREDITH, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1850 SOLEDAD AVENU	E		09 30 2017						
City	State	Zip Code	Transaction ID : PR1159820047240						
LA JOLLA	CA	92037-3820	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Primary General Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. FALK, DAVID, , ,	le Initial) or Full O	rganization Name	Data of Descipt						
Mailing Address 323 LAWRENCE AVE			Date of Receipt						
			09 30 2017						
City	State	Zip Code	Transaction ID : PR1159820247240						
HIGHLAND PARK	NJ	08904-1851	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
Optum Services, Inc Receipt For:	Med		_						
Primary General	Aggregate	Year-to-Date <b>V</b>	P/R Deduction (\$14.00 Bi-Weekly)						
Other (specify)		266.00							
SUBTOTAL of Receipts This Page (optiona	al)		248.38						
TOTAL This Period (last page this line nur	nber only)								

## Use separate schedule(s)

FOR LINE NUMBER:

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ıт.			(ch	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		2 6	17	
	y information copied from such Reports and Stat for commercial purposes, other than using the n				for the		oose of	soliciting	g cont	ributio	ons	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group P/	AC)								
A.	Full Name of Individual (Last, First, Middle Initial MIGLIORI, RICHARD, , ,	) or Full Or	organization Name		Date of	Re	ceipt					
	Mailing Address PO BOX 72				м м 09	/	D D 30	/ Y	y 201	Y 7	Y	
	City WAYZATA	State MN	Zip Code 55391-0072					PR1159 eceipt th			_	
	FEC ID number of contributing federal political committee.	С					<del>.</del>		3	384.60	0	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, UHG Chief Medical Officer		M	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial BUENEMANN, BARBARA, , ,	) or Full Or	organization Name		Date of	Re	ceipt					
	Mailing Address 128 ROSEBROOK DR	-	Zip Code		09 / 0 / 2017 Transaction ID : PR1159828747240							
	City FLORISSANT	State MO										
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir (		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 219.26	] P	P/R Deduction (\$11.54 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initial RIVET, JEANNINE, , ,	) or Full Or	organization Name		Date of	Re	ceipt					
	Mailing Address 4305 TRILLIUM WAY				09 <sup>M</sup>	1	D D 30	/ Y	y 201		Ŷ	
	City MINNETRISTA	State MN	Zip Code 55364-7708					PR1159 eceipt th				
	FEC ID number of contributing federal political committee.	С					y .	,		384.60	0	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UnitedHlth Grp		M	emc	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	] [	P/R Ded	ucti	on (\$192	2.30 Bi-V	Veekly	()		
s	UBTOTAL of Receipts This Page (optional)			•			9		7	792.28	3	
Т	OTAL This Period (last page this line number on	ly)		•			,			-		

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FOR LINE NUMBER:

PAGE 11 OF

	, C		Use separate schedule(s)	(ch	neck only	/ on	e)							
ITEMIZED RECEIPT	3		for each category of the Detailed Summary Page		<b>K</b> 11a		11b	11c	12					
Any information copied from s														
or for commercial purposes, c		nd addr	ess of any political committee	to s	olicit con	ntrib	utions f	rom such	n commit	ee.				
NAME OF COMMITTEE (II UnitedHealth Grou		C (Un	itedHealth Group PA	(C)										
Full Name of Individual (La HOCK, CHRISTOPHE	st, First, Middle Initial) or Fu R, , ,	ıll Orga	nization Name		Date of	Re	ceipt							
Mailing Address 215 WIND	MILL HILL				м м 09	/	D 0 30	/ Y	ү ү 2017	Ŷ				
City WETHERSFIELD	State CT		Zip Code 06109-2746						1 <b>2894724</b> iis Period					
FEC ID number of contribution federal political committee.	ting						<del>,</del>		23.	08				
Name of Employer (for Ind United HealthCare Services		Occupa Dir Ger	tion (for Individual) Mgmt		Me	emo	Item							
Receipt For: Primary Gen Other (specify) ▼	neral Aggreg	jate Yea	ar-to-Date ▼ 219.26	F	P/R Dedu	uctic	on (\$11.	54 Bi-We	eekly)					
Full Name of Individual (La B. MATTEO, MICHAEL	st, First, Middle Initial) or Fu	ıll Orga	nization Name		Date of	Re	ceipt							
Mailing Address 25 JEREM							09 / D D / Y Y Y Y 2017							
City SOUTH GLASTONBURY	State		Zip Code 06073-3621	-			-		3344724	-				
	ting		00073-3021	$\neg$	Amount of Each Receipt this Period									
FEC ID number of contribution federal political committee.	C	C Occupation (for Individual) Chief Growth Off					230.76							
Name of Employer (for Ind Optum Services, Inc	,						Item							
Receipt For: Primary Gen Other (specify) ▼	heral Aggreg	jate Yea	ar-to-Date ▼ 2192.22	F	P/R Deduction (\$115.38 Bi-Weekly)									
Full Name of Individual (La C. CARR, ANTHONY,	st, First, Middle Initial) or Fu	ıll Orga	nization Name		Date of	Re	ceipt							
Mailing Address 5201 THC			1		09	1	30	/ Y	ү ү 2017	Y				
City SOUTHWEST RANCHES	State FL		Zip Code 33330-2406						32344724 iis Period					
FEC ID number of contributed federal political committee.	ting				Ľ.		9	,	476.	18				
Name of Employer (for Ind United HealthCare Services		•	tion (for Individual) PEOs Trusts		Me	∋mo	Item							
Receipt For: Primary Gen Other (specify)	heral Aggreg	jate Yea	ar-to-Date ▼ 3333.26		P/R Ded	uctio	on (\$23	8.09 Bi-V	Veekly)					
SUBTOTAL of Receipts This	Page (optional)		•••••				,	,	730.	02				
TOTAL This Period (last pag	e this line number only)		•••••	-			,							

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IT!			Use separate schedule(s)	(check only one)						
	EIVILLED RECEIPIO		for each category of the Detailed Summary Page		2					
Ar	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma	A not be sold or used by any p	erson for the purpose of soliciting cont	ributions					
	NAME OF COMMITTEE (In Full)	e name and a	iddress of any political committee							
	UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group P	AC)						
Α.	Full Name of Individual (Last, First, Middle In MILLER, KATHERINE, , ,		rganization Name	Date of Receipt						
	Mailing Address 2321 HARBOR LAKE DRIVE			09 / Y Y 201	Y Y 7					
	City ORANGE PARK	State FL	Zip Code 32003-7799	Amount of Each Receipt this Pe						
	FEC ID number of contributing federal political committee.	С			76.92					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle In ANDERSON, CRAIG, , ,	itial) or Full C	organization Name	Date of Receipt						
	Mailing Address 47 AMATO CIRCLE			09 30 / Y Y 09 30 201	7 7					
	City	State CT	Zip Code	Transaction ID : PR157595734						
	WETHERSFIELD		06109-3971	Amount of Each Receipt this Pe	riod					
	FEC ID number of contributing federal political committee.	С			157.86					
	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 ▼ 3397.32	P/R Deduction (\$228.93 Bi-Weekly	)					
	Full Name of Individual (Last, First, Middle In	itial) or Full C	Prganization Name							
C.	ERICKSON, KAREN, , ,			Date of Receipt						
	Mailing Address 15348 RED OAKS ROAD SE	State	Zip Code	09 30 201 Transaction ID : PR157595764	7					
	PRIOR LAKE	MN	55372-1834	Amount of Each Receipt this Pe	riod					
	FEC ID number of contributing federal political committee.	С			384.60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly	')					
s	UBTOTAL of Receipts This Page (optional)				919.38					
т	OTAL This Period (last page this line number	only)			-					

## Use separate schedule(s)

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			for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Staten for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (U	nitedHealth Group PA	.C)						
Α.	Full Name of Individual (Last, First, Middle Initial) of MONFILETTO, ERNEST, , ,	or Full Org	anization Name	Date of Receipt						
	Mailing Address 3062 COMFORT ROAD			09 / D D / Y Y Y Y 2017						
		State PA	Zip Code 18938-5622	Transaction ID : PR1575958147240						
	FEC ID number of contributing federal political committee.	_		Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	VP Nt	ation (for Individual) wk Prgms	Memo Item						
	Primary General Ag Other (specify) ▼	igregate Y	ear-to-Date ▼ 1461.48	P/R Deduction (\$76.92 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) o	or Full Org	anization Name	Date of Receipt						
	Mailing Address 5033 PARK TERRACE		- 1	09 30 / Y Y Y Y 2017						
		State MN	Zip Code 55436-1098	Transaction ID : PR1575958547240 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			384.60						
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Gen Mgmt	Memo Item						
	Receipt For:     Ag       Primary     General       Other (specify) ▼	igregate Y	ear-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) of KELLY, JOHN, , ,	or Full Org	anization Name	Date of Receipt						
	Mailing Address 568 HAWTHORNE WOODS DRIV	E		09 / D D / Y Y Y Y 2017						
	,	State MN	Zip Code 55123-3059	Transaction ID : PR1575959747240           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			409.70						
	Name of Employer (for Individual) United HealthCare Services Inc	Occup VP Ta	ation (for Individual) x	Memo Item						
	Receipt For:     Ag       Primary     General       Other (specify)	igregate Y	ear-to-Date ▼ 3566.05	P/R Deduction (\$204.85 Bi-Weekly)						
s	JBTOTAL of Receipts This Page (optional)			948.14						
т	OTAL This Period (last page this line number only)		·····							

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12					
Any information copied from such Reports	and Statements ma	ay not be sold or used by any p	erson for the	purpose	of soliciting	16 contribut	17 ions				
or for commercial purposes, other than usin											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mide A. CAHILL, LAURA, , ,	dle Initial) or Full O	rganization Name	Date o	of Receip	t						
Mailing Address 119 SILVER BEECH RC	DAD		09		30 / Y	2017	Y				
City SOUTHBURY	State CT	Zip Code 06488-2786		Transaction ID : PR1580863647240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C				· · ·	28.0	)8				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) solution Sales Executive	N	lemo Iter	n						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Dec	duction (\$	\$14.04 Bi-We	eekly)					
Full Name of Individual (Last, First, Mide B. WEBB, ROBERT, , ,	lle Initial) or Full O	rganization Name	Date o	f Receip	t						
Mailing Address 4516 DREXEL AVENUE						2017	Ŷ				
City EDINA	State MN	Zip Code 55424-1130			D : PR15808		)				
		55424-1130	Amoun	it of Eacl	h Receipt th	nis Period	_				
FEC ID number of contributing federal political committee.	C	Occupation (for Individual) SVP UnitedHIth Grp			384.60						
Name of Employer (for Individual) United HealthCare Services Inc					Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mide . HUGHES, RICHARD, , ,	dle Initial) or Full O	rganization Name	Date o	f Receip	t						
Mailing Address 3905 COUNTY ROAD 4	1		09		30	2017 <sup>°</sup>					
City MINNETRISTA	State MN	Zip Code 55364-9572			D:PR1596		)				
FEC ID number of contributing federal political committee.	С			y		200.0	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) COO of Human Capital		lemo Iter	m						
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       1900.00			P/R Dec	duction (\$	\$100.00 Bi-V	Veekly)					
SUBTOTAL of Receipts This Page (option	al)					612.6	8				
TOTAL This Period (last page this line nu	mber only)	······									

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
Any information copied from such Report	s and Statements ma	A not be sold or used by any political committee	13     14     15     16       berson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	sing the name and a								
UnitedHealth Group Incorp	porated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, M JOHNSON, THAD, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9741 GLACIER BAY			09 / D D / Y Y Y Y 09 30 2017						
City EDEN PRAIRIE	State MN	Zip Code 55347-2615	Transaction ID : PR1596304347240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, M SCHUMACHER, DANIEL, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5401 LARADA LANE			M = M         /         D = D         /         Y = Y = Y = Y         Y         Y         Y = Y = Y         Y         Y         Y         Y = Y         Y						
City EDINA	State MN	Zip Code 55436-1024	Transaction ID : PR1596305447240						
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) Grp Pres & COO	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, M THEISEN, SCOTT, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1950 MEADOWWOO	DS TRAIL State	Zip Code	09 / 09 / 2017 Transaction ID - DD / 2017						
	MN	55356-9312	Transaction ID : PR1596305647240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		38.46						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Bus Ops	Memo Item						
Receipt For:       Aggree         Primary       General         Other (specify)		Year-to-Date ▼ 1365.37	P/R Deduction (\$19.23 Bi-Weekly)						
SUBTOTAL of Receipts This Page (opti	onal)		807.66						
TOTAL This Period (last page this line r	number only)	······							

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				or each category of the Detailed Summary Page	×	11a 13		11b		11c	12	17	
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose		oliciting	contribu	tions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) OBERRENDER, ROBERT, , ,	or Full O	Organ	nization Name		Date of	Re	eceip	ot				
	Mailing Address 4505 MOORLAND AVENUE					09 30 / Y Y Y Y 2017							
	City	State MN		Zip Code		Transaction ID : PR1596307047240							
	EDINA	IVIIN		55424-1158	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) eas & Chief Invstmnt Off		Me	emo	lter	m				
	Possint For:												
	Primary General Other (specify) ▼	hary General Aggregate Teal-to-Date V								30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initial)	or Full O	Organ	nization Name		Date of	Re	eceip	ot				
	Mailing Address 12700 NE 245TH AVE	-				09 / D D / Y Y Y Y 2017							
	City	State		Zip Code		Trans	acti	ion I	D : P	R15963	80924724	0	
	BRUSH PRAIRIE	WA		98606-7761	A	mount	of	Eac	h Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	C						-		-9-	39.	82	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) iness Development Exe		Memo Item							
	Receipt For:       µ         Primary       General         Other (specify) ▼	Aggregate Year-to-Date ▼ 360.68					P/R Deduction (\$19.91 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial) ANDERSON, MICHAEL, , ,	or Full O	Organ	nization Name		Date of	Re	eceip	t				
	Mailing Address 17907 INVERNESS CURVE					м м 09	/	D	30	/ Y	2017	Y	
	City	State		Zip Code		Trans	acti	ion I	ID : P	R1596	30934724	0	
	EDEN PRAIRIE	MN		55347-2155	A	mount	of	Eac	h Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С				_		<b>y</b>		y	28.	00	
	Name of Employer (for Individual)	Occi	upati	ion (for Individual)		Me	emo	b Iter	m				
	United HealthCare Services Inc	VP	Med	Clin Ops									
		Aggregate	Yea	r-to-Date ▼									
	Other (specify)		Ţ	266.00	P/R Deduction (\$14.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•				,		9	452.	42	
т	OTAL This Period (last page this line number only	y)		•••••	Ī			-		-			

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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			Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17	
	y information copied from such Reports and Stater for commercial purposes, other than using the nan				or the		pose (		oliciting	g contribu	utions	
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	UnitedHealth Group PA	C)									
۹.	Full Name of Individual (Last, First, Middle Initial) FLYNN, DIANE, , ,	or Full C	Organization Name	C	Date of Receipt							
	Mailing Address 3318 FOXRIDGE CIRCLE											
	5	State FL	Zip Code 33618-2149				-			30974724	-	
			33018-2149	A	mount	t of	Each	Red	ceipt th	is Period	ł	
	FEC ID number of contributing federal political committee.	0		78.00							.00	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) gn Exec Dir		Me	emo	Item					
	Receipt For: Ad	areaate	Year-to-Date V									
	Primary General Other (specify) ▼		741.00	P/	R Ded	uctio	on (\$3	9.00	) Bi-We	ekly)		
В.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Organization Name		ate of	Re	ceipt					
	Mailing Address 6058 HARBOUR TOWN CIR						09 / 09 / 2017					
	City	State	Zip Code		Trans	acti	on ID	: PI	R15963	31164724	10	
	WESTERVILLE	OH	43082-8144	A	mount	t of	Each	Rec	ceipt th	is Period	ł	
	FEC ID number of contributing federal political committee.	C					-		-	384	.60	
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Hith		Memo Item								
	Receipt For:     Age       Primary     General       Other (specify) ▼	ggregate	Year-to-Date ▼ 3653.70	   P/I	R Dedi	uctic	on (\$1	92.3	30 Bi-W	/eekly)		
С.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Organization Name		ate of	Re	ceipt					
	Mailing Address 1142 GREENBROOK DRIVE				<sup>M</sup> 09	/	D 3	D 30	/ Y	2017	Y	
	5	State	Zip Code		Trans	acti	ion ID	) : P	R1596	3121472	40	
	DANVILLE	CA	94526-4306	A	mount	t of	Each	Rec	ceipt th	is Period	ł	
	FEC ID number of contributing federal political committee.	0					9		<b>9</b>	23	.08	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Growth Off		M	emo	ltem	I				
	Receipt For:     Ag       Primary     General       Other (specify)	ggregate	Year-to-Date ▼ 219.26	P/R Deduction (\$11.54 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		····· •				,		9	485	.68	
т	OTAL This Period (last page this line number only)	)		Ī					-			

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 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										
Α.	Full Name of Individual (Last, First, Middle Initial) GARCIA, STEVAN, , ,	or Full O	rganization Name	Date of Receipt							
	Mailing Address 1375 GRAYHAWK PLACE			09 30 / Y Y Y Y 2017							
	City	State	Zip Code	Transaction ID : PR1596312947240							
	LARKSPUR	CO	80118-8623	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) POps	Memo Item							
	Receipt For: A	ggregate	Year-to-Date V	_							
	Primary General Other (specify) ▼		4999.90	P/R Deduction (\$0.00 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Initial) HEUMANN, KURT, , ,	rganization Name	Date of Receipt								
	Mailing Address 9825 GERALD DR			09 30 / Y Y Y Y 2017							
	City	State	Zip Code	Transaction ID : PR1596313747240							
	SAINT LOUIS	MO	63128-1767	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		40.00							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate	Year-to-Date ▼ , 380.00	P/R Deduction (\$20.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) MALLATT, KATHLEEN, , ,	or Full O	rganization Name	Date of Receipt							
	Mailing Address 4304 SOUTH 167 AVENUE			09 / D / Y Y Y Y 09 30 2017							
	3	State NE	Zip Code	Transaction ID : PR1596315447240							
	ОМАНА	INE	68135-1353	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) Plan CEO	Memo Item							
	Receipt For:     A       Primary     General       Other (specify)	ggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			116.92							
Т	OTAL This Period (last page this line number only	)	····· •								

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using t	I Statements mathematic	I ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle ROSENTHAL, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8 VIA HERMOSA			09 30 / Y Y Y Y Y 2017							
City ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR1596317347240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. RUTH, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 16621 ALEXANDER MANC	09 30 2017									
City SILVER SPRING	State MD	Zip Code 20905-5028	Transaction ID : PR1596317447240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	FEC ID number of contributing									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, HIth Advancement	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle STURKEY, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1941 MARINA ROAD	State	Zin Code	09 / 09 / 2017							
City IRMO	SC	Zip Code 29063-8579	Transaction ID : PR1596318447240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		78.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P Acct Mgmt	Memo Item							
Receipt For:     Aggreen and and a general       Primary     General       Other (specify)		Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			847.20							
TOTAL This Period (last page this line number	er only)									

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			Use separate schedule(s)	(che	(check only one)						
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12		
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma	ay not be sold or used by any pe	erson fo	13 or the p	ourp	14 lose of litions f	soliciting	16 contribut	tions	
	NAME OF COMMITTEE (In Full)			10 501					T COMMINIC	ee.	
$\rangle$	UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia TODD, JEFFREY, , ,	l) or Full O	rganization Name	C	Date of	Red	ceipt				
	Mailing Address 467 PRAIRIE WAY SOUTH	1			м м 09	/	30	) / Y	Y Y 2017	Y	
	City BAYPORT	State MN	Zip Code 55003-1607	A					3 <b>1904724</b> iis Period	0	
	FEC ID number of contributing federal political committee.	С			_		y	і. 1. др.	50.0	00	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting		Me	mo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	P/	R Dedu	ictio	on (\$25.	.00 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia TURNAU, CHRIS, , ,	l) or Full O	rganization Name	C	Date of	Red	ceipt				
	Mailing Address PO BOX 43216 3741 DUNBAR KNOLL City State Zip Code						30		үүү 2017	Y	
	BROOKLYN PARK	MN	55443-0216						31914724 iis Period	0	
	FEC ID number of contributing federal political committee.	Occupation (for Individual) VP Tax			76.92						
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial WASSERSTEIN, M LAURIE, , ,	l) or Full O	rganization Name		Date of	Red	ceipt				
	Mailing Address 92 GOODWIN CIRCLE				м м 09	/	D 0 30		2017	Y	
	City HARTFORD	State CT	Zip Code 06105-5205	A					31954724 iis Period	0	
	FEC ID number of contributing federal political committee.	С					y .	, ,	38.4	46	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Itwk Prgms	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.37	P/	R Dedu	uctic	on (\$19.	.23 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		····· •	[			,	. ,	165.3	38	
т	OTAL This Period (last page this line number on	ly)	••••••				,	-			

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	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13     14     15     16     17       erson for the purpose of soliciting contributions       a to calicit contributions from such committee						
or for commercial purposes, other than using t	ine name and a	duress of any political committe	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle <b>DODDY, JOHN</b> , , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 50 WALSINGHAM ROAD			09 30 / Y Y Y Y 2017						
City MENDHAM	State NJ	Zip Code 07945-1827	Transaction ID : PR1600597347240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		78.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Info Tech	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle <b>B.</b> ILE, MICHAEL, , ,									
Mailing Address 14924 PONDVIEW CIRCLE	1		09 / <sup>y</sup> y y y y 2017						
City WAYZATA	State MN	Zip Code 55391-2249	Transaction ID : PR1600597647240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) OptumCare		upation (for Individual) Prod	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. MICHAUX, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 742 GOODRICH AVE	1		09 / D D / Y Y Y Y 09 / 30 / 2017						
City SAINT PAUL	State MN	Zip Code 55105-3343	Transaction ID : PR1600598547240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		200.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM PCM	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1900.00	P/R Deduction (\$100.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			662.60						
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		1a	11b	11c	12		7		
Any	information copied from such Reports and St r commercial purposes, other than using the	atements m	ay not be sold or used by any political committee	erson for	the pu	14 urpose	of soliciti	ng contri	butior	17 ns		
· · · · · · · · · · · · · · · · · · ·		name and a			contr	ibution	s nom st		intee	-		
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	d PAC (	UnitedHealth Group PA	NC)								
A	ull Name of Individual (Last, First, Middle Initi SANDY, LEWIS, , ,	al) or Full C	Drganization Name	Dat	Date of Receipt							
_	ailing Address 4800 SUNNYSLOPE ROAD E				09 30 / Y Y Y Y 2017							
Ci	ty DINA	State MN	Zip Code 55424-1163					00598747 this Peri				
	FEC ID number of contributing federal political committee.				_	-g=		20	00.00			
U	ame of Employer (for Individual) nited HealthCare Services Inc		cupation (for Individual) P Clin Advancement		Men	no Item	1					
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1900.00	P/R	Deduc	ction (\$*	100.00 Bi	-Weekly)				
Full Name of Individual (Last, First, Middle Initial) or <b>B. PETERSON, MATTHEW</b> , , ,			Drganization Name	Dat	e of F	Receipt						
_	Mailing Address 2260 FOX STREET				09	/ D	BO /	y y 2017		]		
Ci	ty RONO	State MN	Zip Code	Transaction ID : Amount of Each F								
FE	EC ID number of contributing deral political committee.	C				of Each	Receipt		oa 34.60	П		
	ame of Employer (for Individual) nited HealthCare Services Inc		cupation (for Individual) O Ancillary & Ind/Sgt CAO		Men	no Item	1					
R	eceipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3653.70	P/R I	P/R Deduction (\$192.30 Bi-Weekly)							
	III Name of Individual (Last, First, Middle Initi MALONEY, JEFFREY, , ,	al) or Full C	Drganization Name	Dat	e of F	Receipt						
	ailing Address 6327 PASADENA POINT BLVI				09 30 2017							
Ci	ty GULFPORT	State FL	Zip Code 33707-3867					13243547 this Peri				
	EC ID number of contributing deral political committee.	С			_	y	9	19	92.30			
0	ame of Employer (for Individual) ptum Services, Inc		cupation (for Individual) Gen Mgmt		Mer	no Iterr	1					
Receipt For: Primary General Other (specify)		Aggregate	P/R Deduction (\$96.15 Bi-Weekly)									
SUE	BTOTAL of Receipts This Page (optional)				_			77	76.90			
тот	AL This Period (last page this line number o	nly)				-			-	1		

## 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	✗         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   <b>A.</b> CELLI, PAT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1210 COUNTRY CLUB DR			09 30 2017						
City	State	Zip Code	Transaction ID : PR1613243747240						
CUTCHOGUE	NY	11935-1728	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		265.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General		1571.47	P/R Deduction (\$132.65 Bi-Weekly)						
Other (specify) <b>v</b>		7 7 7	1						
Full Name of Individual (Last, First, Middle KENNEDY, WILLIAM, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 14 MYRA LN			09 30 / Y Y Y Y Y 2017						
City	State	Zip Code	Transaction ID : PR1653443147240						
BURLINGTON	СТ	06013-1327	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		40.00						
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item						
Receipt For:	Aggregate	Year-to-Date <b>V</b>							
Primary     General       Other (specify) ▼		380.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. BELLAMY, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2743 THOMAS AVENUE S	OUTH		09 30 2017						
City	State MN	Zip Code	Transaction ID : PR1653444347240						
MINNEAPOLIS	IVIIN	55416-4346	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		448.70						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Ops	Memo Item						
Receipt For:		Year-to-Date ▼							
Other (specify)		3429.40	P/R Deduction (\$224.35 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			754.00						
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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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 SEVIGNY, BRIAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 137 CREEKVIEW LANE			09 / D D / Y Y Y Y 2017					
City LORETTO	State MN	Zip Code 55357-2111	Transaction ID : PR1653445747240					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) T	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. SULLIVAN, DANIEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 57 QUORN HUNT ROAD			09 30 / Y Y Y Y 2017					
City WEST SIMSBURY	State CT	Zip Code 06092-2524	Transaction ID : PR1653445847240           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 VP	upation (for Individual) IT	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. ARCHER, LORI, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2781 SADDLE CLUB RO	1		09 / D D / Y Y Y Y Y 2017					
City GREENWOOD	State IN	Zip Code 46143-9211	Transaction ID : PR1806750147240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		23.08					
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 ▼ 219.26	P/R Deduction (\$11.54 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	)		128.08					
TOTAL This Period (last page this line num	ber only)	•••••						

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			Use separate schedule(s)		(check only one)						
11	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12		
	y information copied from such Reports and S										
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to s	olicit co	ntrib	outions 1	from such	n committ	ee.	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Inite EMERSON, PAUL, , ,	tial) or Full O	rganization Name		Date of Receipt						
	Mailing Address 18855 MEADOW VIEW BLVD			м м 09	/	D 30	) / Y	2017	Y		
	City PRIOR LAKE	State MN	Zip Code 55372-3133						7 <b>5034724</b> is Period	0	
	FEC ID number of contributing federal political committee.	С			<u> </u>			F	384.	60	
	Name of Employer (for Individual) Optum360 Services Inc	Occi COC	upation (for Individual) O		M	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	1	P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init ULLOA, SHAUNA, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 9 STRATFORD ROAD	1-			м м 09	/	30	) / Y	2017	Y	
	City FARMINGTON	State CT	Zip Code 06032-1444	+					37914724	0	
	FEC ID number of contributing federal political committee.	C			Amoun				is Period 28.	08	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) E 3 NAs Ind Contr		M	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	יוו	P/R Ded	uctio	on (\$14.	.04 Bi-We	eekly)		
с.	Full Name of Individual (Last, First, Middle Init ANDERSON, CATHERINE, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 57 SIMMONS LANE						09 30 2017				
	City SEVERNA PARK	State MD	Zip Code 21146-1921						55074724 is Period	0	
	FEC ID number of contributing federal political committee.	С			503.74					74	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Strat Initiv		Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3236.83	]	P/R Ded	lucti	on (\$25	1.87 Bi-V	/eekly)		
s	UBTOTAL of Receipts This Page (optional)		•••••	•			, .	. ,	916. <sup>,</sup>	42	
Т	OTAL This Period (last page this line number	only)		- -							

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	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1				
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Middle II BISHOP-HEROUX, KATHLEEN, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 145 COTTAGE RD			09 30 / Y Y Y Y 2017				
City ENFIELD	State CT	Zip Code 06082-2208	Transaction ID : PR1903560847240 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		40.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle II B. DUFEK, ROBERT, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 816 PROMONTORY PLACE			09 30 / Y Y Y Y 2017				
City EAGAN	State MN	Zip Code 55123-2297	Transaction ID : PR1903577147240 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) IT	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	-				
Primary General Other (specify) ▼		475.00	P/R Deduction (\$25.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle In C. JOHNSON, CHRISTOPHER, , ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 12880 53RD STREET NOR	TH		09 / D D / Y Y Y Y 09 30 2017				
City STILLWATER	State MN	Zip Code 55082-1063	Transaction ID : PR1903591147240           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		78.00				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			168.00				
TOTAL This Period (last page this line number	r only)						

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

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         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	UnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle PENN, STEVEN, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 6766 IDLEWOOD WAY			09 30 / Y Y Y Y Y 2017					
City EDEN PRAIRIE	State MN	Zip Code 55346-3506	Transaction ID : PR1903612947240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle <b>B. SANTELLI, JOHN</b> , , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 25510 BIRCH BLUFF ROA			09 / D D / Y Y Y Y Y 2017					
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622047240 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) P CIO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle STEERUP, LORI, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 7019 DONLEA LANE			09 30 / Y Y Y Y Y 2017					
City EDEN PRAIRIE	State MN	Zip Code 55346-3164	Transaction ID : PR1903628647240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			440.60					
TOTAL This Period (last page this line number	er only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	AC)						
Full Name of Individual (Last, First, Middle WEYMOUTH, PAUL, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 317 WRIGHTS MILL RD			09 30 / Y Y Y Y Y 2017				
City COVENTRY	State CT	Zip Code 06238-1559	Transaction ID : PR1903636947240				
FEC ID number of contributing federal political committee.	C	00230-1339	Amount of Each Receipt this Period 38.46				
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item				
Receipt For: Primary General Other (specify) ▼	Receipt For: Aggregate Year-to-Date ▼ Primary General						
Full Name of Individual (Last, First, Middle B. BRYAN, KATHIE, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 912 JOSHUA PLACE			09 30 / Y Y Y Y Y 2017				
City SAN DIEGO	State CA	Zip Code 92154-2537	Transaction ID : PR2119469447240 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) g Cnslt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	P/R Deduction (\$25.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle CAMPBELL, COLLEEN, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 4936 LONGMEADOW PA			09 / D D / Y Y Y Y Y 2017				
City ORLANDO	State FL	Zip Code 32811-7485	Transaction ID : PR2119469947240				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty	Memo Item				
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)	)		118.46				
TOTAL This Period (last page this line numb	per 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				
UnitedHealth Group Incorpora	ited PAC (I	United Health Group P/	AC)				
Full Name of Individual (Last, First, Middle CROSS, RICHARD, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 11361 DONOVAN ROAD			09 30 / Y Y Y Y 2017				
City ROSSMOOR	State CA	Zip Code 90720-2931	Transaction ID : PR2119471847240 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
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 ▼ 475.00	P/R Deduction (\$25.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle DEMBROSKI, TODD, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 1390 FINCH LN			09 / D D / Y Y Y Y 2017				
City GREEN BAY	State WI	Zip Code 54313-6400	Transaction ID : PR2119472847240 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Svs	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. GILDERNICK, AMY, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 2709 WILLIAMS GRANT			M         M         /         D         D         /         Y				
City DE PERE	State WI	Zip Code 54115-9456	Transaction ID : PR2119475247240 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		40.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clms	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			120.00				
TOTAL This Period (last page this line number	er only)						

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		Use separate schedule(s)	(check onl	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12			
Any information copied from such Reports and or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. HANSEN, DAVID, , ,	Initial) or Full O	rganization Name	Date o	f Receipt	t				
Mailing Address 33 VIA CONOCIDO			09		30 / Y	ү ү 2017	Y		
City SAN CLEMENTE	State CA	Zip Code 92673-7044			<b>D:PR2119</b> n Receipt th		)		
FEC ID number of contributing federal political committee.	C			-		270.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt	M	emo Iter	n				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2565.00	P/R Deduction (\$135.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle HARLAN, MADELINE, , ,	Initial) or Full O	rganization Name	Date o	f Receipt	t				
Mailing Address 3444 CORTES PLACE					09 / 09 / Y Y Y Y 09 30 / 2017				
City ROUND ROCK	State TX	Zip Code 78665-5666			D : PR2119		)		
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period				
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	M	emo Iter	n					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Ded	uction (\$	14.04 Bi-We	eekly)			
Full Name of Individual (Last, First, Middle C. HO, SAMUEL, , ,	Initial) or Full O	rganization Name	Date o	f Receipt	t				
Mailing Address 4220 OCEAN DR			M M 09		30 / Y	y y 2017	Y		
City MANHATTAN BEACH	State CA	Zip Code 90266-3059			<b>D:PR2119</b> n Receipt th		0		
FEC ID number of contributing federal political committee.	С			, y	y	384.6	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Clin Off		emo Iter	n				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Dec	luction (\$	192.30 Bi-V	Veekly)			
SUBTOTAL of Receipts This Page (optional).						682.6	8		
TOTAL This Period (last page this line numb	er only)			-					

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	,							
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middl A. KNUTSON, MARK, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 19312 FAIRHAVEN EXT			09 30 / Y Y Y Y 2017					
City SANTA ANA	State CA	Zip Code 92705-6310	Transaction ID : PR2119480247240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Cust Service	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middl B. MACE-MEADOR, HEATHER, , ,		rganization Name	Date of Receipt					
Mailing Address 13531 CARLTON OAKS			09 30 / Y Y Y Y 2017					
City SAN ANTONIO	State TX	Zip Code 78232-4902	Transaction ID : PR2119482547240					
FEC ID number of contributing		70232-4302	Amount of Each Receipt this Period					
federal political committee.	C		40.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		, 380.00	P/R Deduction (\$20.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middl <b>C.</b> NEURURER, SCOTT, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 23822 VIA MONTE			09 / 09 / Y Y Y Y 2017					
Coto de caza	State CA	Zip Code 92679-4001	Transaction ID : PR2119484947240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		233.04					
		upation (for Individual) Ops	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1684.41	P/R Deduction (\$116.52 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	I)		303.04					
TOTAL This Period (last page this line num	ber 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	<b>X</b> 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	prated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Mide A. NYGARD, KEITH E, , ,	dle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 1139 E OCEAN BOULE #106	VARD		09 30 / Y Y Y Y Y 2017					
City LONG BEACH	State CA	Zip Code 90802-6521	Transaction ID : PR2119485047240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		40.00					
Name of Employer (for Individual) UNITED HEALTHCARE SVS INC		upation (for Individual) npli Cnslt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mide OLLMANN-WAGNER, TRACY,		organization Name	Date of Receipt					
Mailing Address 2839 TIMBER LANE	Otata	Zin Oode	09 / D D / Y Y Y Y 09 / 30 / 2017					
City GREEN BAY	State WI	Zip Code 54313-5841	Transaction ID : PR2119485247240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) cc Dir SIs Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mide C. PAXSON, LYNDA A, , ,	dle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 3924 E GARNET PL			09 / D D / Y Y Y Y 2017					
City HIGHLANDS RANCH	State CO	Zip Code 80126-5044	Transaction ID : PR2119485847240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) UNITED HEALTHCARE SVS INC		upation (for Individual) ïeld Acct Mgr	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 475.00	P/R Deduction (\$25.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		120.00					
TOTAL This Period (last page this line nu	mber only)							

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 33 OF

	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
			13     14     15     16     17       erson for the purpose of soliciting contributions       a to calicit contributions from such committee					
NAME OF COMMITTEE (In Full)	g the name and a	doress of any political committe	e to solicit contributions from such committee.					
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Midd A. PETE, DIANA, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9010 MORNINGSTAR D	RIVE		09 30 / Y Y Y Y 2017					
City SUGAR LAND	State TX	Zip Code 77479-3316	Transaction ID : PR2119486347240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		24.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.00	P/R Deduction (\$12.00 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. PETERS, MICHELLE, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1128 COUNTRYSIDE D			09 / <sup>y</sup> y y y y 30 2017					
City DE PERE	State	Zip Code 54115-1040	Transaction ID : PR2119486447240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Svs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. PITTMAN, AUSTIN, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4621 EDINA BLVD			09 / D D / Y Y Y Y Y 2017					
City EDINA	State MN	Zip Code 55424-1154	Transaction ID : PR2119486747240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		438.60					
TOTAL This Period (last page this line nur	nber only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	17
Any information copied from such Rep or for commercial purposes, other tha			erson for the	purpose of so		contribut	ions
NAME OF COMMITTEE (In Full) UnitedHealth Group Inc	prporated PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First PROCHNOW, JAMES, , ,		rganization Name	Date of	Receipt			
Mailing Address 143 RUSTIC OAK	DRIVE		м м 09	/ D D 30	/ Y	2017	Y
City LUXEMBURG	State WI	Zip Code 54217-7320		action ID : PI of Each Rec			)
FEC ID number of contributing federal political committee.	C				- <b>J</b>	28.0	0
Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir I	upation (for Individual) Fin	Me	emo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Dedu	uction (\$14.00	) Bi-We	ekly)	
Full Name of Individual (Last, First B. RICCIUTI, SHARON, , ,	Middle Initial) or Full O	rganization Name	Date of	Receipt			
Mailing Address 55 PERENNIAL	01-1-	The Oak	M = M 09	/ D D 30	/ Y	y y 2017	Ŷ
City IRVINE	State CA	Zip Code 92603-0621		action ID : PF of Each Rec			)
FEC ID number of contributing federal political committee.	C		28.08				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Qlty	Me	emo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Dedu	uction (\$14.04	l Bi-We	ekly)	
Full Name of Individual (Last, First, C. THOMSON, CHERYL, , ,	Middle Initial) or Full O	rganization Name	Date of	Receipt			
Mailing Address 222 FOREST DR			09	/ D D 30	/ Y	y y 2017	Y
City SOBIESKI	State WI	Zip Code 54171-9748		action ID : Pl of Each Rec			)
FEC ID number of contributing federal political committee.	C			y	y	30.0	0
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 ▼ 285.00	P/R Dedu	uction (\$15.00	) Bi-We	ekly)	
SUBTOTAL of Receipts This Page (	optional)			, , ,	,	86.0	18
TOTAL This Period (last page this lir	ne number only)				-9-		

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PAGE 35 OF

	Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17			
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)		InitedHealth Group P				
Full Name of Individual (Last, First, Middle A. TUCKER, STEVEN, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 3784 8TH AVENUE			09 30 2017			
City SAN DIEGO	State CA	Zip Code 92103-4305	Transaction ID : PR2119492047240			
		32103-4300	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		192.00			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1824.00	P/R Deduction (\$96.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle <b>B.</b> VANASTEN, SUSAN, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address N2249 NICOLE COURT	I		09 30 / Y Y Y Y 2017			
City	State	Zip Code	Transaction ID : PR2119492647240			
KAUKAUNA	WI	54130-9462	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) R Telesls Dir	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼	1			
Primary General Other (specify) ▼		, 760.00	P/R Deduction (\$40.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. WESTPHAL, SCOTT, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 4536 ROCKY RUN LN			09 30 / Y Y Y Y Y 2017			
City OCONTO	State WI	Zip Code 54153-9268	Transaction ID : PR2119493247240 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		23.08			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Svs	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 219.26	P/R Deduction (\$11.54 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional).			295.08			
TOTAL This Period (last page this line number	er only)					

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

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 1					
			13     14     15     16     1       berson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Mide DAUGHERTY, LINDA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 15442 NORTH 19TH W	AY		09 30 2017					
City PHOENIX	State AZ	Zip Code 85022-3329	Transaction ID : PR2119493547240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		40.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mide B. WRIGHT, GREGORY, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 10471 STRAND TERRA			09 30 / Y Y Y Y 2017					
City SANTA ANA	State CA	Zip Code 92705-1495	Transaction ID : PR2119494147240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mide C. YOUNG, GEORGE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 36296 N 98TH WAY			09 / D D / Y Y Y Y 09 / 30 / 2017					
City SCOTTSDALE	State AZ	Zip Code 85262-3138	Transaction ID : PR2119494447240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		30.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		120.00					
TOTAL This Period (last page this line nu	mber 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					
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathe name and a	A not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)					
Full Name of Individual (Last, First, Middle A. MASON, JOHN, J, ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address PO BOX 2083			09 30 / Y Y Y Y 2017					
City CYPRESS	State CA	Zip Code 90630-1583	Transaction ID : PR2126373847240 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) Comm	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. BURKE, FORREST, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 380 LEAF STREET			09 30 2017					
City ORONO	State MN	Zip Code 55356-9733	Transaction ID : PR2133132447240 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 Unit CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. COLEMAN, WILLIAM, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 831 RATLEY ROAD			09 / D D / Y Y Y Y 30 2017					
City WEST SUFFIELD	State CT	Zip Code 06093-2400	Transaction ID : PR2133132547240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		24.00					
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) Clms	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 228.00	P/R Deduction (\$12.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			793.20					
TOTAL This Period (last page this line numb	er only)							

FOR LINE NUMBER:

PAGE 38 OF

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using t	Statements manual and a	I ay not be sold or used by any p Iddress of any political committe	person 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 <b>A.</b> CUMMINGS, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1929 FAIRMOUNT AVE			M M / D D / Y Y Y Y Y 09 30 2017						
City SAINT PAUL	State MN	Zip Code 55105-1539	Transaction ID : PR2133132647240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. HULTGREN, BROR, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 408 22ND ST			09 / D D / Y Y Y Y Y 2017						
City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133247240 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) gn CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle   MORISATO, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 238 ARDMORE ROAD			09 30 2017						
City DES PLAINES	State IL	Zip Code 60016-2119	Transaction ID : PR2133133847240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Pres	upation (for Individual) Insurance Sols	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			799.20						
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 REC			for each category of the Detailed Summary Page	¥ 11a 13		11b 14	11c	12	17
			y not be sold or used by any pe dress of any political committee	erson for the		cose of s		contribut	ions
				$\sim$					
UnitedHealth	Group Incorporated	PAC (U	InitedHealth Group PA	C)					
Full Name of Indivi A. NETTLETON, K	dual (Last, First, Middle Initial IMBERLY, , ,	) or Full Or	ganization Name	Date	of Re	ceipt			
Mailing Address 50	03 DARNELL			м 09		о 30	/ Y	2017	Y
City HOUSTON		State TX	Zip Code 77096-1510					<b>3394724</b> is Period	)
FEC ID number of federal political con	0	C						30.0	)0
Name of Employer United HealthCare S	· ,	Occu Dir P	pation (for Individual) Irod	- D 1	Memo	Item			
Receipt For: Primary Other (specify	General	Aggregate `	P/R De	ductio	on (\$15.0	00 Bi-We	ekly)		
Full Name of Indivi B. PUTNAM, T JE	dual (Last, First, Middle Initial	) or Full Or	ganization Name	Date	of Re	ceipt			
	3 ELMWOOD PLACE WEST	01-1-	7- 0- t-	09		<sup>D</sup> 30	/ Y	2017	Y
City MINNEAPOLIS		State MN	Zip Code 55419-1349			-		34247240 is Period	)
FEC ID number of federal political con	0	С						384.6	30
Name of Employer United HealthCare S			pation (for Individual) Group CFO	ים	Memo	Item			
Receipt For: Primary Other (specify	General	Aggregate `	Year-to-Date ▼ 3653.70	P/R De	ductic	on (\$192.	30 Bi-W	'eekly)	
	dual (Last, First, Middle Initial	) or Full Or	ganization Name	Date	of Re	ceipt			
Mailing Address 22	203 LAKE GARDENS DRIVE			M 09		D D D 30	/ Y	2017	Y
City KINGWOOD		State TX	Zip Code 77339-3629					<b>13464724</b> is Period	D
FEC ID number of federal political con	5	С			_	y :		50.0	)0
Optum Services, Inc	Name of Employer (for Individual)Occupation (for Individual)Optum Services, IncVP Gen Mgmt				Memo	tem			
Receipt For: Primary Other (specify	Aggregate real-to-Date +				ductio	on (\$25.0	)0 Bi-W€	eekly)	
SUBTOTAL of Receip	ots This Page (optional)					,		464.6	60
TOTAL This Period (	ast page this line number on	ly)	••••••						

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

## Use separate schedule(s)

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	Use separate schedule(s)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than usinc	nd Statements may the name and a	I ay not be sold or used by any p Iddress of any political committe	13     14     15     16     17       verson for the purpose of soliciting contributions       e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor			
Full Name of Individual (Last, First, Middle FALKENBERG, ROBERT, , ,	e Initial) or Full C	organization Name	Date of Receipt
Mailing Address 6 LANTANA			09 30 Y Y Y Y Y 2017
City NEWPORT COAST	State CA	Zip Code 92657-1646	Transaction ID : PR2145728447240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		163.88
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 ▼ 1426.42	P/R Deduction (\$81.94 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. RUMMEL, LEAH, , ,	e Initial) or Full C	organization Name	Date of Receipt
Mailing Address 12100 TRAUTWEIN ROA		Zin Onde	09 / 0 / Y Y Y Y 2017
City AUSTIN	State TX	Zip Code 78737-9358	Transaction ID : PR2145729547240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. SMITH, DANNETTE, , ,	e Initial) or Full C	organization Name	Date of Receipt
Mailing Address 4200 ALDEN DRIVE			09 / D D / Y Y Y Y 09 30 2017
City EDINA	State MN	Zip Code 55416-5010	Transaction ID : PR2145729947240 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	United HealthCare Services Inc Sr Deputy Gen Counsel		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional			578.48
TOTAL This Period (last page this line num	ber only)		

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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	LIVIIZED RECEIFIS			or each calegory of the	×	11a		1	1b		11c	12	
			'	Detailed Summary Page		13		14	ŀ	_	15	16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the										liciting	contribu	tions
_	NAME OF COMMITTEE (In Full)			, p									
	UnitedHealth Group Incorporate	d PAC (l	Uni	tedHealth Group PA	NC)								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LEWIS, KURT, , , Mailing Address 961 RIVER FOREST DRIVE							f Re	ece	ipt				
							09 30 2017						
	City	State		Zip Code		Trans	sact	ior	ו ID :	PR	22039	6754724	0
	MAINEVILLE	OH		45039-7720	/	Amoun	t of	Ea	ach F	Reco	eipt thi	is Perioc	
	FEC ID number of contributing federal political committee.	С						-			-9-	23	08
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		М	emo	o It	em				
	Receipt For:	Aggregate	Yea	r-to-Date ▼									
	Primary General Other (specify) ▼			219.26	P/R Deduction (\$11.54 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initi GIBSON, CHRISTINE, , ,	al) or Full O	Drgar	nization Name		Date o	f Re	ece	ipt				
	Mailing Address 8516 29TH AVE N				M M / D D / Y Y Y Y 09 30 2017								
	City	State		Zip Code		Trans	acti	ior	ID :	PR	22251	6674724	0
	NEW HOPE	MN		55427-2622	/	Amoun	t of	Ea	ach F	Reco	eipt thi	is Perioc	
	FEC ID number of contributing federal political committee.	s l				76.9						92	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) t Initiv		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 730.74					uctio	on	(\$38.	.46	Bi-We	ekly)	
).	Full Name of Individual (Last, First, Middle Initi BEAULE, JEAN-FRANCOIS, , ,	al) or Full O	Drgar	nization Name		Date o	f Re	ece	ipt				
	Mailing Address 7 STRATFORD RD					<sup>M</sup> 09	/	ľ	D 30		/ Y	2017	Y
	City	State		Zip Code		Trans	sact	ior	ו ID :	PF	22258	81364724	0
	FARMINGTON	СТ		06032-1444	_ /	Amoun	t of	Ea	ach F	Reco	eipt thi	is Perioc	
	FEC ID number of contributing federal political committee.	C									,	230	76
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)	-	N	lemo	o li	em				
	United HealthCare Services Inc	SVP	P HItl	n Advancement									
	Receipt For: Aggregate Year-to-Date ▼												
	Primary General Other (specify)		- <b>J</b> -	2192.22	P	/R Dec	ducti	on	(\$11	5.3	8 Bi-W	(eekly)	
	JBTOTAL of Receipts This Page (optional)			•				,	-	-	7	330.	76

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than usi			erson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	orated PAC (l	JnitedHealth Group PA	AC)			
Full Name of Individual (Last, First, Mid CARRUTH, NANCY, , ,	Date of Receipt					
Mailing Address 753 WOOD HILL DRIV			09 / D D / Y Y Y Y 2017			
City CHANHASSEN	State MN	Zip Code 55317-9561	Transaction ID : PR2225818447240			
GHANHASSEN		33317-9301	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		30.00			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item			
Receipt For:		Year-to-Date V	-			
Primary General Other (specify) ▼	Aggregate	285.00	P/R Deduction (\$15.00 Bi-Weekly)			
Full Name of Individual (Last, First, Mid B. RYAN, JOHN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 45 WESTMORELAND	_N		09 30 / Y Y Y Y 2017			
City NAPERVILLE	State IL	Zip Code 60540-5817	Transaction ID : PR2225819647240 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) P CInt Mgmt Svc	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1096.11	P/R Deduction (\$57.69 Bi-Weekly)			
Full Name of Individual (Last, First, Mid C. SAILOR, ROY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 276 COYOTE WILLOW	/ DRIVE		09 30 2017			
City	State	Zip Code	Transaction ID : PR2225819747240			
COLORADO SPRINGS	CO	80921-7631	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) Bus Dvlp	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1461.48	P/R Deduction (\$76.92 Bi-Weekly)			
SUBTOTAL of Receipts This Page (option	nal)		299.22			
TOTAL This Period (last page this line nu	imber only)	·····				

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Use separate schedu		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle A. CORNE, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 12642 CHIEFS COURT			09 30 / Y Y Y Y 2017
City FISHERS	State IN	Zip Code 46037-9553	Transaction ID : PR2231346947240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. GREENMAN, DEE, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 536 HIGH DR			09 30 / Y Y Y Y 2017
City CARMEL	State IN	Zip Code 46033-2338	Transaction ID : PR2231350247240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.40
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 258.40	P/R Deduction (\$15.20 Bi-Weekly)
Full Name of Individual (Last, First, Middle CONNLY, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 570 MONTCALM PL	Chata	Zin Oode	09 / D D / Y Y Y Y 30 2017
City SAINT PAUL	State MN	Zip Code 55116-1730	Transaction ID : PR2247625847240           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		418.18
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Tech Off	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3536.35	P/R Deduction (\$209.09 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			476.58
TOTAL This Period (last page this line numb	er only)		

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	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c	12	
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	Ay not be sold or used by any p	erson for the	14 purpose of s	15 soliciting	contribut	17 ions
NAME OF COMMITTEE (In Full)	le name and a				SHI SUCH	Commute	
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Middle In CARCIONE, JOSEPH, , ,	nitial) or Full C	rganization Name	Date of	Receipt			
Mailing Address 11 CARRIAGE WAY			M M 09	/ D D 30	/ Y	ү ү 2017	Y
City WHITE PLAINS	State NY	Zip Code 10605-5424		action ID : F of Each Re			)
FEC ID number of contributing federal political committee.	С					115.4	0
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄Ied Dir	Me	emo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1096.30	P/R Dedu	uction (\$57.7	′0 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle In KANTOLA, KEVIN, , ,	nitial) or Full C	rganization Name	Date of	Receipt			
Mailing Address 7031 HALSTEAD DRIVE			09	/ D D 30	/ Y	y y 2017	Y
City MINNETRISTA	State MN	Zip Code 55364-3201		action ID : P of Each Re			
FEC ID number of contributing federal political committee.	С				J.	78.0	0
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Me	emo Item			
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		741.00	P/R Dedu	uction (\$39.0	0 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle II C. O'BRIEN, DENNIS, , ,	nitial) or Full C	rganization Name	Date of	Receipt			
Mailing Address 61 LOUGHLIN AVE	State	Zin Onda	09	/ D D D 30		2017	
City COS COB	CT	Zip Code 06807-2621		of Each Re			)
FEC ID number of contributing federal political committee.	С					384.6	0
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Me	emo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Ded	uction (\$192.	.30 Bi-W	'eekly)	
SUBTOTAL of Receipts This Page (optional)		••••••			9	578.0	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	★         11a         11b         11c         12           13         14         15         16         17
			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle <b>A.</b> VERNEY, JEFFERY, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 266 WESTLEDGE ROAD			M M / D D / Y Y Y Y 09 30 2017
City WEST SIMSBURY	State CT	Zip Code 06092-2017	Transaction ID : PR2247627447240           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		486.42
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3297.45	P/R Deduction (\$243.21 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. GARODIA, SANJAY, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 110 COVINGTON COURT			09 30 / Y Y Y Y 2017
City OAK BROOK	State IL	Zip Code 60523-2574	Transaction ID : PR2247627847240
FEC ID number of contributing	_	00323-2374	Amount of Each Receipt this Period
federal political committee.	C		76.92
Name of Employer (for Individual) Optum Services, Inc	Occ CO	upation (for Individual) O	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)
Other (specify) <b>v</b>	L	, 730.74	
Full Name of Individual (Last, First, Middle OHMAN, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 205 RIVERMERE WAY		1	09 / D D / Y Y Y Y 09 30 2017
City ATLANTA	State GA	Zip Code 30350-6346	Transaction ID : PR2247628047240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			755.64
TOTAL This Period (last page this line numb	er only)		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middl <b>PRINCE, JOHN</b> , , ,	Date of Receipt							
Mailing Address 546 HARRINGTON ROA	M M / D D / Y Y Y Y 09 30 2017							
City WAYZATA	State MN	Zip Code 55391-1550	Transaction ID : PR2259738447240           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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middl B. CRONN, CHRISTOPHER, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 1122 COLORADO STRE SUITE 2399	ET		09 / D D / Y Y Y Y Y 2017					
City AUSTIN	State TX	Zip Code 78701-2132	Transaction ID : PR2270522947240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		126.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) vt Affs Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1055.74	P/R Deduction (\$63.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middl C. CURRY, CAROLE, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 411 FLEECE FLOWER E			09 / D D / Y Y Y Y Y 2017					
City GAITHERSBURG	State MD	Zip Code 20878-2646	Transaction ID : PR2402315747240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	l)		539.52					
TOTAL This Period (last page this line num	nber only)							

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	Use separate schedule		(check only one)
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         1 <sup>1</sup>
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 <b>A.</b> FRASCINO, MJ, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 7 PIONEER DRIVE			09 30 Y Y Y Y Y 2017
City ELLINGTON	State CT	Zip Code 06029-3221	Transaction ID : PR2402316547240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Comm	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle I KEPLEY CARRIER, ANGELA, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 3219 PENINSULA DRIVE			09 / D D / Y Y Y Y Y 2017
City	State	Zip Code	Transaction ID : PR2402317747240
JAMESTOWN	NC	27282-8717	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
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 ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle I C. LEVI-BAUMGARTEN, MARILYN		rganization Name	Date of Receipt
Mailing Address 4800 W 27TH ST			09 / D D / Y Y Y Y 09 30 2017
City SAINT LOUIS PARK	State MN	Zip Code 55416-1933	Transaction ID : PR2402317947240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			108.00
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	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle Ini LOGAN, JAKE, , ,	tial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4826 EAST CALLE REDOND	A		09 30 2017					
City	State	Zip Code	Transaction ID : PR2402318247240					
PHOENIX	AZ	85018-2931	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
United HealthCare Services Inc		t Affs Dir	_					
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify) ▼		3653.70						
Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name						
B. MCGRATH, STACY, , ,	,		Date of Receipt					
Mailing Address 5801 CHOWEN AVE S		7. 0.1	09 / Y Y Y Y 2017					
City EDINA	State MN	Zip Code 55410-2759	Transaction ID : PR2402318547240 Amount of Each Receipt this Period					
FEC ID number of contributing								
federal political committee.	С		34.24					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify)		325.28	P/R Deduction (\$17.12 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ini C. ROSSI, DAVID, , ,	tial) or Full O	rganization Name	Date of Receipt					
Mailing Address 11632 KNOX STREET			09 30 / Y Y Y Y 2017					
City OVERLAND PARK	State KS	Zip Code 66210-3608	Transaction ID : PR2402319647240					
FEC ID number of contributing			Amount of Each Receipt this Period					
federal political committee.	C		36.50					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:	1	Year-to-Date ▼	-					
Primary General Other (specify)		237.25	P/R Deduction (\$18.25 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			455.34					
TOTAL This Period (last page this line number	only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
I LIVILLED RECEIPIO		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12									
			13     14     15     16     17       erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. CRANLEY, SHELLEY, , ,	e Initial) or Full C	rganization Name	Date of Receipt 09 30 2017									
Mailing Address 3801 MAURICE COURT												
City LAS VEGAS	State NV	Zip Code 89108-5245	Transaction ID : PR2402444447240 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		50.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	P/R Deduction (\$25.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. ANLIKER, JAY, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4306 MOUNTAIN LANE			09 / D D / Y Y Y Y 09 30 2017									
City WAUSAU	State WI	Zip Code 54401-8543	Transaction ID : PR2402445047240 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		40.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) O TPA	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. BECKER, JAMES, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 378 FERNDALE ROAD V	1		09 / D D / Y Y Y Y 2017									
City WAYZATA	State MN	Zip Code 55391-1559	Transaction ID : PR2402445147240           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) POps	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	l)		474.60									
TOTAL This Period (last page this line num	ber only)	······										

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page		<b>X</b> 11a		111	-	11c	12	Г	17		
	y information copied from such Reports and State for commercial purposes, other than using the na					for the		pos	e of :	soliciting	g contri	butio	ns		
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) COLEMAN, JAMES, , ,	or Full O	rgar	ization Name		Date of Receipt									
	Mailing Address 4720 WEST 66TH STREET														
	City EDINA	State MN		Zip Code 55435-1506						PR2402					
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period 428.56									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) SVP, Human Capital		М	emo	o Ite	÷m						
	Receipt For:       µ         Primary       General         Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 3499.92		P/R Ded	luctio	on (	(\$214	.28 Bi-V	Veekly)				
в.	Full Name of Individual (Last, First, Middle Initial)	or Full O	Orgar	ization Name		Date o	f Re	ecei	pt						
	Mailing Address 11688 TANGLEWOOD DRIVE	1				09 / D D / Y Y Y Y 2017									
	City EDEN PRAIRIE	State MN		Zip Code 55347-4726				-		PR2402					
	FEC ID number of contributing federal political committee.	С				384.60									
	Name of Employer (for Individual) Optum Services, Inc	Occ Bus		Memo Item											
	Receipt For:       µ         Primary       General         Other (specify) ▼	Aggregate	r-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial) HIGA, JOY, , ,	or Full O	rgar	ization Name		Date o	f Re	eceij	pt						
	Mailing Address 2208 ELM AVENUE	1				09 <sup>M</sup>	/	Ľ	30	/ Y	y 2017				
	City MANHATTAN BEACH	State CA		Zip Code 90266-2809	┝					PR2402					
	FEC ID number of contributing federal political committee.	C				Amoun	l OT	⊨ao	JI RE	eceipt th		od 60.00			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	•	ion (for Individual) Affs		M	lemo	o Ite	∍m						
	Receipt For:     /       Primary     General       Other (specify)	Aggregate	Yea	r-to-Date ▼ 570.00	P/R Deduction (\$30.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•							87	73.16			
т	OTAL This Period (last page this line number only	y)			-			-				-			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>४</b> 11a ☐ 11b ☐ 11c ☐ 12									
			13         14         15         16         17           erson for the purpose of soliciting contributions									
or for commercial purposes, other than using	the name and a	address of any political committee	e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group PA	NC)									
Full Name of Individual (Last, First, Middle ALEXANDER, CORY, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 4203 BRADLEY LANE	1		09 30 / Y Y Y Y 2017									
City	State	Zip Code	Transaction ID : PR2405428847240									
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 External Affairs	Memo Item									
Receipt For:	Aggregate	Year-to-Date V										
Other (specify) ▼		3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle SAELENS, KAREN, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 105 N FLORENCE AVE			09 / 0 0 / 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
City	State	Zip Code	Transaction ID : PR2408544847240									
LITCHFIELD PARK	AZ	85340-4424	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		40.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , , , 380.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. WEE, KATHLYN, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 2225 46TH ST NW	1		09 / D D / Y Y Y Y 2017									
City	State	Zip Code	Transaction ID : PR2408545047240									
WASHINGTON	DC	20007-1032	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? State SIs OptumI	Memo Item									
Receipt For:		Year-to-Date ▼										
Primary General Other (specify)		3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)		••••••	. 809.20									
TOTAL This Period (last page this line numb	er only)	•••••										

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

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17										
			person for the purpose of soliciting contributions be to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle A. CORZINE, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9350 TRACEYTON DRIVE			09 30 2017										
City	State	Zip Code	Transaction ID : PR2437119747240										
DUBLIN	ОН	43017-9689	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		40.00										
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
United HealthCare Services Inc	Dir	Mktg Bus Dev											
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		380.00	P/R Deduction (\$20.00 Bi-Weekly)										
		Ap. Ap. Ab.											
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name	Data of Despirit										
B. FUENTEVILLA, ANA, , , Mailing Address 4815 N CAMINO ESCUEL/	Δ		Date of Receipt										
	<b>`</b>		09 30 2017										
City	State	Zip Code	Transaction ID : PR2437119847240										
TUCSON	AZ	85718-5913	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		471.42										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off	Memo Item										
Receipt For:	Aggregate	Year-to-Date 🔻											
Other (specify)		3349.94	P/R Deduction (\$235.71 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. HAGAN, WILLIAM, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6536 E GREYTHORN DRI	VE		09 30 2017										
City	State	Zip Code	Transaction ID : PR2437120047240										
SCOTTSDALE	AZ	85266-6761	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		76.92										
Name of Employer (for Individual)		upation (for Individual)	Memo Item										
United HealthCare Services Inc Receipt For:		Segment CEO											
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)										
Other (specify)		730.74	The Deduction (\$50.40 Dr Weekly)										
SUBTOTAL of Receipts This Page (optional)			588.34										
TOTAL This Period (last page this line numb	er only)												

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 53 OF

	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page											
			13     14     15     16     17       berson for the purpose of soliciting contributions       to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	using the name and a												
UnitedHealth Group Inco	rporated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, I JOHNSON-MILLS, RITA, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 235 GOVERNORS	WAY												
City BRENTWOOD	State TN	Zip Code 37027-8931	Transaction ID : PR2437120147240 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		424.74										
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 ▼ 3513.30	P/R Deduction (\$212.37 Bi-Weekly)										
Full Name of Individual (Last, First, I B. WEISS, JACK, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 6245 NORTH 75 ST	REET		09 30 2017										
City	State	Zip Code	Transaction ID : PR2437120547240										
SCOTTSDALE	AZ	85250-4621	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		50.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ired Svs Regn CMO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	P/R Deduction (\$25.00 Bi-Weekly)										
Full Name of Individual (Last, First, I BALTHAZOR, PAUL, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9013 FARNSWORT			09 / Y Y Y Y 2017										
City BROOKLYN PARK	State MN	Zip Code 55443-1754	Transaction ID : PR2437120747240           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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (op	tional)		859.34										
TOTAL This Period (last page this line	number only)												

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

## Use separate schedule(s)

FOR LINE NUMBER:

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171			Use separate schedule(s)	(ch	(check only one)										
			for each category of the Detailed Summary Page	×	11a		1b	11c	12						
	y information copied from such Reports and Sta for commercial purposes, other than using the r						se of s								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P	AC)											
A.	Full Name of Individual (Last, First, Middle Initia PRESTON, ROBERT, , ,	al) or Full O	organization Name		Date of Receipt										
	Mailing Address 6594 HARBOR BEACH NE				09 30 / Y Y Y Y 09 30 2017										
	City PRIOR LAKE	State MN	Zip Code 55372-8201						<b>2144724</b> is Period	0					
	FEC ID number of contributing federal political committee.	C				- 1		-9	47.	60					
	Name of Employer (for Individual) Optum360 Services Inc	Occu VP (	upation (for Individual) Ops		Me	emo li	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.20	] [	P/R Dedu	uction	(\$23.80	0 Bi-We	ekly)						
в.	Full Name of Individual (Last, First, Middle Initia NESS, LAURA, , ,	al) or Full Oi	organization Name		Date of Receipt										
	Mailing Address 10550 PINNACLE WAY				09	/	D D D 30	/ Y	2017	Y					
	City WOODBURY	State MN	Zip Code 55129-4282						<b>2154724</b> is Period	0					
	FEC ID number of contributing federal political committee.	С				-			457.	60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3398.20	] P	9/R Dedu	iction	(\$228.8	80 Bi-W	eekly)						
с.	Full Name of Individual (Last, First, Middle Initia COSGRIFF, JOHN, , ,	al) or Full O	organization Name		Date of	Rece	eipt								
	Mailing Address 1837 SUMMIT LANE				09	1	D D D 30		2017						
	City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137						2164724	0					
	FEC ID number of contributing federal political committee.	С			<u> </u>			g	384.	60					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Bus Dev		Me	emo l	tem								
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 3653.70	]   f	P/R Ded	uction	ı (\$192.:	30 Bi-W	/eekly)							
s	UBTOTAL of Receipts This Page (optional)			•		,		y	889.	30					
Т	OTAL This Period (last page this line number or	nly)		•				-,							

FOR LINE NUMBER:

(check only one)

PAGE 55 OF

	EMIZED RECEIPTS			for each category of the Detailed Summary Page	×	]11a		1	l1b		11c	12		
٨٣	y information copied from such Reports and State	monto mo		, ,		13			4		15 Oliciting	16	17	
	y information copied from such Reports and State for commercial purposes, other than using the na													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Un	itedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) RAINEY, PETER, , ,	or Full O	Drga	nization Name	Date of Receipt									
	Mailing Address 3115 WEST 47 STREET			1										
	City MINNEAPOLIS	State MN		Zip Code 55410-1857							_	275472	-	
			_	55410-1057	-	Amou	nt o	fΕ	ach I	Rec	ceipt th	is Perio	d	
	FEC ID number of contributing federal political committee.	С	_					,		_	-	384	.60	
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)	-		Mem	no I	ltem					
	United HealthCare Services Inc	SVF	P Co	orp Controller										
		ggregate	Yea	ar-to-Date <b>V</b>										
	Primary     General       Other (specify) ▼		-	3653.70	P.	/R De	educ	tion	n (\$19	92.3	30 Bi-W	(eekly)		
В.	Full Name of Individual (Last, First, Middle Initial) LIPPERT, ROBIN, , ,	or Full O	Drga	nization Name		Date	of R	lece	eipt					
	Mailing Address 404 A ST SE					09 30 / Y Y Y Y 2017								
	City	State		Zip Code		Trar	nsac	tio	n ID :	: Pf	R24399	280472	40	
	WASHINGTON	DC		20003-3807	/	Amou	nt o	fΕ	ach I	Rec	ceipt th	is Perio	b	
	FEC ID number of contributing federal political committee.	С				384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) VP External Affs					Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initial) HEYMAN, STEPHEN, , ,	or Full O	Drga	nization Name		Date	of R	lece	eipt					
	Mailing Address 5300 SHERRILL AVENUE					M 09	М	/	30		/ Y	y y 2017	Y	
	City	State		Zip Code		Tra	nsac	tio	n ID	: P	R24442	2657472	40	
	CHEVY CHASE	MD		20815-3720	_ /	Amou	nt o	fΕ	ach I	Rec	ceipt th	is Perio	b	
	FEC ID number of contributing federal political committee.	С						,			g	384	.60	
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)	$\neg$		Merr	no I	ltem					
	United HealthCare Services Inc			ovt Affs										
		ggregate	Yea	ar-to-Date 🔻										
	Primary General Other (specify)		-	3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)									-		1153	.80	
					· i			7		=	,			
1	OTAL This Period (last page this line number only	()	• • • • • •	•••••••			-	- 7		-				

### 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	★         11a         11b         11c         12           13         14         15         16         17									
Any information copied from such Reports and s or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle In LANGER, DONALD, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5110 OAK RAMBLING DRIV	E											
City KATY	State TX	Zip Code 77494-1971	Transaction ID : PR2445015447240 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		230.48									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1713.36	P/R Deduction (\$115.24 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In B. LIND, NANCY, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2703 NORTHVIEW LANE			09 / 09 / 2017									
City	State	Zip Code	Transaction ID : PR2445016247240									
CEDAR FALLS	IA	50613-1655	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For:	Aggregate	Year-to-Date V										
Primary General Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In C. ADLINGTON SHKABERIN, AMY		rganization Name	Date of Receipt									
Mailing Address 4329 EWING AVE S			09 30 / Y Y Y Y 2017									
City MINNEAPOLIS	State MN	Zip Code 55410-1342	Transaction ID : PR2445016447240 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		412.08									
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 ▼ 3557.66	P/R Deduction (\$206.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			670.56									
TOTAL This Period (last page this line number	only)											

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (	UnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle SIEGEL, DAVID, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 264 LAKEWOOD DRIVE												
City BLOOMFIELD HILLS	State MI	Zip Code 48304-3531	Transaction ID : PR2445017147240 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. KRAJNOVICH, DANIEL, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 9958 BUTTONDOWN LAN	E		09 30 2017									
City ZIONSVILLE	State IN	Zip Code 46077-8135	Transaction ID : PR2460167347240 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		40.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 380.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle RENFRO, LARRY, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 5 DOVE LANE	1		09 / 0 / Y Y Y Y 09 30 2017									
City ANDOVER	State MA	Zip Code 01810-2845	Transaction ID : PR2460168147240 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) E CHAIRMAN & CEO Optum	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			452.68									
TOTAL This Period (last page this line numb	er only)											

FOR LINE NUMBER:

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ITEMIZED RECEIP	, те		Use separate schedule(s)	(che	eck only one)										
	13		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<b></b>					
Any information copied from	such Reports and Statemen	nts may	not be sold or used by any porters of any political committee	erson f	13 for the plicit con	purp	14 Dose of	soliciting	16 g contribut	ions					
NAME OF COMMITTEE	-	anu auu						TOTT SUC	II COMMILLE						
		AC (Ur	itedHealth Group PA	AC)											
A. ORBUCH, DAVID, , ,	ast, First, Middle Initial) or	Full Orga	anization Name	Date of Receipt											
Mailing Address 2220 CE					09 30 Y Y Y Y Y 2017										
City MINNEAPOLIS	Sta M		Zip Code 55416-3644						168247240 nis Period	)					
FEC ID number of contrib federal political committee	ů.			Amount of Each Receipt this Period											
Name of Employer (for Ir UHC International Service	,	Occupa Optum	ation (for Individual) Exec		Me	emo	Item								
Receipt For: Primary G Other (specify) ▼	eneral Aggr	regate Ye	ar-to-Date ▼ 1826.85	]   P/	/R Dedu	uctic	on (\$96.	.15 Bi-W	eekly)						
Full Name of Individual (I B. WEXLER, ERIC, , ,	ast, First, Middle Initial) or	Full Orga	anization Name		Date of Receipt										
Mailing Address 7220 WI					м м 09	/	D D D 30		2017	Y					
		State Zip Code MI 48324-3081							723147240	)					
WEST BLOOMFIELD		1	_	Amount	of	Each R	leceipt th	nis Period							
FEC ID number of contrit federal political committee	ů.	C					480.80								
Name of Employer (for Ir United HealthCare Service		Occupation (for Individual) Bus Segment Gen Counsel					Memo Item								
Receipt For: Primary G Other (specify) V	eneral	Aggregate Year-to-Date ▼ 3317,20					P/R Deduction (\$240.40 Bi-Weekly)								
	ast, First, Middle Initial) or	<b>Full Ore</b>	-												
c. <u>WALKOWSKI, KA</u>		Full Orga			Date of	Re	ceipt								
Mailing Address 6359 CC			7		09	/	30		2017						
City EDEN PRAIRIE	Sta Mi		Zip Code 55346-1342						72344724	J					
FEC ID number of contrib federal political committee	ů.						9	. ,	28.0	8					
Name of Employer (for In Optum Services, Inc		Mgng C	ation (for Individual) Cnslt HHS		Me	emo	Item								
Receipt For: Primary G Other (specify)	eneral Aggr	egate Ye	ar-to-Date ▼ 266.76	<b>]</b> P.	P/R Deduction (\$14.04 Bi-Weekly)										
SUBTOTAL of Receipts Th	is Page (optional)		••••••	•			,		701.1	8					
TOTAL This Period (last pa	ge this line number only)														

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category Detailed Summary		✗         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and Sta for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	UnitedHealth G	roup PAC	)								
<u> </u>	Full Name of Individual (Last, First, Middle Initia GILL, PETER, , ,	al) or Full C	Drganization Name		Date of Receipt								
	Mailing Address 8673 SHERWOOD BLUFF				09 30 2017								
	City EDEN PRAIRIE	State MN	Zip Code 55347-3433		Transaction ID : PR2463724647240 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			0.00								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Corp Dev		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4	999.90	P/R Deduction (\$0.00 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia SCHICK, SUSAN, , ,	al) or Full C	Drganization Name		Date of Receipt								
	Mailing Address 1220 DENBIGH LANE				09 / 0 / Y Y Y Y 2017								
	City WAYNE	State PA	Zip Code 19087-4644		Transaction ID : PR2480620547240 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 ief Growth Off	)	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	653.70	P/R Deduction (\$192.30 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia ABBOTT, CHRISTOPHER, , ,	al) or Full C	Drganization Name		Date of Receipt								
	Mailing Address 12700 MUNDOMAR DR				09 / D D / Y Y Y Y 2017								
	City AUSTIN	State TX	Zip Code 78739-1542		Transaction ID : PR2484541547240 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			81.00								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Plan CEO		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	716.50	P/R Deduction (\$40.50 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			····· ►	465.60								
т	OTAL This Period (last page this line number o	nly)		····· ►									

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16						17					
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose		oliciting	contribu	tions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	itedHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initial) BURNS, MATTHEW, , ,	or Full O	rgar	nization Name	[	Date of Receipt										
	Mailing Address 2724 BISON DRIVE					09 30 / Y Y Y Y 2017										
	City	State OK		Zip Code		Transaction ID : PR2484541747240										
	EDMOND	UK		73034-3475	_	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						-		-9-	250.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upat Corr	tion (for Individual) nm		Me	emo	lte	m							
	Receipt For:		Yea	ur-to-Date ▼												
	Primary General Other (specify) ▼		104	2375.00	P/	R Ded	uctio	on (S	\$125.0	00 Bi-W	/eekly)					
В.	Full Name of Individual (Last, First, Middle Initial) PHILLIPS, MARK, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot							
	Mailing Address 1760 LUCY RIDGE CT					09 / D D / Y Y Y Y 09 30 2017										
	City	State		Zip Code		Transaction ID : PR2484542647240										
	CHANHASSEN	MN		55317-7661	A	mount	of	Eac	h Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С				384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) SVP SIs					Memo Item								
	Receipt For:       A         Primary       General         Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 3076.80	P/	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) MANDERFELD, THOMAS, , ,	or Full O	rgar	nization Name		Date of	Re	ceip	ot							
	Mailing Address 3760 WEST CALHOUN PARKW	AY				м м 09	/	D	30	/ Y	y y 2017	Y				
	City	State		Zip Code		Trans	acti	ion	ID : P	R2486	69794724	0				
	MINNEAPOLIS	MN		55410-1118	A	mount	of	Eac	h Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С						,		9	80.	00				
	Name of Employer (for Individual)		•	tion (for Individual)		Me	emo	b Ite	m							
	United HealthCare Services Inc Receipt For:	1		tal Mkt Comm	_											
	Primary General Other (specify)	Aggregate	Yea	rr-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)			<b>&gt;</b>							714.	60				
	OTAL This Period (last page this line number only				Ì			, ,		,						
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## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
or for commercial purposes, other than using			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	(C)						
Full Name of Individual (Last, First, Middle MCMAHON, DIRK, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 60 WILDHURST ROAD			09 30 / Y Y Y Y 2017						
City EXCELSIOR	State MN	Zip Code 55331-8461	Transaction ID : PR2491457047240						
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) Grp Pres & COO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. NATHAN, DONALD, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 275 GREENWICH STREE	Mailing Address 275 GREENWICH STREET #30								
City NEW YORK	State NY	Zip Code 10007-2150	Transaction ID : PR2491457347240 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 Chief Comm Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SULLIVAN, KATHRYN, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 530 N LAKE SHORE DR			09 / D D / Y Y Y Y 09 30 2017						
City CHICAGO	State IL	Zip Code 60611-7435	Transaction ID : PR2491457547240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		485.52						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ) E&I Regions	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3300.60	P/R Deduction (\$242.76 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	)		. 1254.72						
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 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 SMITH, KARA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 610 CRESTWOOD DRIVE			M M / D D / Y Y Y Y 09 30 2017						
City	State VA	Zip Code	Transaction ID : PR2540175347240						
ALEXANDRIA	VA	22302-2533	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	VP	Govt Affs							
Receipt For:	Aggregate	Year-to-Date <b>V</b>							
Other (specify) ▼		3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
			1						
Full Name of Individual (Last, First, Middle I B. PURDY, PATRICIA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7417 LYNNHURST STREE	Г		09 30 / Y Y Y Y						
City	State	Zip Code	Transaction ID : PR2541300647240						
CHEVY CHASE	MD	20815-3101	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:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. TIERNEY, JOELLE, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5710 TAYCHOPERA RD			09 30 2017						
City	State	Zip Code	Transaction ID : PR2541300747240						
MADISON	WI	53705-1020	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		282.28						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Dir (	Govt Affs							
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify)		1793.26	P/R Deduction (\$172.39 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1051.48						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions the 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 I VERSAGGI, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 800 ALBANY AVENUE			09 30 2017						
City ALEXANDRIA	State VA	Zip Code 22302-3501	Transaction ID : PR2541300847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.32						
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 ▼ 1827.04	P/R Deduction (\$96.16 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. HOSTETLER, BRENDAN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2309 W WINNEMAC AVE	Chata	Zin Oode	09 / D D / Y Y Y Y 2017						
City CHICAGO	State IL	Zip Code 60625-1817	Transaction ID : PR2542541947240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		126.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1055.74	P/R Deduction (\$63.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I RAMSAY, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 543 E LURAY AVE			09 / D D / Y Y Y Y 2017						
City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542247240           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) Regl Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 950.00	P/R Deduction (\$50.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			419.24						
TOTAL This Period (last page this line number	er only)	······							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	-			11	H		11c	12	
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments ma ne and a	l ay no iddre	ot be sold or used by any pe ess of any political committee	rson f to sol	13 or tl licit	he	purp ntrib	pos puti	se of	so	15 liciting n such	16 contribu commit	Itions tee.
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I													
A.	Full Name of Individual (Last, First, Middle Initial) SPENCER, IPYANA, , ,	or Full O	rgar	nization Name	[	Date	e of	Re	ece	ipt				
	Mailing Address 4226 40TH STREET NORTH					м 0		/	l	D D 30		/ Y	y y 2017	Y
	City	State VA		Zip Code		-	-		-				4234724	-
	ARLINGTON	VA		22207-4610	A	٩mo	unt	of	Ea	ich R	lece	eipt thi	s Period	
	FEC ID number of contributing federal political committee.	C							-			- <b>J</b> -	60	.00
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual)   Bus Dev			Me	emo	b It	em				
	Receipt For:	ggregate	Yea	r-to-Date ▼										
	Primary     General       Other (specify) ▼									(\$30.	.00	Bi-We	ekly)	
В.	Full Name of Individual (Last, First, Middle Initial) YAU, ANNE, , ,	or Full O	rgar	nization Name		Date	e of	Re	ece	ipt				
Mailing Address 9905 WOODLAND DRIVE							09 / D D / Y Y Y Y 2017							
	City SILVER SPRING	State MD		Zip Code 20902-4047					-				8254724 s Perioc	
	FEC ID number of contributing federal political committee.	C				124.54						54		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) I Affs Dir			Me	emo	o It	em				
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 1064.08	P/	'R D	edu	uctic	on	(\$62.)	27	Bi-Wee	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgar	nization Name		Date	e of	Re	ece	ipt				
	Mailing Address 141 PELHAM ROAD					0	9 <sup>M</sup>	/	ľ	<sup>D</sup> 30		/ Y	2017	Y
	3	State		Zip Code		Tra	ans	acti	ior	n ID :	PR	25523	136472	40
	PHILADELPHIA	PA		19119-2661	/	Amo	unt	of	Ea	ich R	lece	eipt thi	s Period	
	FEC ID number of contributing federal political committee.	C						_	9	_	_	y	708	.33
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual)			Me	emo	o It	em				
	Receipt For:	are Services Inc HIth Plan CEO Aggregate Year-to-Date ▼												
	Primary General Other (specify)	ggregate		1208.31	P	/R [	Ded	uctio	on	(\$54 <sup>-</sup>	1.6 <sup>.</sup>	7 Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)			•					1			9	892	87
т	OTAL This Period (last page this line number only	)							7		I	-9-		

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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 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. ALTER, JEFFREY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3 WOODLAND ROAD			09 30 Y Y Y Y 2017						
City PORT JEFFERSON	State NY	Zip Code 11777-1053	Transaction ID : PR2552960247240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Bus	upation (for Individual) Segment CEO	Memo Item						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BROOKS, KEVIN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2750 FOUNTAIN LANE N	09 30 / Y Y Y Y 2017								
City PLYMOUTH	State MN	Zip Code 55447-1705	Transaction ID : PR2552961047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. BRUNELL, MARK, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 20 VERMILION CLIFFS			09 / D D / Y Y Y Y 2017						
City ALISO VIEJO	State CA	Zip Code 92656-8096	Transaction ID : PR2552961247240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R URS SAE	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		440.60						
TOTAL This Period (last page this line num	ber only)								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ILEWILED KEGEIPIS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	_		
Any information copied from such Report	s and Statements ma	av not be sold or used by any n	erson for the		14 pose of	15 soliciting	16 contribut	17 ions		
or for commercial purposes, other than u										
NAME OF COMMITTEE (In Full)	porated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, M BRYANT, JEREMY, , ,	iddle Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 4534 MYSTIQUE WA	Y		M 09		D D 30	/ Y	2017	Y		
City ROSWELL	State GA	Zip Code 30075-2087					<b>6134724</b> is Period	D		
FEC ID number of contributing federal political committee.	С				-	-	70.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Mgmt NA Accts	۲ 🗌	Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 665.00	P/R De	educti	on (\$35.	00 Bi-We	ekly)			
Full Name of Individual (Last, First, M B. EHLMAN, MICHAEL, , ,	iddle Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 10051 VALLEY RIDG			09		30	/ Y	2017	Y		
City LAS VEGAS	State NV	Zip Code 89148-7602					6224724	)		
FEC ID number of contributing federal political committee.	С		Amou	nt of	Each R	eceipt th	is Period 28.0	00		
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Apps Dev	י 🗖 🗌	Memo	tem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R De	ductio	on (\$14.)	00 Bi-We	ekly)			
Full Name of Individual (Last, First, M FLANNERY, SCOTT, , ,	iddle Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 8508 TRELADY CT	01-14	7.0.1	09		30		2017 <sup>°</sup>			
City PLANO	State TX	Zip Code 75024-6827					<b>36234724</b> is Period	U		
FEC ID number of contributing federal political committee.	С				, .	9	78.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Memo	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 741.00	P/R De	educti	on (\$39.	00 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (opti	onal)				,		176.0	00		
TOTAL This Period (last page this line	number only)	······			-					

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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•••				Detailed Summary Page		<b>×</b> 11a		11	b	11c		12		
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or	y information copied from such Reports and St for commercial purposes, other than using the													
$\backslash$	NAME OF COMMITTEE (In Full)		110	itad Uaalth Craup D/	$\sim$									
/	UnitedHealth Group Incorporate				(U)									
٩.	Full Name of Individual (Last, First, Middle Init HANNAN, CLAIRE L, , ,	ial) or Full C	Drga	nization Name		Date of Receipt								
	Mailing Address 25932 PORTAFINO DRIVE					09 30 2017								
	City	State		Zip Code		Trans	acti	ion	ID : F	R2552	9627	74724	0	
	MISSION VIEJO	CA		92691-5716	_	Amount	of	Ea	ch Re	ceipt th	nis P	Period		
	FEC ID number of contributing federal political committee.	С						-		-17-		39.0	)0	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt		Me	emo	o Ite	em					
	Receipt For:	Aggregate	Yea	ur-to-Date ▼										
	Primary General					P/R Dedu	uctio	on	(\$39.0	0 Bi-W	eekly	y)		
	Other (specify) V		-	702.00										
3.	Full Name of Individual (Last, First, Middle Init JAMES, GREGORY, , ,	ial) or Full C	Drga	nization Name		Date of	Re	ecei	ipt					
Mailing Address 2323 KINGS POINT DRIVE						M M / D D / Y Y Y Y Y								
	0.4	01-1-2		Zia Ocala		09	L.	L	30		20	)17		
		State FL		Zip Code						R2552			)	
	LARGO	FL		33774-1009	_	Amount	of	Еa	ich Re	ceipt th	nis P	'eriod		
	FEC ID number of contributing federal political committee.	С		133.32										
	Name of Employer (for Individual) Optum Services, Inc		cupa Med	tion (for Individual) Dir		Me	emo	o Ite	em					
	Receipt For:	Aggregate	Yea	ur-to-Date ▼										
	Primary General Other (specify) ▼		,	533.28	'	P/R Dedu	uctio	on (	(\$66.6	6 Bi-We	eekly	/)		
_	Full Name of Individual (Last, First, Middle Init KIDAMBI, NARASIMHAN, , ,	ial) or Full C	Drga	nization Name		Date of	Re	ocei	int					
	Mailing Address 18477 85TH AVE N					09	/	_	30	/ Y		)17	Y	
	City	State		Zip Code		Trans	act	ion	ID : F	R2552	9638	84724	0	
	MAPLE GROVE	MN		55311-1663		Amount	of	Ea	ch Re	ceipt th	nis P	Period		
	FEC ID number of contributing federal political committee.	С						,		y		40.0	)0	
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)		Me	əmc	o Ite	em					
	United HealthCare Services Inc	Ass	c Di	Bus Anlys										
	Receipt For:													
	Primary General Other (specify)		-	380.00		P/R Ded	ucti	ion	(\$20.0	0 Bi-W	eekly	y)		
	JBTOTAL of Receipts This Page (optional)			· · ·	 	<u> </u>	_	9	-	5		212.3	12	

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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		Use separate schedule(s)	(cheo	(check only one)						
111			for each category of the Detailed Summary Page	×	11a	11		11c	12	<u> </u>
	y information copied from such Reports and Sta for commercial purposes, other than using the						se of sc			
<u></u>	NAME OF COMMITTEE (In Full)		, see e, pensour commune					. 5001		
$\left\langle \right\rangle$	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)						
Α.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	D	ate of	Recei	ipt			
	Mailing Address 6268 ORCHARD PARK				09	/	30	/ Y	y y 2017	Ŷ
	City FRISCO	State TX	Zip Code 75034-5126						6424724 s Perioc	-
	FEC ID number of contributing federal political committee.	C				-		-7-	384	60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO		Me	mo Ite	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/f	R Dedu	iction	(\$192.3	80 Bi-W	eekly)	
в.	Full Name of Individual (Last, First, Middle Initia MACLEOD, JULIE, , ,	al) or Full O	rganization Name	D	ate of	Recei	ipt			
	Mailing Address 15314 JEFFERS PASS NW	1			м м 09	/	30	/ Y	2017	Y
	City PRIOR LAKE	State MN	Zip Code 55372-3614						6444724	-
	FEC ID number of contributing federal political committee.	С			mount		ICH Rec		s Perioc 28	.00
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nan Capital Partner Mgr	1	Me	mo Ite	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/F	R Dedu	ction	(\$14.00	Bi-We	ekly)	
C.	Full Name of Individual (Last, First, Middle Initia MARTO, MICHELLE, , ,	al) or Full O	rganization Name	D	ate of	Recei	ipt			
	Mailing Address 149 WILLIAMSBURG COURT	Ototo	Zie Oode		09 -	L L	30		2017	
	City ALBANY	State NY	Zip Code 12203-5502						6474724 s Perioc	
	FEC ID number of contributing federal political committee.	С			_	y		,	28	.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo Ite	em			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/I	R Dedu	uction	(\$14.00	) Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)					9		5	440.	60
т	OTAL This Period (last page this line number o	nly)				-,-		-7-		

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

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
VinitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I MATTSON, CARL, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 539 ROUTE 9P			09 30 / Y Y Y Y 2017							
City SARATOGA SPRINGS	State NY	Zip Code 12866-7279	Transaction ID : PR2552964847240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		169.66							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 620.15	P/R Deduction (\$84.83 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I MORRIS, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 2624 N HARTLAND COURT			09 / D D / Y Y Y Y 2017							
City	State	Zip Code	Transaction ID : PR2552965047240							
CHICAGO	IL	60614-4955	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.76							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date <b>V</b>								
Other (specify) ▼		292.22	P/R Deduction (\$15.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 305 E TUCKEY LN			09 / D D / Y Y Y Y 2017							
City PHOENIX	State AZ	Zip Code 85012-1048	Transaction ID : PR2552965247240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc	Occ Med	upation (for Individual) I Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			228.42							
TOTAL This Period (last page this line numbe	r only)									

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(check only one)

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			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions							
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	(C)							
A.	Full Name of Individual (Last, First, Middle Initial PEKA, GARY, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 8350 CRABAPPLE COURT			09 30 / Y Y Y Y 2017							
	City	State MN	Zip Code	Transaction ID : PR2552965347240							
	VICTORIA		55386-8200	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.00							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Six Sigma	Memo Item							
	Dessint For:	Aggregate	Year-to-Date ▼	—							
	Primary General Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia POTTER, DONALD, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 116 FULLER LANE	09 30 2017									
	City	State	Zip Code	Transaction ID : PR2552965447240							
	WINNETKA	IL	60093-4213	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.00							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial SAMSEL, KRISTINE, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 91 WAVERLY RD			09 30 2017							
	City	State	Zip Code	Transaction ID : PR2552965747240							
	HUNTINGTON	СТ	06484-5835	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.00							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional)			. 84.00							
	OTAL This Period (last page this line number on	ııy)	••••••	· <u>  · · · · · · · · · · · · · · · · · ·</u>							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
	ne name and a	uness of any political committer	to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle ASTREIT, BARRY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5421 KELLOGG AVENUE			09 30 / Y Y Y Y 2017							
City EDINA	State MN	Zip Code 55424-1604	Transaction ID : PR2552966747240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of SIs	Memo Item							
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 1096.11	P/R Deduction (\$57.69 Bi-Weekly)							
Full Name of Individual (Last, First, Middle <b>B.</b> TINKER, ANN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 530 HUNTER FLAT STREE			09 / 09 / 2017							
	State NV	Zip Code	Transaction ID : PR2552966847240							
LAS VEGAS		89138-1110	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle WACKER, AARON, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4704 CAVAN ROAD	<b>12</b> : 1		09 / D D / Y Y Y Y 2017							
City MOUND	State MN	Zip Code 55364-1877	Transaction ID : PR2552967047240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Apps Dev	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			171.38							
TOTAL This Period (last page this line number	er only)									

FOR LINE NUMBER:

(check only one)

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Any information copied from such Reports and S		13 14 15 16 17					
or for commercial purposes, other than using the		y person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)	ed PAC (UnitedHealth Group F	PAC)					
Full Name of Individual (Last, First, Middle Init NAASZ, SCOTT, , ,	tial) or Full Organization Name	Date of Receipt					
Mailing Address 3311 WILDS RIDGE NW		09 30 2017					
City	State Zip Code	Transaction ID : PR2553474747240					
PRIOR LAKE	MN 55372-4540	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	88.58					
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Cust Svs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 690.06	P/R Deduction (\$44.29 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Init B. PROSKAUER, DANIEL, , ,	tial) or Full Organization Name	Date of Receipt					
Mailing Address 240 DERBY STREET		09 30 2017					
City NEWTON	StateZip CodeMA02465-1006	Transaction ID : PR2553475047240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	47.60					
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP IT	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3333.20	P/R Deduction (\$23.80 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Init RAYBURN, MONICA, , ,	tial) or Full Organization Name	Date of Receipt					
Mailing Address 5127 JACKSON PONDS CT		09 / D D / Y Y Y Y 09 30 2017					
City SUGAR LAND	StateZip CodeTX77479-4656	Transaction ID : PR2553475147240					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 78.00					
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Dir Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)					

## Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)									
			for each category of the Detailed Summary Page				11b	11c	12					
	y information copied from such Reports and S													
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	solicit co	ntrik	outions	from sucl	h commit	ee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)										
<u>к</u>	Full Name of Individual (Last, First, Middle Ini THOMAS, RICHARD, , ,	tial) or Full C	organization Name		Date of Receipt									
	Mailing Address 5121 DUPONT AVENUE SOL				м м 09	1	30	D / Y	y y 2017	Y				
	City MINNEAPOLIS	State MN	Zip Code 55419-1151	_					47544724 his Period					
	FEC ID number of contributing federal political committee.	С			<u> </u>				194.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		М	emo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1843.00	]	P/R Ded	lucti	on (\$97	.00 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Ini VOJTA, DENEEN, , ,	itial) or Full C	organization Name		Date o	f Re	eceipt							
	Mailing Address 5201 KELLOGG AVENUE			09 / D D / Y Y Y Y 09 30 2017										
	City EDINA	State MN	Zip Code 55424-1304						47554724	-				
	FEC ID number of contributing	C	55424-1304		Amoun	t of	Each F	leceipt th	nis Period 384.	_				
	federal political committee. Name of Employer (for Individual)		upation (for Individual)		м	emo	o Item							
	United HealthCare Services Inc Receipt For:	SVP Bus Initiv Clin Aff												
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	]	P/R Ded	ucti	on (\$19	2.30 Bi-W	/eekly)					
с.	Full Name of Individual (Last, First, Middle Ini ZERAFA, DANIEL, , ,	I Name of Individual (Last, First, Middle Initial) or Full Organization Name ERAFA, DANIEL, , ,					eceipt							
	Mailing Address 61234 ADMIRAL DRIVE						09 30 2017							
	City WASHINGTON TOWNSHIP	State MI	Zip Code 48094-1242		Transaction ID : PR2553475747240 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	. ,	28.	00				
	Optum Services, Inc VP IT		upation (for Individual) T		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	1	P/R Dec	lucti	ion (\$14	.00 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)			<u> </u>					606.	60				
F 1	OTAL This Period (last page this line number	only)		<b>-</b>	Γ.		-							

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			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	łC)						
Full Name of Individual (Last, First, Middle A. ECKERT, CHRISTINE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 33 BRIGHTVIEW DRIVE			09 30 / Y Y Y Y						
City WEST HARTFORD	State CT	Zip Code 06117-2002	Transaction ID : PR2553783247240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		15.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rchitecture CnsIt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.11	P/R Deduction (\$7.69 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FLAGSTAD, KARSTEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1002 141ST LANE NE			09 / D D / Y Y Y Y Y 2017						
City HAM LAKE	State MN	Zip Code 55304-6770	Transaction ID : PR2554013047240 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) Info Tech	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. MOORE, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10733 TAVISTOCK DRIVE	1		09 / D D / Y Y Y Y 2017						
City TAMPA	State FL	Zip Code 33626-1718	Transaction ID : PR2554013247240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Sls	upation (for Individual) Dir Care Mgmt & Del	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			427.98						
TOTAL This Period (last page this line numb	er only)								

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (	UnitedHealth Group PA	NC)					
Full Name of Individual (Last, First, Middle REIDY, GREGORY, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 4836 W SUNSET BLVD			09 30 / Y Y Y Y 2017					
City TAMPA	State FL	Zip Code 33629-6448	Transaction ID : PR2554013347240					
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)	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 667.64	P/R Deduction (\$47.47 Bi-Weekly)					
Full Name of Individual (Last, First, Middle ALEXANDER, JOY, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ALEXANDER, JOY, , ,							
Mailing Address 5116 NORTH TIOGA WAY	09 / D D / Y Y Y Y 09 30 2017							
City LAS VEGAS	State NV	Zip Code 89149-5830	Transaction ID : PR2560064147240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	s l							
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Mktg	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. BENNETT, JIM, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 3724 PINE TIP ROAD								
City TALLAHASSEE	State FL	Zip Code 32312-1016	Transaction ID : PR2560064247240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ssc Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			150.94					
TOTAL This Period (last page this line numb	er 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         1						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle CLUTE, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7756 N 85TH STREET			M M / D D / Y Y Y Y 09 30 2017						
City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064447240 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) d Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle GAZELEY, PAULA, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name								
Mailing Address 36 MAYFAIR ROAD			09 / D / Y Y Y Y 2017						
	State NY	Zip Code	Transaction ID : PR2560064847240						
WYNANTSKILL		12198-8018	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻	1						
Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. GIANCURSIO, DONALD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 72 MIDNIGHT RIDGE DR			09 / D D / Y Y Y Y 09 30 2017						
City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064947240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Health Plan of Nevada		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			489.52						
TOTAL This Period (last page this line number	er only)								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 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 (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle JONES, JERI, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2932 E MADISON VISTA	S DR		09 30 / Y Y Y Y Y 09 30 2017							
City	State	Zip Code	Transaction ID : PR2560065147240							
PHOENIX	AZ	85016-4981	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. KUNEMUND, GREGG, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9040 RIVERBEND MANO	R		09 30 2017							
City	State	Zip Code	Transaction ID : PR2560065347240							
ALPHARETTA	GA	30022-1813	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		206.04							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1778.83	P/R Deduction (\$103.02 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. LIPPMAN, SHELDON, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 55 CLIFFIELD ROAD			09 30 2017							
City	State	Zip Code	Transaction ID : PR2560065447240							
BEDFORD	NY	10506-1210	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		194.00							
Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	upation (for Individual) Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1843.00	P/R Deduction (\$97.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	,		592.34							

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		H	_	11b	11c	12	<b></b>	
Any information copied from such Reports and or for commercial purposes, other than using			erson for		ourpo					
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle LUCHT, JEFFREY, , ,	,	rganization Name	Da	te of	Rec	eipt				
Mailing Address 33 FOUR SEASONS DRIV	Έ		IV	09	1	D D D 30	/ Y	Y Y 2017	Y	
City ALTON	State NH	Zip Code 03809-4872						06564724 iis Period	0	
FEC ID number of contributing federal political committee.	С			_	,	-		194.	00	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Act Underwriting		Me	mo	ltem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1843.00	P/R Deduction (\$97.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle MARONEY, KEVIN, , ,	Initial) or Full C	organization Name	Da	te of	Rec	eipt				
Mailing Address 5052 NORMAN DRIVE	01-1-	7. 0.1	M	09 / 0 / Y Y Y Y 09 30 / 2017						
City MINNETONKA	State MN	Zip Code 55345-4636						06574724 his Period	0	
FEC ID number of contributing federal political committee.	С			iouni	,			28.0	00	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) cc Gen Counsel		Me	mo	ltem				
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R	Dedu	ctior	n (\$14.(	00 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle C. MELNYK, DONALD, , ,	Initial) or Full C	organization Name	Da	te of	Rec	eipt				
Mailing Address 141 MONROE STREET			N	09 <sup>M</sup>	1	D D 30	/ Y	2017	Y	
City GARFIELD	State NJ	Zip Code 07026-1825						06594724 iis Period	0	
FEC ID number of contributing federal political committee.	С		_	,	,	 y	28.	28		
Name of Employer (for Individual) Optum Services, Inc	Occ Dir /		Me	mo	ltem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 268.66	P/R	Dedu	ictio	n (\$14.	14 Bi-We	eekly)		
SUBTOTAL of Receipts This Page (optional)					,		,	250.2	28	
TOTAL This Period (last page this line numb	er only)					-				

FOR LINE NUMBER:

PAGE 79 OF

ITEMIZED RECEIPTS for each categor		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 (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle MILICH, DAVID, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2702 BIRCHMERE COUR	Г		09 30 2017								
City KATY	State TX	Zip Code 77450-1303	Transaction ID : PR2560066047240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		213.10								
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 ▼ 1754.25	P/R Deduction (\$106.55 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. O'BRYANT, WILLIAM, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 22191 WESTCLIFF			09 30 / Y Y Y Y 2017								
City MISSION VIEJO	State CA	Zip Code 92692-4310	Transaction ID : PR2560066147240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ned Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. ROWE, DONALD, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5 LANTERN LANE	01-1-	7: 0.4	09 / D D / Y Y Y Y 30 2017								
City MAYNARD	State MA	Zip Code 01754-2171	Transaction ID : PR2560066547240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			269.10								
TOTAL This Period (last page this line numb	er 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	★         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and Sta or for commercial purposes, other than using the r			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. VAIL, DENISE, , ,	al) or Full O	rganization Name	Date of Receipt							
Mailing Address 35 CLEVELAND AVENUE			09 30 2017							
City	State	Zip Code	Transaction ID : PR2560066847240							
SAYVILLE	NY	11782-1322	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) V	· · · ·	266.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Initia B. DICKMAN, KRISTA, , ,	al) or Full O	rganization Name	Date of Receipt							
Mailing Address 2533 ONYX DRIVE			09 / D D / Y Y Y Y 2017							
City	State MN	Zip Code	Transaction ID : PR2560398147240							
SHAKOPEE		55379-2770	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgr III	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻	7							
Primary General Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt							
Mailing Address 23426 VILLENA			09 30 2017							
	State CA	Zip Code	Transaction ID : PR2560398547240							
MISSION VIEJO		92692-1861	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual)		pation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For:		ict Svs								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			84.00							
TOTAL This Period (last page this line number or										

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS for		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
Any information copied from such Reports and 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)		active of any pointed committee							
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle NOEL, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4316 FREMONT AVENUE	SOUTH		09 / D D / Y Y Y Y 2017						
City MINNEAPOLIS	State MN	Zip Code 55409-1721	Transaction ID : PR2560398847240 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) ? Prd	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. WULF, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 622 N 11TH ST			09 / D D / Y Y Y Y 2017						
City WAUSAU	State WI	Zip Code 54403-5004	Transaction ID : PR2560398947240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Primary     General       Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CRONIN, JAMES, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 241 WALLACE RD	State	Zip Code	09 / 2017 Transaction ID : PR2560821147240						
BEDFORD	NH	03110-5144	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		486.42						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3297.45	P/R Deduction (\$243.21 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			899.10						
TOTAL This Period (last page this line number	er only)								

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
Any information copied from such Reports and S or for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	NC)					
Full Name of Individual (Last, First, Middle In O'BRIEN, PATRICK, , ,	itial) or Full C	rganization Name	Date of Receipt					
Mailing Address 33 BARRINGTON DRIVE			09 / D D / Y Y Y Y 2017					
City BEDFORD	State NH	Zip Code	Transaction ID : PR2560821447240					
		03110-5601	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						
Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In B. PERO, MARIE, , ,	itial) or Full C	rganization Name	Date of Receipt					
Mailing Address 516 APPLE LANE			09 30 Y Y Y Y Y 2017					
City	State	Zip Code	Transaction ID : PR2560821547240					
HARLEYSVILLE	PA	19438-2549	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prod	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In LUND, BRIAN, , ,	itial) or Full C	rganization Name	Date of Receipt					
Mailing Address 464 EAST NORTH AVE			09 / D D / Y Y Y Y 2017					
City	State	Zip Code	Transaction ID : PR2561457647240					
GRANTSBURG	WI	54840-7423	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	Occ Dir	upation (for Individual) Fax	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			134.00					
TOTAL This Period (last page this line number								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page	×			11b	11c	12	
۸-	v information conied from such Deports and St	atomonto	l		13		14	15	16	tions
	y information copied from such Reports and Sta for commercial purposes, other than using the									
$\setminus$	NAME OF COMMITTEE (In Full)									
$\rangle$	UnitedHealth Group Incorporate	``	·	AC)						
^	Full Name of Individual (Last, First, Middle Initi CAVANAUGH, LARRY, , ,	al) or Full C	Organization Name		Date of	f D-	acaint			
н.	Mailing Address 520 NE 20TH ST # 1010			-					YY	Y
					09		30		2017	
	City	State	Zip Code		Trans	act	tion ID :	PR25632	21104724	0
	WILTON MANORS	FL	33305-2162	_	Amount	t of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С			Ľ				78.	
	Name of Employer (for Individual)		upation (for Individual)		M	emo	o Item			
	United HealthCare Services Inc		Ben Govt Dntl Sls Mgr							
	Receipt For:	Aggregate	Year-to-Date ▼		)/D D ~-		ion (¢20	00 8: 14/-	okly	
	Other (specify) ▼		741.00	] '	VK Ded	ucti	1011 (\$39.	00 Bi-We	екіу)	
В.	Full Name of Individual (Last, First, Middle Initi BARTON, JACQULYN, , ,	al) or Full C	Organization Name		Date of	f Re	eceipt			
	Mailing Address 1587 112 TH COURT WEST			09 30 / Y Y Y Y 2017						
		State MN	Zip Code					PR25632		0
	INVER GROVE HEIGHTS	IVIIN	55077-5412		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) Human Capital Partner		Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		1900.00	]   <sup>F</sup>	P/R Ded	ucti	on (\$100	).00 Bi-W	eekly)	
с.	Full Name of Individual (Last, First, Middle Initi MACKENZIE, ANDREW, , ,	al) or Full C	Organization Name		Date of	f Re	eceipt			
	Mailing Address 1912 IRVING AVE S			09		30		2017 <sup>°</sup>		
	City MINNEAPOLIS	State MN	Zip Code 55403-2823					PR25642		
					Amount	τof	⊨ach R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>		y :	y	384.	60
	Name of Employer (for Individual)		upation (for Individual)		М	em	o Item			
	United HealthCare Services Inc Receipt For:		Segment CMO							
	Primary General	Aggregate	Year-to-Date ▼		P/R Ded	lucti	ion (\$19:	2.30 Bi-W	/eeklv)	
	Other (specify)		3653.70	J   '			.σ.τ. (ψτΟ2	Di W	Soldy)	
s	UBTOTAL of Receipts This Page (optional)			•			, .		662.	60
т	OTAL This Period (last page this line number o	nly)	•••••	- ►				-		

## Use separate schedule(s)

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12					
	y information copied from such Reports and State								
or	for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I								
<u> </u>	Full Name of Individual (Last, First, Middle Initial) SWANSON, STEPHEN, , ,	or Full O	rganization Name	Date of Receipt					
	Mailing Address 3001 HUNTINGTON COURT		- 1	09 / 0 0 / <u>Y Y Y Y</u> 09 2017					
		State TX	Zip Code	Transaction ID : PR2564297347240					
	КАТҮ		77493-1159	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		78.00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item					
	Receipt For: A		Year-to-Date ▼	-					
	Primary General Other (specify) ▼	P/R Deduction (\$39.00 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Initial) DAMATO, ELLEN, , ,	rganization Name	Date of Receipt						
	Mailing Address 1300 DALHART DRIVE			09 30 2017					
		State	Zip Code	Transaction ID : PR2564802247240					
	ALLEN	ТХ	75013-5339	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		28.00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item					
	Receipt For:     A       Primary     General       Other (specify) ▼	ggregate	Year-to-Date ▼ , 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial) WILLSON, JOSH, , ,	or Full O	rganization Name	Date of Receipt					
	Mailing Address 201 ADAMS CT			09 30 / Y Y Y Y 2017					
	5	State	Zip Code	Transaction ID : PR2564802547240					
	COLLEYVILLE	ТХ	76034-6811	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		91.60					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ben KA SB RVP SIs	Memo Item					
	Receipt For:     A       Primary     General       Other (specify)	ggregate	Year-to-Date ▼ 679.40	P/R Deduction (\$45.80 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			197.60					
	OTAL This Period (last page this line number only								

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	ated PAC (I	JnitedHealth Group PA	4C)							
Full Name of Individual (Last, First, Middle CARLSON, CHRISTOPHER, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 10618 WEST RIVER ROA	AD		09 30 / Y Y Y Y Y 2017							
	State MN	Zip Code	Transaction ID : PR2564802647240							
BROOKLYN PARK FEC ID number of contributing federal political committee.	С	55443-1233	Amount of Each Receipt this Period 384.60							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		Cnsmr & Cust Experience Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. HANSEN, PAUL, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 18430 62ND PLACE NOR	RTH		09 30 2017							
City MAPLE GROVE	State MN	Zip Code 55311-4585	Transaction ID : PR2564802747240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		194.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) htroller Mkt Grp	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1843.00	P/R Deduction (\$97.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. GOODWIN, MARYELLEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1678 BRIDGEWATER DF			09 30 / Y Y Y Y Y 2017							
City LAKE MARY	State FL	Zip Code 32746-4103	Transaction ID : PR2564802947240							
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 Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	)		606.60							
TOTAL This Period (last page this line num	ber only)									

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPT	3	for each category of the Detailed Summary Page	▲ 11a □ 11b □ 11c □ 12							
			13     14     15     16     17       erson for the purpose of soliciting contributions							
	•	ddress of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (I UnitedHealth Grou		JnitedHealth Group PA	AC)							
Full Name of Individual (La KENNY, KATHERINE,	ast, First, Middle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 22408 FI	ZGERALD DRIVE		09 30 / Y Y Y Y Y 09 30 2017							
City LAYTONSVILLE	State MD	Zip Code 20882-2301	Transaction ID : PR2564803247240           Amount of Each Receipt this Period							
FEC ID number of contribution federal political committee.	ů –		78.00							
Name of Employer (for Inc United HealthCare Services		upation (for Individual) VP of Acct Mgmt	Memo Item							
Receipt For: Primary Ge Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (La B. MARDEN, PAUL, , ,	ast, First, Middle Initial) or Full C	Date of Receipt								
Mailing Address 718 HICK	ORY HILL RD		09 30 / Y Y Y Y 2017							
City FRANKLIN LAKES	State NJ	Zip Code 07417-1707	Transaction ID : PR2564803347240 Amount of Each Receipt this Period							
FEC ID number of contribution federal political committee.	ů –	263.74								
Name of Employer (for Ind United HealthCare Services	. la a	upation (for Individual) n Plan CEO	Memo Item							
Receipt For:		Year-to-Date <b>V</b>								
Other (specify) ▼	neral	1576.83	P/R Deduction (\$131.87 Bi-Weekly)							
Full Name of Individual (La C. MOQUIST, DARRE	ast, First, Middle Initial) or Full C EN, , ,	organization Name	Date of Receipt							
Mailing Address 5004 ARI			09 / D D / Y Y Y Y 09 30 2017							
City EDINA	State MN	Zip Code 55424-1314	Transaction ID : PR2564803447240 Amount of Each Receipt this Period							
FEC ID number of contribution federal political committee.	ů –		430.40							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO	Memo Item							
Receipt For: Primary Ge Other (specify)	neral Aggregate	Year-to-Date ▼ 3493.60	P/R Deduction (\$215.20 Bi-Weekly)							
SUBTOTAL of Receipts This	Page (optional)	••••••	772.14							
TOTAL This Period (last page	je this line number only)									

## Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(cł	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>×</b> 11a		1b	11c	12	∣				
	y information copied from such Reports and Sta for commercial purposes, other than using the n					ourpo								
	NAME OF COMMITTEE (In Full)					indui		JIII SUCI	Commu					
$\rangle$	UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group F	PAC)										
A.	Full Name of Individual (Last, First, Middle Initia BELLMAN, MARK, , ,	l) or Full O	Drganization Name		Date of	Rece	eipt							
	Mailing Address 5601 VAN WINKLE LN				09 30 2017									
	City AUSTIN	State TX	Zip Code 78739-1694						0354724 is Period	D				
	FEC ID number of contributing federal political committee.	С				-1			28.0	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt		Me	mo I	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00		P/R Dedu	uction	n (\$14.0	0 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initia WRIGHT, LISA, , ,	l) or Full O	Organization Name		Date of	Rece	eipt							
	Mailing Address 6 VOLERRAN PATH LANE			M         M         /         D         J         Y										
	City MISSOURI CITY	State TX	Zip Code 77459-1167		Transaction ID : PR2564803747240									
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir (		Me	mo I	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	י	P/R Dedu	iction	ı (\$14.0	0 Bi-We	ekly)					
C.	Full Name of Individual (Last, First, Middle Initia O'HARE, TAMMY, , ,	l) or Full O	Drganization Name		Date of	Rece	eipt							
	Mailing Address 2420 SAINT GEORGE WAY	Otata	7.0.4		09 / D D / Y Y Y Y 09 / 30 / 2017									
	City BROOKEVILLE	State MD	Zip Code 20833-3265						80394724 is Period	U				
	FEC ID number of contributing federal political committee.							y	78.0	00				
United HealthCare Services Inc		Occu SB V		Me	emo l	ltem								
Receipt For:       Aggregate Year-to-Date         Primary       General         Other (specify)       General			Year-to-Date ▼ 741.00		P/R Dedu	uctior	า (\$39.0	)0 Bi-We	ekly)					
s	UBTOTAL of Receipts This Page (optional)			•		,			134.0	00				
т	OTAL This Period (last page this line number or	ly)		•				-						

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RE	CEIPIS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
or for commercial pu	urposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMM UnitedHealt		d PAC (l	JnitedHealth Group PA	.C)						
Full Name of Ind BERNS, DEB	ividual (Last, First, Middle Initi RA, , ,	ial) or Full O	rganization Name	Date of Receipt						
Mailing Address  City	3209 GALLERIA UNIT 1705	State	Zip Code	09 / 0 0 / 2017						
EDINA		MN	55435-2556	Transaction ID : PR2564804047240						
FEC ID number of federal political c	0	С		Amount of Each Receipt this Period 384.60						
Name of Employe			upation (for Individual) ef CompInc/Ethics Off	Memo Item						
Receipt For: Primary Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Ind B. WICKS, TIM	ividual (Last, First, Middle Initi OTHY, , ,	ial) or Full O	rganization Name	Date of Receipt						
	2600 WEST LAFAYETTE ROA PO BOX 454			09 30 / Y Y Y Y 2017						
City EXCELSIOR		State MN	Zip Code 55331-9417	Transaction ID : PR2565448647240           Amount of Each Receipt this Period						
FEC ID number of federal political co	0	С		76.92						
Name of Employ Optum Services, I	er (for Individual) Inc		upation (for Individual) Group CFO	Memo Item						
Receipt For: Primary Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Ind c. CRAIG, DO	ividual (Last, First, Middle Initi NNA, , ,	ial) or Full O	rganization Name	Date of Receipt						
Mailing Address	10761 INDEPENDENCE WAY			09 / D D / Y Y Y Y 2017						
City CARMEL		State IN	Zip Code 46032-9333	Transaction ID : PR2565448847240 Amount of Each Receipt this Period						
FEC ID number of federal political c	0	С		28.00						
Name of Employe			upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary Other (spec	General cify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Rec	eipts This Page (optional)		•	489.52						
			·····							

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
111			for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         11						
An	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	A not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)		address of any political commutes							
	UnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group PA	AC)						
Α.	Full Name of Individual (Last, First, Middle Initi KUNST, THOMAS, , ,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 4872 103RD STREET			09 30 2017						
	City PLEASANT PRAIRIE	State WI	Zip Code 53158-6516	Transaction ID : PR2566302147240 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) C SIs RVP KA	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initi MANSUKHANI, NEIL, , ,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 4215 LAUREL RIDGE CIRCLE			09 / D D / Y Y Y Y Y 2017						
	City WESTON	State FL	Zip Code 33331-4012	Transaction ID : PR2567129447240						
	FEC ID number of contributing federal political committee.	С	33331-4012	Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PEO SIs	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initi ARNONE, WENDY, , ,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 5243 E DESERT PARK LANE			09 / D D / Y Y Y Y Y 30 / 2017						
	City PARADISE VALLEY	State AZ	Zip Code 85253-3015	Transaction ID : PR2568900547240           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Jnited HealthCare Services Inc		upation (for Individual) In CEO	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
s	JBTOTAL of Receipts This Page (optional)			440.68						
т	OTAL This Period (last page this line number o	nly)								

## 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	<b>✗</b> 11a ☐ 11b ☐ 11c ☐ 12							
Any information copied from such Rep	orts and Statements may	not be sold or used by any po	13     14     15     16     17       erson for the purpose of soliciting contributions							
			to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	rporated PAC (U	nitedHealth Group PA	AC)							
Full Name of Individual (Last, First, A. PARRILLO, CHRISTOPHER, ,	Middle Initial) or Full Org	anization Name	Date of Receipt							
Mailing Address 9501 WEXCROFT		-	09 30 / Y Y Y Y 2017							
City	State TN	Zip Code	Transaction ID : PR2571778247240							
BRENTWOOD		37027-3824	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item							
United HealthCare Services Inc	Dir Nt	wk Contrctng								
Receipt For:	Aggregate Ye	ear-to-Date ▼								
Primary General Other (specify) ▼		730.74	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, B. MOYER, BRUCE, , ,	Middle Initial) or Full Org	anization Name	Date of Receipt							
Mailing Address 4242 BROADWAY #802	STREET		09 30 2017							
City SAN ANTONIO	State TX	Zip Code 78209-6463	Transaction ID : PR2571778347240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		78.00							
Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) en Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, C. HINTON, DUSTIN, , ,	Middle Initial) or Full Org	anization Name	Date of Receipt							
Mailing Address W132N6475 MARA	CH RD		09 30 / Y Y Y Y 2017							
City	State	Zip Code	Transaction ID : PR2571978747240							
MENOMONEE FALLS	WI	53051-6085	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		593.32							
Name of Employer (for Individual) United HealthCare Services Inc		ation (for Individual) Ian CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 2923.28	P/R Deduction (\$296.66 Bi-Weekly)							
SUBTOTAL of Receipts This Page (o	tional)		748.24							
TOTAL This Period (last page this line	e number only)	••••••								

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

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         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 <b>A.</b> ROBINSON, MARCUS, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 590 SPENDER TRACE			M M / D D / Y Y Y Y 09 30 2017							
City DUNWOODY	State GA	Zip Code 30350-5018	Transaction ID : PR2572588947240							
FEC ID number of contributing			Amount of Each Receipt this Period							
federal political committee.	C		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs	Memo Item							
Receipt For:	I	Year-to-Date ▼	—							
Primary General Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
		7	1							
Full Name of Individual (Last, First, Middle <b>B. JACQUET, SHAUN</b> , , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4332 FOREST RIDGE DRI	VE		09 30 2017							
City	State	Zip Code	Transaction ID : PR2572589347240							
SUAMICO	WI	54313-8557	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For:		Year-to-Date ▼	-							
Primary General Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. SMITH, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1502 EAST AVENUE NOR	ТН		M = M / D = D / Y = Y = Y							
City	State	Zip Code	09 30 2017 Transaction ID : PR2572589547240							
ONALASKA	WI	54650-7003	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For:		Year-to-Date ▼	—							
Primary General Other (specify)		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			84.00							
TOTAL This Period (last page this line numb	er only)									

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	Use separate sch		(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 a 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 (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle Ir CARLSON, KEVIN, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4511 BROWNDALE AVENU	E		09 30 / Y Y Y Y 2017								
City EDINA	State MN	Zip Code 55424-1142	Transaction ID : PR2572590047240 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) Ntwk Contrctng	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Ir B. WACKER, CHARLES, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2747 WEST VIEW DRIVE			09 30 / Y Y Y Y 2017								
	State MN	Zip Code	Transaction ID : PR2572590147240								
NEW PRAGUE	IVIIN	56071-8989	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Solution Sales Executive	Memo Item								
Receipt For:	Aggregate	Year-to-Date <b>V</b>									
Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Ir BECK, JOANNE, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3200 N LAKE SHORE DR UNIT 2306 City	State	Zip Code	09 / 09 / 2017								
CHICAGO	IL	60657-3929	Transaction ID : PR2572590347240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			248.38								
TOTAL This Period (last page this line number	<sup>.</sup> only)										

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle OBRIEN, CHRISTINE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 764 TOPAZ STREET			M = M / D = D / Y = Y = Y 09 30 2017								
City NEW ORLEANS	State LA	Zip Code 70124-3624	Transaction ID : PR2572590647240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify) $\checkmark$	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle 3. HARGIS, JAMES, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1820 ROSEDALE			09 30 2017								
City	State OK	Zip Code	Transaction ID : PR2572590747240								
EDMOND	UK	73013-6638	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) r Pharm Ops	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		285.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MILLER, KIMBERLEY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 16 CELONOVA PLACE			09 / D D / Y Y Y Y 09 30 2017								
City FOOTHILL RANCH	State CA	Zip Code 92610-1942	Transaction ID : PR2572591247240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			86.00								
TOTAL This Period (last page this line number	er only)										

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TEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1										
Any information copied from such 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 WIFFLER, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1421 SOMERFIELD DRIV	E		09 30 2017										
City BOLINGBROOK	State IL	Zip Code 60490-3207	Transaction ID : PR2572992747240 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 SpcIty Ben Visn	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. GOETZ, MERRITT, David, ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 901 CLEARVIEW DR			09 30 / Y Y Y Y 2017										
City	State	Zip Code	Transaction ID : PR2573477347240										
NASHVILLE	TN	37205-1915	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		500.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3250.00	P/R Deduction (\$250.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. QUINN, PATRICK, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 15972 WETHERBURN RD	)		09 30 2017										
City CHESTERFIELD	State MO	Zip Code 63017-7341	Transaction ID : PR2573518747240           Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		48.64										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 329.78	P/R Deduction (\$24.32 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			933.24										
TOTAL This Period (last page this line numb	er only)												

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			Detailed Summary Page		×	11a 13		11k		11c 15	12	г	17		
	y information copied from such Reports and Statem for commercial purposes, other than using the name					or the		oose	e of s	oliciting	, contri	ibutic	ons		
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (l	JnitedHealth Group	PA(	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) of GROZDANICH, PATTI, , ,	r Full O	rganization Name		Date of Receipt										
		tate	Zip Code		M         M         J         D         J         Y										
	OVERLAND PARK     K       FEC ID number of contributing federal political committee.     C	(S	66213-1418		_ A	mount	of	Eac	ch Re	ceipt th		iod 28.08	3		
	Name of Employer (for Individual)         United HealthCare Services Inc         Receipt For:       Agg         Primary       General         Other (specify) ▼	Dir I	upation (for Individual) Ntwk Contrctng Year-to-Date ▼ 266.76	5	- [		emo uctic			4 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initial) of BENSON, MICHAEL, , , Mailing Address 2206 EAGLE VALLEY LN	rganization Name			ate of	Re		·		V					
	City	tate VI	Zip Code 54403-8154		09       30       2017         Transaction ID : PR2573518947240         Amount of Each Receipt this Period         35.70										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir SIs Ops		i	Me	emo	lte	em						
	Receipt For:     Agg       Primary     General       Other (specify) ▼	gregate	Year-to-Date ▼ 249.90	)	P/F	R Dedu	uctio	on (S	\$17.8	5 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initial) of SHAW, AMY, , , Mailing Address 11844 DUNHILL ROAD	r Full O	rganization Name			ate of	Re								
	City S	tate MN	Zip Code 55344-3238					ion		PR2574		, 7240			
	FEC ID number of contributing federal political committee.	;				mount	01	J		ceipt th		28.08	3		
	Name of Employer (for Individual) Optum Services, Inc Receipt For:	Cont	upation (for Individual) troller Mkt Grp Year-to-Date ▼			Me	emo	) Ite	em						
	Primary General Other (specify)	giogaie	266.76		P/	R Dedi	uctio	on (	(\$14.0	4 Bi-We	eekly)				
S	UBTOTAL of Receipts This Page (optional)			►				y		y	ę	91.86	5		
т	OTAL This Period (last page this line number only).			►	- [			,		-y		-			

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ITEMIZED RECEIPTS	Use separate schedule(s)		(check only one)						
		for each category of the Detailed Summary Page	<b>X</b> 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									
Full Name of Individual (Last, First, Middl A. BUCCHIANERI, STEVEN, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 118 GOVERNORS			M M / D D / Y Y Y Y 09 30 2017						
City MEDFORD	State MA	Zip Code 02155-3018	Transaction ID : PR2574977147240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		38.46						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.37	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle), RICHARD, DARYL, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 24 WEST RIDGE DRIVE	Ototo	Zip Code	09 30 / Y Y Y Y 2017						
City WEST HARTFORD	State CT	Zip Code 06117-2065	Transaction ID : PR2574979047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		91.56						
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 ▼ 679.38	P/R Deduction (\$45.78 Bi-Weekly)						
Full Name of Individual (Last, First, Middl ARE, LESLIE, , ,		rganization Name	Date of Receipt						
Mailing Address 9029 SHEEP RANCH C	·	Zin Oode	09 / D D / Y Y Y Y 2017						
City LAS VEGAS	State NV	Zip Code 89143-5432	Transaction ID : PR2574979447240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.00						
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Clms	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona			158.02						
TOTAL This Period (last page this line nun	nber only)								

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		Use separate schedule(s)	(check only one)												
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12											
An	/ information copied from such Reports and S	tatements ma	ny not be sold or used by any p	13     14     15     16       verson for the purpose of soliciting contributions       e to solicit contributions from such committee.											
		name anu a													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)											
۹.	Full Name of Individual (Last, First, Middle Ini IERVOLINO, TINA, , ,	tial) or Full O	rganization Name	Date of Receipt											
	Mailing Address 38 DARTMOOR ROAD			09 / D D / Y Y Y Y 2017											
	City EAST HANOVER	State NJ	Zip Code 07936-3912	Transaction ID : PR2574984447240 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) Med Clin Ops	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Ini SIMPSON, TRENT, , ,	tial) or Full O	rganization Name	Date of Receipt											
	Mailing Address 3111 NORCREST AVE N			09 / D D / Y Y Y Y 09 30 2017											
	City	State	Zip Code	Transaction ID : PR2574985047240											
	STILLWATER	MN	55082-1779	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		76.92											
	Name of Employer (for Individual) Dptum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Ini CIANFROCCO, HEATHER, , ,	tial) or Full O	rganization Name	Date of Receipt											
	Mailing Address 2799 WEST BARDONNER R			09 / D D / Y Y Y Y 09 30 2017											
	City GIBSONIA	State PA	Zip Code 15044-8462	Transaction ID : PR2574986247240 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) Clin Ops	Memo Item											
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)											
	JBTOTAL of Receipts This Page (optional)			489.60											

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	-	Use separate schedule(s)	(check only one)											
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12											
			13     14     15     16     17       berson for the purpose of soliciting contributions       a to collicit contributions from such committee											
	ly the name and a	ouress of any political committe	e to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, Midd <b>A.</b> BURNETT, JAMIE, , ,		rganization Name	Date of Receipt											
Mailing Address 4625 EWING AVENUE S	1		09 30 2017											
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2574988247240 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		78.00											
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)											
Full Name of Individual (Last, First, Midd B. LANG JACOBSEN, HEATHER,		rganization Name	Date of Receipt											
Mailing Address 11382 MOUNT CURVE I	RD		09 30 2017											
City EDEN PRAIRIE	State MN	Zip Code 55347-2918	Transaction ID : PR2574991447240 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) buty Gen Counsel Mgr	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)											
Full Name of Individual (Last, First, Midd C. ALLAZETTA, DAVID, , ,	le Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 339 DARTMOUTH HILL	1		09 / 0 / Y Y Y Y 2017											
City LAS VEGAS	State NV	Zip Code 89138-1544	Transaction ID : PR2574995447240           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 ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional	al)		347.22											
TOTAL This Period (last page this line nur	nber only)		· · · · · · · · · · · · · · · · · · ·											

## Use separate schedule(s)

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ITEMIZED RECEIPTS		h category of the d Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or for commercial purposes, other than usi			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	prated PAC (UnitedF	lealth Group PA	(C)
Full Name of Individual (Last, First, Mid WILLIAMS, JOSEPH, , ,	dle Initial) or Full Organization	n Name	Date of Receipt
Mailing Address 3221 FORSYTH DRIVE			09 30 / Y Y Y Y Y 09 30 2017
City GREENSBORO	State Zip C NC 274	Code 07-7221	Transaction ID : PR2575008847240           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		362.64
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (fo M&R Reg VP	,	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 2730.78	P/R Deduction (\$181.32 Bi-Weekly)
Full Name of Individual (Last, First, Mid B. KEMMER, HEIDI, , ,	dle Initial) or Full Organization	n Name	Date of Receipt
Mailing Address 2211 WEST ROCKROS	E PLACE		09 30 2017
City CHANDLER	State Zip C AZ 852	Code 48-4208	Transaction ID : PR2575021347240 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		28.28
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (fo Dir Prov Svc	or Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 268.66	P/R Deduction (\$14.14 Bi-Weekly)
Full Name of Individual (Last, First, Mid FRIDELL, CATHERINE, , ,	dle Initial) or Full Organization	n Name	Date of Receipt
Mailing Address 11 E STONEWALL DR	· · · · · · · · · · · · · · · · · · ·		09 / D D / Y Y Y Y 2017
City MIDDLETOWN	State Zip C DE 1970	Code 09-3810	Transaction ID : PR2575027547240           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		83.32
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (fo VP Clms	or Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Da	ate ▼ 708.22	P/R Deduction (\$41.66 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	al)		474.24
TOTAL This Period (last page this line nu			

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

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
Any information copied from such Reports and St or for commercial purposes, other than using the			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)		_										
UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	4C)									
Full Name of Individual (Last, First, Middle Init <b>A</b> _ DUNCAN, MICHELE, , ,	ial) or Full O	rganization Name	Data of Dessint									
Mailing Address 3038 FAIRWAY CIRCLE			Date of Receipt									
			09 30 2017									
City CHASKA	State MN	Zip Code 55318-3408	Transaction ID : PR2575029647240									
	_	33310-3400	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item									
United HealthCare Services Inc	VP	Compli										
Receipt For:	Aggregate	Year-to-Date <b>V</b>										
Primary General Other (specify) ▼		3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
			-									
Full Name of Individual (Last, First, Middle Init B. O'BRIEN, JENNIFER, , ,	ial) or Full O	rganization Name	Date of Receipt									
Mailing Address 395 WOODLAWN AVE												
			09 30 2017									
City SAINT PAUL	State MN	Zip Code 55105-1339	Transaction ID : PR2575034547240									
		55105-1359	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Compli Off	Memo Item									
Receipt For:	Aggregate	Year-to-Date <b>V</b>										
Primary General Other (specify) ▼		3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name										
C. MADDOX, JEFFREY, , ,			Date of Receipt									
Mailing Address 5610 PURDUE AVE			09 30 2017									
City	State	Zip Code	Transaction ID : PR2575039547240									
DALLAS	ТХ	75209-4431	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item									
United HealthCare Services Inc	Hlth	Plan CEO										
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$14.00 Bi-Weekly)									
Other (specify)		266.00										
SUBTOTAL of Receipts This Page (optional)			797.20									
TOTAL This Period (last page this line number of												

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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		for each category of the Detailed Summary Page	×	11a		] 11b	o 🗌	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 (Ur	nitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) or ALLENBURG, THOMAS, , ,	Full Orga	anization Name		Date of	f Re	eceip	ot						
	Mailing Address 6224 LOCH MOOR DR		-	M         M         /         D         J         Y										
	City Sta EDINA MI	ate N	Zip Code 55439-1618							03984724				
	FEC ID number of contributing federal political committee.		33439-1010	A	mount	t of	Eac	ch Red	ceipt th	iis Period 111.				
	Name of Employer (for Individual) United HealthCare Services Inc	Occupa VP Mk	ation (for Individual)		M	emo	o Itei	m						
	Paggint For:		ear-to-Date ▼ 611.05	P/	R Ded	uctio	on (S	\$55.5	5 Bi-We	èekly)				
В.	Full Name of Individual (Last, First, Middle Initial) or DONNAY, JULENE, , ,	Full Orga	anization Name		Date of	f Re	eceip	ot						
	Mailing Address 17763 OAKLAND DRIVE NE				<sup>M</sup> 09	1	D	30	/ Y	2017	Y			
	City Sta HAM LAKE M	ate IN	Zip Code 55304-4527				-			04624724 his Period	-			
	FEC ID number of contributing federal political committee.				28.08									
	Name of Employer (for Individual) United HealthCare Services Inc	· · ·	ation (for Individual) urcing Prcrmt		M	emo	b Iter	m						
	Receipt For:     Aggr       Primary     General       Other (specify) ▼	regate Ye	ear-to-Date ▼ 266.76	P/	R Ded	uctic	on (\$	\$14.04	1 Bi-We	ekly)				
<u> </u>	Full Name of Individual (Last, First, Middle Initial) or HEATH, SEAN, , ,	Full Orga	anization Name		Date of	f Re	eceip	ot						
	Mailing Address 1292 CASTLE CT				<sup>M</sup> 09	/	D	30	/ Y	2017	Y			
	,	ate IN	Zip Code 55427-4453	Δ						04874724 his Period				
	FEC ID number of contributing federal political committee.						<u> </u>		,	28.				
	Name of Employer (for Individual) Optum Services, Inc	Occupa Dir Cor	ation (for Individual) mpli		Μ	emo	o Ite	m						
	Receipt For:     Aggr       Primary     General       Other (specify)	regate Ye	ear-to-Date ▼ 266.76	P/	'R Ded	luctio	on (\$	\$14.04	4 Bi-We	ekly)				
s	JBTOTAL of Receipts This Page (optional)		•••••		-		9	_	9	167.	26			
T	OTAL This Period (last page this line number only)		••••••	- L			-		_					

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	Use separate schedule(s)	(check or	(check only one)											
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	<u> </u>						
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NAME OF COMMITTEE (In Full)	and manie and a		U TO SUIICIT C	JIIII	/ฉแบบเร ไ	SULL SUCL								
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Middle LINDSAY, VIVIAN, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt									
Mailing Address 14930 SW 39 ST			09 / 0 / Y Y Y Y Y 2017											
City DAVIE	State FL	Zip Code 33331-2767					<b>)5494724</b> is Period	D						
FEC ID number of contributing federal political committee.	С						192.3	30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops	_ <b>□</b> '	Memo	tem									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R De	educti	on (\$96.	15 Bi-We	ekly)							
Full Name of Individual (Last, First, Middle CLACKO, MARY ANN, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt									
Mailing Address 6358 COTEAU TRAIL			09		<sup>D</sup> 30	/ Y	y y 2017	Ŷ						
City EDEN PRAIRIE	State MN	Zip Code 55344-5205					<b>5794724</b>	)						
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) Compli	- <b>D</b>	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼												
Other (specify) ▼		730.74	P/R De	ductio	on (\$38.	46 Bi-We	ekly)							
Full Name of Individual (Last, First, Middle MCCARTY, CARY, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt									
Mailing Address 8800 RUMFIELD RD		7. 0.4	09		30		2017 <sup>°</sup>							
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131					<b>)5944724</b> is Period	U						
FEC ID number of contributing federal political committee.	С				<b>,</b> ,	,	78.0	00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo	tem Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 741.00	P/R De	educti	on (\$39.	.00 Bi-We	eekly)							
SUBTOTAL of Receipts This Page (optional)					, ,	,	347.2	22						
TOTAL This Period (last page this line num	per only)													

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	WIZED RECEIPTS			or each category of the Detailed Summary Page	[	x	11a		11	b	-	11c	12						
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or fo	information copied from such Reports and Stat r commercial purposes, other than using the n																		
	AME OF COMMITTEE (In Full)				•														
	InitedHealth Group Incorporated	PAC (l	Jni	itedHealth Group PA	(C)														
	ull Name of Individual (Last, First, Middle Initial ALLEN, MARK, , ,	l) or Full O	)rgai	nization Name		Date of Receipt													
M	ailing Address 11359 ENTREVAUX DRIVE	1																	
		State MN		Zip Code			Trans	sacti	ion	ID :	PR	25750	602472	40					
_	DEN PRAIRIE			55347-2862	_	A	moun	t of	Ea	ch R	lece	eipt thi	s Perio	b					
	EC ID number of contributing deral political committee.	С				l			_		_	-9	76	.92					
	ame of Employer (for Individual) nited HealthCare Services Inc		•	ion (for Individual) Mgmt		l	М	emo	o Ite	əm									
	againt For:				-														
	Primary General Other (specify) <b>v</b>	Aggregate	Tea	rr-to-Date ▼ 730.74		P/I	R Ded	luctio	on	(\$38.	.46	Bi-We	ekly)						
	ull Name of Individual (Last, First, Middle Initial	l) or Full O	orgai	nization Name				( D a											
_		~~~			_		ate o	r Re	_		_								
_	ailing Address 10551 GREENBRIER RD APT 1	32 State		Zin Code			м м 09	/		30		/	2017	Y					
	ity 1INNETONKA	MN		Zip Code 55305-3460	$\vdash$				-				622472						
F	EC ID number of contributing deral political committee.	number of contributing								Amount of Each Receipt this Period									
	ame of Employer (for Individual) nited HealthCare Services Inc			tion (for Individual) Mgmt		l	М	emo	o Ite	эm									
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 380.00		P/F	र Ded	uctio	on (	(\$20.)	.00 l	Bi-Wee	ekly)						
	ull Name of Individual (Last, First, Middle Initial SWAN, RICK, , ,	l) or Full O	rga	nization Name		D	ate o	f Re	ecei	pt									
M	ailing Address 2554 CHRISTIAN PKWAY					I	<sup>M</sup> 09	/	ľ	30		/ Y	2017 <sup>°</sup>	Ŷ					
	ity	State		Zip Code		_	Trans	sact	ion	ID :	PR	25750	626472	40					
_	CHASKA	MN		55318-1986		A	moun	t of	Ea	ch R	lece	eipt thi	s Perio	b					
	EC ID number of contributing deral political committee.	С							,		_	9	28	.08					
	ame of Employer (for Individual)		ion (for Individual)		Į	Μ	emc	o Ite	эm										
	ptum Services, Inc eceipt For:	1		Mgmt	_														
	Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 266.76		P/I	R Dec	lucti	on	(\$14.	.04	Bi-We	ekly)						
SUI	Primary General		<del></del>		-	P/I	R Dec	lucti	on	(\$14.	.04	Bi-We	ekly) 145	.00					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         11								
			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 CURRIE, ULYSSES, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3111 STILES WAY			M M / D D / Y Y Y Y 09 30 2017								
City WEST FRIENDSHIP	State MD	Zip Code 21794-9218	Transaction ID : PR2575064147240								
		21734 3210	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		100.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		450.00	P/R Deduction (\$50.00 Bi-Weekly)								
			*								
Full Name of Individual (Last, First, Midd <b>B.</b> ZAETTA, CHRISTOPHER, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 5840 RIDGE ROAD			09 30 2017								
City	State MN	Zip Code	Transaction ID : PR2575068347240								
EXCELSIOR		55331-8153	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		454.54								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Primary General Other (specify) ▼		, 3409.05	P/R Deduction (\$227.27 Bi-Weekly)								
Full Name of Individual (Last, First, Midd c. ENLOW, MARGARET, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 103 LOCUST GROVE L	ANE		09 30 2017								
City	State KY	Zip Code	Transaction ID : PR2575071047240								
VERSAILLES	KI	40383-8807	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual)		upation (for Individual)	Memo Item								
United HealthCare Services Inc Receipt For:	I	Ntwk Contrctng									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	al)		582.62								
TOTAL This Period (last page this line nur	nber only)										

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page	×	<b>1</b> 1a	a [		11	b [		11c	12		
				, ,		13			14			15	16		17
	y information copied from such Reports and State for commercial purposes, other than using the na														
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Uni	itedHealth Group PA	C)	_	_	_	_					_	
A.	Full Name of Individual (Last, First, Middle Initial) NICHOLS, SANDRA, , ,	or Full C	Drgai	nization Name		Date	of	Red	cei	pt		-	-		
	Mailing Address 12706 YOUNG LANE				09 30 / Y Y Y Y 2017										
		State MD		Zip Code									745472		
		שואי		20878-6112	- 1	Amo	unt	of l	Ea	ch R	lece	eipt thi	s Peric	d	_
	FEC ID number of contributing federal political committee.	С	-			Ē			7	-		-	19	2.30	
	Name of Employer (for Individual)	Occ	upat	tion (for Individual)	$\neg$		Me	emo	Ite	əm					
	United HealthCare Services Inc	Sha	ared	Svs Regn CMO		_									
		ggregate	Yea	ar-to-Date <b>V</b>								_			
	Primary     General       Other (specify) ▼		-7-	1826.85	F	י/R D	edu	uctio	on (	(\$96.	.15	Bi-We	ekly)		
В.	Full Name of Individual (Last, First, Middle Initial) BECK, RALPH, , ,	or Full C	)rgai	nization Name		Date	of	Red	cei	pt					
	Mailing Address W155 N5314 SHARPTAIL COUR	т	_			M 0		/	ſ	30		/ Y	2017	Y	1
	City MENOMONEE FALLS	State WI		Zip Code 53051-6771					-				<b>749472</b> s Peric		
	FEC ID number of contributing federal political committee.	С				C			,	_		-9-	2	8.08	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt			Me	emo	lte	əm					
	Receipt For:     A       Primary     General       Other (specify) ▼			ar-to-Date ▼ 266.76	P	'/R D	edu	ıctio	on (	(\$14.)	.04	Bi-Wee	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drgai	nization Name		Date	of	Red	cei	pt					
	Mailing Address 13197 NW HELEN LANE					M 0	М	/		30	)	/ Y	y 2017	Y	1
		State		Zip Code									752472		
	PORTLAND	OR		97229-7045		Amo	unt	of l	Ea	ch R	lece	eipt thi	s Peric	d	
	FEC ID number of contributing federal political committee.	С	-			Ē			,	_		y	3	8.46	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) tl Clin Cvrge Review			Me	emo	) Ite	эm					
	Receipt For:     A       Primary     General       Other (specify)	lggregate	Yea	ar-to-Date ▼ 365.37	F	?/R D	)edu	uctic	on (	(\$19.	.23	Bi-We	ekly)		
	UBTOTAL of Receipts This Page (optional)					C			1	-	-	5	258	8.84	2
	and have have the international office	· / · · · · · · · · · · · · · · · · · ·	•••••	•••••••••••••••••••••••••••••••••••••••	- I	المسلما	_	-	7			-		- 10 C	. II

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Any information copied from such Reports and or for commercial purposes, other than using t NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	Statements ma	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 t	Statements ma	w not be cold or used by only n												
NAME OF COMMITTEE (In Full)	ne name and a	ddroop of any ralitized by any p	person for the purpose of soliciting contributions											
		ddress of any political committe	e to solicit contributions from such committee.											
/	ited PAC (l	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Middle BURNAM, DEBRA, , ,	,	rganization Name	Date of Receipt											
Mailing Address 377 CALABRIA BEACH ST			09 / 09 / 2017											
City HENDERSON	State NV	Zip Code 89015-2430	Transaction ID : PR2575076247240           Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		28.08											
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) Clin Ops	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)											
Full Name of Individual (Last, First, Middle CALAMIA, EDITH, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 22 ROYAL OAK DRIVE			09 / D D / Y Y Y Y 2017											
	State NJ	Zip Code	Transaction ID : PR2575076647240											
FAR HILLS	INJ	07931-2569	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		28.08											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 1ed Dir	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)											
Full Name of Individual (Last, First, Middle )	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 5023 OAKMONT PLACE			09 / D D / Y Y Y Y 09 30 2017											
City WESTERVILLE	State OH	Zip Code 43082-8781	Transaction ID : PR2575084447240 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) Comm	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional).			133.08											

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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				Detailed Summary Page	×	11a 12		11	- H		11c	12				
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<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated										. 5001					
A.	Full Name of Individual (Last, First, Middle Initial O'NEILL, AUDREY, , ,	Date of Receipt														
	Mailing Address 71 CHESTNUT RIDGE RD				09 / D D / Y Y Y Y 2017											
	City QUEENSBURY	Transaction ID : PR2575089447240 Amount of Each Receipt this Period														
	FEC ID number of contributing federal political committee.	С				_		-				41.	66			
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Process		Me	emo	) Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 354.11	P/	R Dedi	uctic	on	(\$20.8	83	Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initial HEROLD, STACI, , ,	) or Full O	rgar	nization Name		ate of	Re	cei	ipt							
	Mailing Address 15008 GREEN OAKS TR SE					м м 09	1	[	30		/ Y	2017	Y			
	City PRIOR LAKE	State MN		Zip Code 55372-2159								<b>9304724</b> s Period	0			
	FEC ID number of contributing federal political committee.	С				_	. 4	- <b>J</b>			-9	95.	22			
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	•	ion (for Individual)		Me	emo	) Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 666.54	P/I	R Dedu	uctic	on (	(\$47.6	51	Bi-We	ekly)				
c.	Full Name of Individual (Last, First, Middle Initial PERRY, BEVERLY-JANE, , ,	) or Full O	rgar	nization Name		ate of	Re	cei	ipt							
	Mailing Address 24 LORUSSO DRIVE					м м 09	1	L	30		/ Y	2017 <sup>°</sup>				
	City ATTLEBORO	State MA		Zip Code 02703-5212	A							9604724 s Period	0			
	FEC ID number of contributing federal political committee.	С						,			y	28.	08			
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Prgms		Me	emo	o Ite	em							
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 266.76	P/	R Ded	uctio	on	(\$14.0	04	Bi-We	ekly)				
S	UBTOTAL of Receipts This Page (optional)			••••••				,			y	164.	96			
т	OTAL This Period (last page this line number on	ly)		•				_		l	- <b>y</b>					

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		Use separate schedule(s)	(check only one)											
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17											
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, Middle <b>A.</b> JACOBY, CHARLES, , ,	Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 3315 IRVING AVE			09 / <u>2017</u>											
City MINNEAPOLIS	State MN	Zip Code 55408-3321	Transaction ID : PR2575099247240 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		32.00											
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) IT	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 304.00	P/R Deduction (\$16.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middle B. CHAMPION, PHEBE, , ,	Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 34 REYBURN DRIVE			09 / D D / Y Y Y Y Y 2017											
City HENDERSON	State NV	Zip Code 89074-2760	Transaction ID : PR2575108347240 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		50.00											
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Cust Service	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	P/R Deduction (\$25.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middle MORSCH, MARK, , ,	Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 6344 GOLDEN LILY WAY			09 / D D / Y Y Y Y 2017											
City SAN DIEGO	State CA	Zip Code 92130-6836	Transaction ID : PR2575115147240           Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		30.76											
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 292.22	P/R Deduction (\$15.38 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional).			112.76											
TOTAL This Period (last page this line number	er only)													

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

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
or for commercial purposes, other than using			person for the purpose of soliciting contributions the 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 LYDON, SCOTT, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2 PLOWBOY PATH			09 30 2017						
City COMMACK	State NY	Zip Code 11725-1410	Transaction ID : PR2575122247240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. HUNT, ZOE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4030 SERANGO COURT			09 / D D / Y Y Y Y 2017						
City WEST LINN	State OR	Zip Code 97068-2840	Transaction ID : PR2575136247240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCDONNEL, LISA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9664 LAFORET DRIVE			09 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
City EDEN PRAIRIE	State MN	Zip Code 55347-3538	Transaction ID : PR2575136347240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		30.40						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 258.40	P/R Deduction (\$15.20 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			86.40						
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)						
II EIVIIZED KEGEIP13		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)					
Full Name of Individual (Last, First, Middle WHEELER, TISA, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6085 WATER ST APT 2453			09 30 2017					
City PLANO	State TX	Zip Code 75024-0084	Transaction ID : PR2575138547240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		95.70					
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 ▼ 865.15	P/R Deduction (\$47.85 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. CARTER, JOCELYN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 601 SILVERSTONE DRIVE			09 30 2017					
City MADISON	State MS	Zip Code 39110-7581	Transaction ID : PR2575141947240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	-					
Other (specify) ▼		1750.00	P/R Deduction (\$125.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. DEWALL, PATRICK, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 7662 RIDGEVIEW WAY			09 / 0 / Y Y Y Y 2017					
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575145347240         Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů l							
Name of Employer (for Individual) Optum Services, Inc	Occ Dep	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date  1826.85	P/R Deduction (\$96.15 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			538.00					
TOTAL This Period (last page this line number	er only)							

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ITEMIZED RECEIPTS					(check only one)								
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	Г	17		
	y information copied from such Reports and S for commercial purposes, other than using the				for the		pose of	soliciting	g contrik		าร		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Ini MCGANN, JEAN, , ,	tial) or Full C	organization Name		Date of Receipt								
	Mailing Address 4 VILLAGE ROAD				09 / 0 / Y Y Y Y 09 30 2017								
	City FLORHAM PARK	State NJ	Zip Code 07932-2415					PR2575					
FEC ID number of contributing federal political committee.					<u> </u>				2	8.08			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA Dir Acct Mgmt		Me	emc	) Item						
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 266.76	P	9/R Ded	uctio	on (\$14	.04 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Ini BEECHER, KELLY, , ,	tial) or Full C	rganization Name		Date of	Re	eceipt						
	Mailing Address 7640 CURIOSITY AVE				м м 09	1	30		2017	Y	]		
	City LAS VEGAS	State NV	Zip Code 89131-4792				-	PR2575 Receipt th	-				
	FEC ID number of contributing federal political committee.	С			28.08								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P	P/R Deduction (\$14.04 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Ini JONES, RON, , ,	tial) or Full C	organization Name		Date of	Re	eceipt						
	Mailing Address 10066 ESCAMBIA BAY CT	State	Zin Code		09	1	30	JL	2017		]		
	City NAPLES	FL	Zip Code 34120-4621					PR2575 Receipt th					
	FEC ID number of contributing federal political committee.	С			250.0			0.00					
	Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) P CInt Relationship		M	emo	) Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2375.00	P	P/R Ded	ucti	on (\$12	5.00 Bi-V	Veekly)				
s	UBTOTAL of Receipts This Page (optional)					1	, .	. ,	30	6.16			
Т	OTAL This Period (last page this line number	only)		- -							П		

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ITEMIZED RECEIPTS					(check only one)							
			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12		17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any p ddress of any political committe	erson e to so	for the	purp ntrib	oose of	soliciting	g contrib	oution ittee.	is	
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini HAMANN, CHAD, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 7638 RIDGEVIEW WAY				09 30 / Y Y Y Y Y 09 30 2017							
	City CHANHASSEN	State MN	Zip Code 55317-4507					PR2575				
	FEC ID number of contributing federal political committee.			<u> </u>				45	7.86			
	Name of Employer (for Individual) United HealthCare Services Inc	ted HealthCare Services Inc VP Tax					ltem					
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       3397.32						uctio	on (\$228	8.93 Bi-V	Veekly)			
в.	Full Name of Individual (Last, First, Middle Ini COSTIN, ROBERT, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 580 MEADOW SWEET CIRCI	LE			м м 09	1	30	/ Y	2017	Y		
	OSPREY	State FL	Zip Code 34229-8976					PR2575 <sup>,</sup> leceipt th				
	FEC ID number of contributing federal political committee.	С			38.46							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.37	] P	P/R Dedu	uctio	on (\$19.	23 Bi-We	ekly)			
C.	Full Name of Individual (Last, First, Middle Ini WIELAND, MICHAEL, , ,	-	rganization Name		Date of	Re	ceipt					
	Mailing Address 6741 EAST SHADOW LAKE				09	Ŀ	30	JL	2017			
	City CIRCLE PINES	State MN	Zip Code 55014-1348					PR2575 Receipt th				
	FEC ID number of contributing federal political committee.	С			Ľ.		<b>,</b>	. ,	28	3.08		
	Name of Employer (for Individual) Optum Services, Inc	Occi Dir I	upation (for Individual) T		M	emc	) Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	] [	P/R Ded	ucti	on (\$14	.04 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•		l	, .	,	524	1.40		
Т	OTAL This Period (last page this line number	only)		_ ▶	Γ.						Ē	

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			13     14     15     16     17       erson for the purpose of soliciting contributions       a to collicit contributions from such committee						
or for commercial purposes, other than using	me name and a	louress or any political committee	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 MCGUIRE, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 41 CUMBERLAND ROAD			09 / D D / Y Y Y Y 09 30 2017						
City WEST HARTFORD	State CT	Zip Code 06119-1121	Transaction ID : PR2575185447240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MELLO, STEPHANIE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 65 CLARK LANE			09 / D D / Y Y Y Y 09 30 2017						
City SWANSEA	State MA	Zip Code 02777-4550	Transaction ID : PR2575191347240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ec Dir	Memo Item						
Receipt For:	Aggregate	Year-to-Date <b>V</b>	-						
Primary General Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle <b>DEMARIS, PETER</b> , , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2301 OLIVER AVE S	State	Zin Code	09 30 2017						
City MINNEAPOLIS	MN	Zip Code 55405-2448	Transaction ID : PR2575191847240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	federal political committee.     Image: Committee								
United HealthCare Services Inc									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			489.60						
TOTAL This Period (last page this line numb	er 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 and or for commercial purposes, other than using th										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (	JnitedHealth Group PA	.C)							
Full Name of Individual (Last, First, Middle Ir A. MOORE, KRISTIN, , ,	Date of Receipt 09 / 30 / 2017 Transaction ID : PR2575194447240									
Mailing Address 3021 ROSEDALE AVENUE										
City										
DALLAS	ТХ	75205-1451	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item							
Receipt For:			_							
Primary General Other (specify) ▼	Primary General Aggregate real-to-Date V									
Full Name of Individual (Last, First, Middle Ir B. GRANBERG, MITCHELL, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 6721 GALWAY DRIVE										
City EDINA	State MN	Zip Code 55439-1313	Transaction ID : PR2575196147240 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) buty Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir c. FRANCIS, KEVIN, , ,	nitial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 15815 MINNETONKA BLVD			09 30 2017							
City	State	Zip Code	Transaction ID : PR2575203347240							
MINNETONKA	MN	55345-1410	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		457.86							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Actuarial Srvs	Memo Item							
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 3397.32	P/R Deduction (\$228.93 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	678.16							
TOTAL This Period (last page this line number										

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	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>≭</b> 11a □ 11b □ 11c □ 12							
Any information copied from such Reports an	d Statements ma	ay not be sold or used by any p	13     14     15     16     1       erson for the purpose of soliciting contributions							
or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle A. JENSON, MELINDA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 15740 AZALEA TRAIL			M = M / D = D / Y = Y = Y = Y 09 30 2017							
City EDEN PRAIRIE	State MN	Zip Code 55347-2358	Transaction ID : PR2575205447240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		45.86							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 204.56	P/R Deduction (\$22.93 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. CARRIS, DONNA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 27 WEST WILLOW LANE			09 30 / Y Y Y Y 2017							
City CHARLESTOWN	State RI	Zip Code 02813-1727	Transaction ID : PR2575212547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		142.84							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.94	P/R Deduction (\$71.42 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. STORDAHL, PAUL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7001 W 175TH AVENUE			09 / D D / Y Y Y Y 2017							
City EDEN PRAIRIE	State MN	Zip Code 55346-2161	Transaction ID : PR2575213047240           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) Actuary	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			216.78							
TOTAL This Period (last page this line numb	per only)									

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

FOR LINE NUMBER:

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	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using the			person 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 MARTIN, PETER, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7091 HIGHOVER DRIVE			09 30 / Y Y Y Y 2017					
City CHANHASSEN	State MN	Zip Code 55317-7572	Transaction ID : PR2575213647240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I B. MEYERHOFER, JEFFREY, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 11842 DRIFTWOOD ROAD			09 / D D / Y Y Y Y 2017					
City EDEN PRAIRIE	State MN	Zip Code 55344-3262	Transaction ID : PR2575214647240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		95.22					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I SHORS, MATTHEW, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4649 EWING AVENUE SOL	1		M M / D D / Y Y Y Y 09 30 2017					
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2575222347240 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) Peputy Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			509.82					
TOTAL This Period (last page this line numbe	er only)							

# Use separate schedule(s)

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(check only one)

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	EWIZED RECEIPTS for each category of the Detailed Summary Page			×	11a		111	-	11c	12					
An	y information copied from such Reports and State	be sold or used by any pe	rson fr	13 or the	DUrr	14 0056		15 oliciting	16 1 contribu	17 tions					
or	for commercial purposes, other than using the nar														
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	Jnite	edHealth Group PA	C)										
	Full Name of Individual (Last, First, Middle Initial) KRUTA, DARLENE, , ,		Date of Receipt												
	Mailing Address 9243 GREEN BRIAR RD	09 / D D / Y Y Y Y 2017													
	City BLOOMINGTON	State MN	Z	ip Code 55437-1939	Transaction ID : PR2575232547240 Amount of Each Receipt this Period										
		C		mount	. OT	Eac	ch Red	ceipt th	95.						
	Name of Employer (for Individual) United HealthCare Services Inc								em						
	Receipt For:     A       Primary     General       Other (specify) ▼	For: Aggregate Year-to-Date ▼ imary General							\$47.6	1 Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initial) KIRKPATRICK, SUSAN, , ,	or Full O	rganiz	ation Name		Date of	Re	eceip	pt						
	Mailing Address 417 STERLING STREET				09 30 / Y Y Y Y Y 2017										
	City LANCASTER	StateZip CodeMA01523-1847						-			2 <b>3364724</b> is Period	-			
	FEC ID number of contributing federal political committee.				91.60										
	Name of Employer (for Individual) Optum Services, Inc		upatio P Gen	n (for Individual) Mgmt	Memo Item										
	Receipt For:     A       Primary     General       Other (specify) ▼	ggregate	Year-t	o-Date ▼ 679.40	P/	R Dedi	uctic	on (S	\$45.80	) Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initial) RUSSELL, THOMAS, , ,	or Full O	rganiz	ation Name		Date of	Re	eceip	pt						
	Mailing Address 10205 GROOMSBRIDGE ROAD					м м 09	/	D	30	/ Y	ү ү 2017	Ŷ			
	City JOHNS CREEK	State GA		ip Code 30022-5645							23864724				
		ntributing									t of Each Receipt this Period 28.00				
	Name of Employer (for Individual) United HealthCare Services Inc		upatior Empl R	n (for Individual) el		Memo Item									
	Receipt For:     A       Primary     General       Other (specify)	ggregate	Year-t	o-Date ▼ 266.00	P/	R Ded	uctio	on (	(\$14.00	) Bi-We	eekly)				
S	JBTOTAL of Receipts This Page (optional)				[			y		9	214.	82			
т	OTAL This Period (last page this line number only	)		<b>&gt;</b>	- [			-		-					

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	Use separate schedule(s)	(check o	(check only one)						
			for each category of the Detailed Summary Page	<b>×</b> 11a		11b	11c	12	<b></b>
			Ay not be sold or used by any p						
		e name and a	ddress of any political committe	e to solicit c	contrib	outions fr	rom such	n committ	ee.
NAME OF COMMITTER		ed PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual CHOATE, THOMAS		tial) or Full C	rganization Name	Date	of Re	eceipt			
Mailing Address 8222 S	TONE MASON CT			M 09		D D 30	/ Y	y y 2017	Y
City State WINDERMERE FL			Zip Code 34786-5624					2 <b>4784724</b> iis Period	0
FEC ID number of contributing federal political committee.						<b>.</b>	- 7	76.9	92
Name of Employer (for United HealthCare Servi					Memo	o Item			
Receipt For: Primary Other (specify) ▼	Year-to-Date ▼ 730.74	P/R De	educti	on (\$38.4	46 Bi-We	eekly)			
Full Name of Individual B. DIMARTINO, TIM		tial) or Full C	rganization Name	Date	of Re	eceipt			
Mailing Address 49605	KEYCOVE ST			09		D D 30	/ Y	y y 2017	Y
City		State	Zip Code					24814724	3
CHESTERFIELD		MI	48047-2361	Amou	unt of	Each R	eceipt th	is Period	
FEC ID number of cont federal political committ	•	С		I Ē.	_			54.0	36
Name of Employer (for United HealthCare Servi			upation (for Individual) KA VP SIs Acct Mgt		Memo	o Item			
Receipt For: Primary Other (specify) ▼	General	Aggregate	Year-to-Date ▼ 328.64	P/R De	educti	on (\$27.3	33 Bi-We	eekly)	
Full Name of Individual		tial) or Full C	rganization Name	Date	of Re	eceipt			
Mailing Address 16942	HUBBARD TRAIL			09	9	30		2017 <sup>°</sup>	
City LAKEVILLE		State MN	Zip Code 55044-5846					24854724 iis Period	D
FEC ID number of cont federal political committ	0	С				y	y	95.2	22
Name of Employer (for Optum Services, Inc	Individual)	Sr A	upation (for Individual) .ssc Gen Counsel		Memo	o Item			
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       666.54				P/R De	educti	on (\$47.	61 Bi-We	eekly)	
SUBTOTAL of Receipts			)			y .	, , ,	226.8	30

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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						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	ated PAC (I	JnitedHealth Group P	AC)						
/ Full Name of Individual (Last, First, Middle A. BRANT, PAUL, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 17 ROCKY BROOK ROAL	)		09 30 2017						
City WILTON	State CT	Zip Code 06897-1919	Transaction ID : PR2575250247240						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Occ SB	Memo Item							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. SHETTY, PRASANNA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 41 HOYA ST			09 / C + Y + Y + Y 09 2017						
City RANCHO MISSION VIEJO	State CA	Zip Code 92694-1283	Transaction ID : PR2575252047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) r IT Sys Anlys	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. KORF, GRETCHEN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2120 WESTON LANE N			09 / 09 / 2017						
City PLYMOUTH	State MN	Zip Code 55447-2372	Transaction ID : PR2575252247240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.62						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2961.57	P/R Deduction (\$192.31 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)	)		561.54						
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						
			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 BROOMFIELD, ROBERT, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 12501 WEST 156TH STRI	EET		M M / D D / Y Y Y Y 09 30 2017						
City OVERLAND PARK	State KS	Zip Code 66221-2662	Transaction ID : PR2575260447240 Amount of Each Receipt this Period						
FEC ID number of contributing									
federal political committee.	C		38.46						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
United HealthCare Services Inc	Hlth	Plan CEO							
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) V		365.37	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. ZARN, MARY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11192 BLUESTEM LANE			09 30 2017						
City	State	Zip Code	Transaction ID : PR2575269147240						
EDEN PRAIRIE	MN	55347-4731	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		125.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Primary General	i iggi oguto		P/R Deduction (\$62.50 Bi-Weekly)						
Other (specify)		, 562.50							
Full Name of Individual (Last, First, Middle c. ZAFFIRIS, NICHOLAS, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1581 ISLAND WAY			09 30 2017						
City	State	Zip Code	Transaction ID : PR2575270647240						
WESTON	FL	33326-3623	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
United HealthCare Services Inc		Plan CEO							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify)		266.76	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			191.54						
TOTAL This Period (last page this line numb	per 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	<b>४</b> 11a ☐ 11b ☐ 11c ☐ 12						
			Detailed Summary Page							
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committee	e to solicit contributions from such committee.						
$\langle \rangle$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)						
١.	Full Name of Individual (Last, First, Middle Initi JONES, TERRY, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 11856 NW 12TH MANOR			09 30 2017						
	City	State	Zip Code	Transaction ID : PR2575279247240						
	CORAL SPRINGS	FL	33071-5035	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item						
	Receipt For:		Year-to-Date ▼							
	Primary General Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)						
	 Full Name of Individual (Last, First, Middle Initi KRASKA, LISA, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 14183 SHADY BEACH TRAIL	NE		09 30 2017						
	City	State	Zip Code	Transaction ID : PR2575283047240						
	PRIOR LAKE	MN	55372-1345	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		34.76 Memo Item						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Recruit Ops							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initi ESSLINGER, JOHN, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 4944 W 151ST TERRACE			09 30 2017						
	City	State	Zip Code	Transaction ID : PR2575288947240						
	LEAWOOD	KS	66224-9744	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
	United HealthCare Services Inc	Med								
	Baggint For:		Year-to-Date V							
	Primary General Other (specify)		266.76	P/R Deduction (\$14.04 Bi-Weekly)						
	JBTOTAL of Receipts This Page (optional)			90.84						

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13 14 15 16 17						
or for commercial purposes, other than usir			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Midc A. HAMBLIN, JILLIAN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3103 BEACON GROVE	ST		09 30 2017						
City	State TX	Zip Code	Transaction ID : PR2575290347240						
SPRING	1	77389-4348	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		95.22						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	—						
Other (specify) ▼		666.54	P/R Deduction (\$47.61 Bi-Weekly)						
Full Name of Individual (Last, First, Mido B. BEAUREGARD, THOMAS, , ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 555 MILTON ROAD			09 30 2017						
City GOSHEN	State CT	Zip Code 06756-1613	Transaction ID : PR2575295147240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60 Memo Item						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Innovation							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. HEWITT, SCOTT, , ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1443 RAYMOND AVE			09 30 2017						
City	State	Zip Code	Transaction ID : PR2575296747240						
SAINT PAUL	MN	55108-1430	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item						
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)	•••••	507.90						
TOTAL This Period (last page this line nur	mber only)	•••••							

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IT,			Use separate schedule(s)	(check only one)							
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
An	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma	ay not be sold or used by any pe	13     14     15     16     17       rson for the purpose of soliciting contributions to solicit contributions from such committee							
	NAME OF COMMITTEE (In Full)		udiess of any political committee								
$\rangle$	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initia MONAGHAN, JOHN, , ,	l) or Full Oi	rganization Name	Date of Receipt							
	Mailing Address 1432 E AMBERWOOD DRIVE	1		09 30 / Y Y Y Y 2017							
	City PHOENIX	State AZ	Zip Code 85048-4056	Transaction ID : PR2575296847240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.				28.08							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial MCELRATH-JONES, MARY, , ,	l) or Full Oi	rganization Name	Date of Receipt							
Mailing Address 100 AMHERST DRIVE				09 30 2017							
	City NEW ROCHELLE	State NY	Zip Code 10804-1800	Transaction ID : PR2575302147240         Amount of Each Receipt this Period         28.08							
	FEC ID number of contributing federal political committee.	С									
	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 ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia HUGHES, ROBERT, , ,	l) or Full Oi	rganization Name	Date of Receipt							
	Mailing Address 68 OCEAN DRIVE	1		09 / D D / Y Y Y Y 09 30 2017							
	City SEABROOK	State NH	Zip Code 03874-4712	Transaction ID : PR2575304247240 Amount of Each Receipt this Period							
Optum Services, Inc Mg				28.08							
			upation (for Individual) Mktg Bus Dev	Memo Item							
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
S	JBTOTAL of Receipts This Page (optional)			84.24							
т	OTAL This Period (last page this line number on	ly)	· · · · · · · · · · · · · · · · · · ·								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
Any information copied from such Reports ar	nd Statements ma	ay not be sold or used by any p	13     14     15     16     17       erson for the purpose of soliciting contributions							
	the name and a	ddress of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle CUEVAS, BRANDON, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8 CLOISTER COURT			09 30 / Y Y Y Y 2017							
City LADERA RANCH	State CA	Zip Code 92694-1556	Transaction ID : PR2575305647240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. KRINN, DOUGLAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3008 CYPRESS CIRCLE			09 / D D / Y Y Y Y 2017							
City MEDINA	State MN	Zip Code 55340-8809	Transaction ID : PR2575310147240							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 95.22 Memo Item P/R Deduction (\$47.61 Bi-Weekly)							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54								
Full Name of Individual (Last, First, Middle C. HUNT, BRADLEY, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6636 W SHORE DR			09 / D D / Y Y Y Y 09 30 / 2017							
City EDINA	State MN	Zip Code 55435-1529	Transaction ID : PR2575310447240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
United HealthCare Services Inc Bus		upation (for Individual) Segment CMO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	)		672.12							
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	X         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle GRIMM, JAN, , ,	,	rganization Name	Date of Receipt							
Mailing Address 3608 WEST 85TH STREE	г 		09 30 2017							
City LEAWOOD	State KS	Zip Code 66206-1353	Transaction ID : PR2575314847240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Sls SVP Optuml	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle <b>DRAWZ</b> , MATTHEW, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4848 SPARROW ROAD			09 / 0 / Y Y Y Y Y 2017							
City MINNETONKA	State MN	Zip Code 55345-3219	Transaction ID : PR2575315947240							
	_	JJJ <del>T</del> J <sup>-</sup> JZ  J	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dvlp	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle GOLDBERG, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3410 BRADLEY LANE			09 30 / Y Y Y Y Y 2017							
City CHEVY CHASE	State MD	Zip Code 20815-3262	Transaction ID : PR2575326947240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		78.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	P/R Deduction (\$39.00 Bi-Weekly)							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 741.00								
SUBTOTAL of Receipts This Page (optional).			134.16							
TOTAL This Period (last page this line numb	er only)									

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle VAN HAM, COLLEEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 727 N EVERGREEN AVE			09 30 / Y Y Y Y Y						
City ARLINGTON HEIGHTS	State IL	Zip Code 60004-5566	Transaction ID : PR2575341947240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SIMONE, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 12 SCALIA COURT			09 30 / Y Y Y Y 2017						
City HAMILTON	State NJ	Zip Code 08690-1363	Transaction ID : PR2575346747240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. IMDIEKE, PATRICK, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 15900 WHITE PINE DRIV	1		09 / D D / Y Y Y Y Y 09 30 2017						
City WAYZATA	State MN	Zip Code 55391-2125	Transaction ID : PR2575347947240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) : Dir Fin	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional			440.76						
TOTAL This Period (last page this line num	ber only)								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

# Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	>	<b>K</b> 11a 13		11b	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	contribu	tions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initia TELESKY, MICHAEL, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 2602 PENNINGTON PLACE				09 30 2017									
	City VALPARAISO	State IN	Zip Code 46383-9163						<b>5094724</b> is Period	0				
	FEC ID number of contributing federal political committee.	С						-	78.	00				
United HealthCare Services Inc K			pation (for Individual) /P SIs Acct Mgmt		Me	emo	ltem							
			Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia PHILLIPS, CHRISTINE, , ,	l) or Full Or		Date of	Re	ceipt								
	Mailing Address 63 HERITAGE TRAIL						09 30 / Y Y Y Y 2017							
	City SUFFIELD	State CT	Zip Code 06078-2376	-	Transaction ID : PR2575354047240 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Dir Regl Affs			31.72									
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 253.76	P/R Deduction (\$15.86 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia BROWN, SALLY, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 192 HOMEWOOD DRIVE						30		2017					
	City CLINTON	State NY	Zip Code 13323-1512						36364724 is Period	0				
United HealthCare Services Inc Asso					<u> </u>		,	y	28.	08				
			pation (for Individual) Dir Service Acct Mgmt		Memo Item									
			Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, .		137.8	30				
т	OTAL This Period (last page this line number or	nly)		- •	<b>_</b> .		_							

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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 ADAM, MATTHEW, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 15607 SUMMIT DRIVE			09 30 / Y Y Y Y Y 09 30 2017							
City EDEN PRAIRIE	State MN	Zip Code 55347-2328	Transaction ID : PR2575364047240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. CIAVARELLA, TRACY, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 20 LORRAINE DRIVE			09 / D D / Y Y Y Y Y 09 / 30 / 2017							
City BEACON FALLS	State CT	Zip Code 06403-1256	Transaction ID : PR2575377947240							
		00403-1230	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I DOLL, KATHLEEN, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 3184 MULLIGAN LANE			09 / D D / Y Y Y Y 2017							
City CHASKA	State MN	Zip Code 55318-3226	Transaction ID : PR2575385147240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		118.66							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	P/R Deduction (\$59.33 Bi-Weekly)							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 584.64								
SUBTOTAL of Receipts This Page (optional)			174.82							
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	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and S or for commercial purposes, other than using the		person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle Ini A. WINKLER, YASMINE, , ,	itial) or Full Organization Name	Date of Receipt						
Mailing Address 1429 WEST WIGWAM TRAIL	-	09 30 / Y Y Y Y 2017						
	State Zip Code	Transaction ID : PR2575390947240						
MOUNT PROSPECT	IL 60056-2940	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	Occupation (for Individual) Regn CEO	Memo Item						
Receipt For:	Aggregate Year-to-Date ▼							
Other (specify) ▼	730.74	P/R Deduction (\$38.46 Bi-Weekly)						
		-						
Full Name of Individual (Last, First, Middle Ini B. CROWE, ANGELA, , ,	itial) or Full Organization Name	Date of Receipt						
Mailing Address 174 CHRISTOPHER ST		09 30 Y Y Y Y 2017						
City	State Zip Code	Transaction ID : PR2575391747240						
MONTCLAIR	NJ 07042-4206	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	28.08						
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Ntwk Prgms	Memo Item						
Receipt For:	Aggregate Year-to-Date V							
Other (specify)	266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ini C. CORTEZ, GREGORIO, , ,	itial) or Full Organization Name	Date of Receipt						
Mailing Address 215 GASPAR BEND		M M / D D / Y Y Y Y 09 30 2017						
City	State Zip Code TX 78613-4556	Transaction ID : PR2575394347240						
CEDAR PARK	TX 78613-4556	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	28.00						
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item						
United HealthCare Services Inc Receipt For:	Med Dir							
Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$14.00 Bi-Weekly)						
Other (specify)	266.00							
SUBTOTAL of Receipts This Page (optional)		133.00						
TOTAL This Period (last page this line number	only)							

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12						
			13 14 15 16 17						
Any information copied from such Reports an 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	NC)						
Full Name of Individual (Last, First, Middle POST, LINDA, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 6520 JAYCOX ROAD			09 30 / Y Y Y Y 2017						
City GALENA	State OH	Zip Code 43021-9530	Transaction ID : PR2575395247240						
		43021-3330	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		30.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		285.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BRATTEBO, CRAIG, , ,	e Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 10202 HARMONY CIRCLI	E		09 30 2017						
City EDEN PRAIRIE	State MN	Zip Code 55347-5019	Transaction ID : PR2575397247240 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) buty Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. KING, STEVEN F, , ,	e Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 33 PINEBROOK ROAD			09 30 2017						
City	State	Zip Code	Transaction ID : PR2575403547240						
NASHUA	NH	03062-2240	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		44.28						
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 ▼ 645.84	P/R Deduction (\$44.28 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	)		266.58						
TOTAL This Period (last page this line numl	, 	· ·							

# Use separate schedule(s)

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(check only one)

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	WIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
۸	information conied from such Department Of t	monte	, ,	13 14 15 16 17							
or fo	information copied from such Reports and State r commercial purposes, other than using the na										
\	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)							
	ull Name of Individual (Last, First, Middle Initial) GOTHARD, CAROL, , ,	) or Full O	rganization Name	Date of Receipt							
Μ	ailing Address 16492 BROOKLANE BOULEVAR	RD		09 30 2017							
	ity IORTIN/III E	State MI	Zip Code	Transaction ID : PR2575419147240							
			48168-8417	Amount of Each Receipt this Period							
	EC ID number of contributing deral political committee.	С		90.90							
	ame of Employer (for Individual) nited HealthCare Services Inc	Occi Dir I	upation (for Individual) Fin	Memo Item							
_	againt For:	I	Year-to-Date ▼	-							
	Primary General Other (specify) ▼		636.30	P/R Deduction (\$45.45 Bi-Weekly)							
	ull Name of Individual (Last, First, Middle Initial)	Date of Receipt									
M	ailing Address 705 NOTTINGHAM COURT			09 30 2017							
	ity RANBERRY TOWNSHIP	State PA	Zip Code 16066-6527	Transaction ID : PR2575421947240         Amount of Each Receipt this Period         76.92							
	EC ID number of contributing deral political committee.	С									
	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Bus Dvlp	Memo Item							
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)							
	ull Name of Individual (Last, First, Middle Initial) O'HARA, KARIN, , ,	) or Full O	rganization Name	Date of Receipt							
M	ailing Address 1431 HENRY COURT			09 30 2017							
		State	Zip Code	Transaction ID : PR2575428747240							
	CHANHASSEN	MN	55317-2200	Amount of Each Receipt this Period							
	EC ID number of contributing deral political committee.	С		76.92							
	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Acctng	Memo Item							
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)							
SU	BTOTAL of Receipts This Page (optional)		•	244.74							
то	TAL This Period (last page this line number onl	y)	•								

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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		Use separate schedule(s)			(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12				
Any information copied from such Reports and or for commercial purposes, other than using t												
NAME OF COMMITTEE (In Full)												
> UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. CASTILLO, EFREM, , ,	Initial) or Full C	rganization Name		Date of	Red	ceipt						
Mailing Address 307 JOLIET AVE				09 30 2017								
	State TX	Zip Code						44134724				
SAN ANTONIO		78209-5243	A	mount	of I	Each R	eceipt th	is Period				
FEC ID number of contributing federal political committee.	C		1					384.	60			
Name of Employer (for Individual)	Occ	upation (for Individual)		Me	mo	Item						
United HealthCare Services Inc	Bus	Seg Chief Med Off										
Receipt For:	Aggregate	Year-to-Date ▼	_			. (\$4.00	00 D' M	111-2				
Other (specify) ▼		3653.70	P/	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MURLEY, MARY, , ,	Initial) or Full C	al) or Full Organization Name				ceipt						
Mailing Address 2775 COUNTRYSIDE DRIV				09 30 2017								
City ORONO	State MN	Zip Code 55356-9675						4364724				
				mount	of I	Each R	eceipt th	is Period				
FEC ID number of contributing federal political committee.	С	C Occupation (for Individual) VP Chief Actuary			0.00							
Name of Employer (for Individual) United HealthCare Services Inc					mo	Item						
Receipt For:	Aggregate	Aggregate Year-to-Date ▼ 4999.90				P/R Deduction (\$0.00 Bi-Weekly)						
Primary     General       Other (specify) ▼												
Full Name of Individual (Last, First, Middle C. AXBERG, PAMELA, , ,	Initial) or Full C	rganization Name		Date of	Red	ceipt						
Mailing Address 1427 BROOKSHIRE COUF	RT			09	/	30	/ Y	y y 2017	Y			
City NEW BRIGHTON	State MN	Zip Code 55112-6390	-					44384724				
		55112-6590	A	mount	of I	Each R	eceipt th	is Period				
			14	7.70 Memo Item								
		upation (for Individual) Gen Mgmt										
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 1837.41	P/R Deduction (\$3.85 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).								392.	30			
TOTAL This Period (last page this line number	er only)		Ī									

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 32 FITCH LANE			09 30 2017						
City NEW CANAAN	State CT	Zip Code 06840-5051	Transaction ID : PR2575446347240						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60						
		upation (for Individual)							
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. HAUTMAN, MILLA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 410 SYCAMORE CIRCLE			09 30 2017						
City PLYMOUTH	State MN	Zip Code 55441-5667	Transaction ID : PR2575447147240 Amount of Each Receipt this Period						
federal political committee.	С		455.46						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		3405.81	P/R Deduction (\$227.73 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I c. BOOKER, ROBERT, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 16632 HANSON BLVD NW			09 30 / Y Y Y Y 2017						
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447247240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		473.50						
		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3342.58	P/R Deduction (\$236.75 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1313.56						
TOTAL This Period (last page this line numbe	r only)								

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a 11b 11c 12						
			13     14     15     16     17       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 (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle <b>A.</b> FLOCCO, LOUIS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3281 S VINE STREET			09 30 / Y Y Y Y Y						
City CHANDLER	State AZ	Zip Code 85248-3845	Transaction ID : PR2575448647240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle GEHLBACH, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5380 YELLOWSTONE TR		7. 0.1	09 / D D / Y Y Y Y 30 2017						
City MINNETRISTA	State MN	Zip Code 55331-9163	Transaction ID : PR2575448847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		86.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Underwriting	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 698.71	P/R Deduction (\$43.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. RUNICE, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4622 BRUCE AVENUE			09 30 / Y Y Y Y 2017						
City EDINA	State MN	Zip Code 55424-1123	Transaction ID : PR2575451547240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.76						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date  292.22	P/R Deduction (\$15.38 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	)		144.84						
TOTAL This Period (last page this line num	per only)								

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
	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	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initial) MCGLINCH, THOMAS, , ,	or Full C	rganization Name	Date of Receipt							
	Mailing Address 910 MIDWEST TRAIL NORTH	State	Zip Code	09 30 2017 Transaction ID : PR2575451647240							
	LAKE ELMO	MN	55042-9658	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		95.22							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury	Memo Item							
	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initial) MURPHY, ERIC, , ,	or Full C	rganization Name	Date of Receipt							
	Mailing Address 5201 BLAKE ROAD		09 / D D / Y Y Y Y 2017								
	City EDINA	State MN	Zip Code 55436-1127	Transaction ID : PR2575453747240 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:     A       Primary     General       Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) PEGG, JACK, , ,	or Full C	rganization Name	Date of Receipt							
	Mailing Address 4917 KAMA LANE NE	-		09 / D D / Y Y Y Y 2017							
	City ALBERTVILLE	State MN	Zip Code 55301-3536	Transaction ID : PR2575456047240           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.08							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Underwriting	Memo Item							
	Receipt For:     A       Primary     General       Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			507.90							
т	OTAL 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	★         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle SMITH, DAYNITA, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4828 ISLAND VIEW DR			M M / D D / Y Y Y Y 09 30 2017					
City MOUND	State MN	Zip Code 55364-9391	Transaction ID : PR2575460647240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle SADUSKE, NANETTE, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4276 NICOLET DRIVE			09 30 / Y Y Y Y Y					
City GREEN BAY	State WI	Zip Code 54311-9798	Transaction ID : PR2575470247240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		86.94					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 652.05	P/R Deduction (\$43.47 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. BARTHEL, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9713 HEMLOCK LANE NC	RTH		09 30 / Y Y Y Y 2017					
City MAPLE GROVE	State MN	Zip Code 55369-3665	Transaction ID : PR2575484347240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			143.10					
TOTAL This Period (last page this line numb	er only)							

FOR LINE NUMBER:

(check only one)

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	orated PAC (	JnitedHealth Group P/	4C)					
Full Name of Individual (Last, First, Mic A. MACLAUCHLAN, DANIEL, , ,	dle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 780 CENTRAL AVENU	E		M M / D D / Y Y Y Y 09 30 2017					
City GLENSIDE	State PA	Zip Code 19038-1701	Transaction ID : PR2575492747240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Mic B. STARMANN, LYNN, , ,	dle Initial) or Full C	Prganization Name	Date of Receipt					
Mailing Address 11701 WEMBLEY RD			09 30 2017					
City LOS ALAMITOS	State CA	Zip Code 90720-4235	Transaction ID : PR2575494547240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		95.22					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)					
Full Name of Individual (Last, First, Mic C. RAMIREZ, MICHELE, , ,	dle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 37 CALAIS ROAD			09 / D D / Y Y Y Y 09 30 2017					
City RANDOLPH	State NJ	Zip Code 07869-3531	Transaction ID : PR2575502447240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		28.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) nan Capital Partner	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	nal)		151.30					
TOTAL This Period (last page this line nu	umber only)	·····						

## SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

# Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)		(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the				or the		ose of a	soliciting	g cont	tributi	ons
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initia SUNDAL, DEBORAH, , ,	al) or Full O	rganization Name	[	Date of	Re	ceipt				
	Mailing Address 5109 WEST 66TH ST				м м 09	/	D D D 30	/ Y	۲ 201	Y 17	Y
	City EDINA	State MN	Zip Code 55439-1429				<b>on ID : I</b> Each Re				
	FEC ID number of contributing federal political committee.	С								28.0	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/	/R Ded	uctio	on (\$14.0	)0 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia WEBSTER, AMBER, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 2115 VALLEY ROAD	1-			м м 09	/	D D D 30	/ Y	201	7 7	Y
	City	State Zip Code CA 92627-3976					on ID : F				
	COSTA MESA FEC ID number of contributing				Amount of Each Receipt this Period						-
	federal political committee.	C							28.0	8	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	ltem				
	Receipt For:	Aggregate		1							
	Other (specify) ▼		P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia JONES, RICHARD, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 8586 W CARBON CT				<sup>M</sup> 09	/	30	/ Y	y 201		Y
	City BOISE	State ID	Zip Code 83709-5195				on ID : I				
	FEC ID number of contributing	C	03709-3193	A	Amount	of	Each Re	eceipt th	nis Pe	riod 28.0	8
	federal political committee.	U				-	9	9	_		
			upation (for Individual) R Reg SIs Dir		M	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P	/R Ded	uctio	on (\$14.0	04 Bi-We	eekly)	I	
s	UBTOTAL of Receipts This Page (optional)						,	. ,		84.1	6
т	OTAL This Period (last page this line number o	nly)								-	

# Use separate schedule(s)

FOR LINE NUMBER:

PAGE 139 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t	Statements make he name and a	I ay not be sold or used by any p Iddress of any political committe	13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. HOWELL, NICHOLAS, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 300 ORANGE GROVE AVE			09 30 / Y Y Y Y Y 2017						
City SOUTH PASADENA	State CA	Zip Code 91030-1616	Transaction ID : PR2575510047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		415.86						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Optuml Cnslt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3544.27	P/R Deduction (\$207.93 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JOSEPH, MOLLY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 9209 GRAND SUMMIT BLV			09 30 / Y Y Y Y Y						
City DRIPPING SPRINGS	State TX	Zip Code 78620-2882	Transaction ID : PR2575521747240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3648.00	P/R Deduction (\$192.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle . HEBERT, PAUL, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 13 GOVERNORS ROW	State	Zip Code	09 30 2017						
WEST HARTFORD	CT	06117-1931	Transaction ID : PR2575522347240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2375.00	P/R Deduction (\$125.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1049.86						
TOTAL This Period (last page this line number	er only)								

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

# Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 1	-	11b	11c	12				
Any information copied from such Reports ar or for commercial purposes, other than using				the pu							
NAME OF COMMITTEE (In Full)			5 10 301101	conti		5 110111 300					
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle A. DI RE, BERNADETTE, , ,	e Initial) or Full C	rganization Name	Dat	e of F	Receipt						
Mailing Address 1 NORFOLK LANE				09 <sup>™</sup>	/ D 3	D / Y	2017	Y			
City HOLLISTON	State MA	Zip Code 01746-2362				D: PR2575 Receipt t		0			
FEC ID number of contributing federal political committee.	С				4		76.9	92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Men	no Item	I					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R	Deduc	ction (\$3	38.46 Bi-W	'eekly)				
Full Name of Individual (Last, First, Middle B. KAPLAN, ERIC, , ,	e Initial) or Full C	rganization Name	Dat	e of F	Receipt						
Mailing Address 193 PARTRIDGE LANDIN					09 / D / Y Y Y Y 2017						
City GLASTONBURY	State CT	Zip Code 06033-2849				: PR2575		0			
		06033-2649	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C			28.00							
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) Mkt SIs SVP OptumI			no Item	I					
Receipt For:	Aggregate	Year-to-Date 🔻									
Primary General Other (specify) ▼		, 266.00				4.00 Bi-W	eekly)				
Full Name of Individual (Last, First, Middle C. CROCKETT, DOUGLAS, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt						
Mailing Address 5938 DEER HOLLOW CC	DURT			09 <sup>M</sup>	/ 03	BO / Y	2017	Y			
City PITTSBORO	State IN	Zip Code 46167-9583				D: PR2575 Receipt t		0			
FEC ID number of contributing federal political committee.	С			_	,	9	142.8	34			
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 ▼ 999.88	P/R	Deduc	ction (\$7	71.42 Bi-W	/eekly)				
SUBTOTAL of Receipts This Page (optional	)				,	9	247.	76			
TOTAL This Period (last page this line num	ber only)				-q=						

FOR LINE NUMBER:

PAGE 141 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle COHEN, SANFORD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 28 CRESCENT LANE			09 30 2017						
City LEVITTOWN	State NY	Zip Code 11756-2506	Transaction ID : PR2575526147240 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) Seg Chief Med Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 518.48	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. GREENBERG, JASON, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 630 STILSON CANYON RC			09 / D D / Y Y Y Y Y 2017						
City CHICO	State CA	Zip Code 95928-9179	Transaction ID : PR2575526747240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. JETER, WILLIAM, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 21 PLAINFIELD STREET UNIT 3			09 / D D / Y Y Y Y Y 2017						
City JAMAICA PLAIN	State MA	Zip Code 02130-3632	Transaction ID : PR2575528147240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) T	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			320.30						
TOTAL This Period (last page this line number	er only)								

FOR LINE NUMBER:

PAGE 142 OF

			Use separate schedule(s)			(check only one)						
	EMIZED RECEIPTS		for each category Detailed Summar		×	11a		11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r						purp					
	NAME OF COMMITTEE (In Full)		duress of any politic	ai committee	10 501				on suci	1 commu		
$\rangle$	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth C	Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia HUNTER, ROBERT, , ,	l) or Full O	rganization Name			ate of	Rec	ceipt				
	Mailing Address 9236 PRESTON PLACE					м м 09	/	D D D 30	/ Y	y y 2017	Y	
	City EDEN PRAIRIE	State MN	Zip Code 55347-3396		A					52834724 is Period	0	
	FEC ID number of contributing federal political committee.	С						<del>,</del>		28.	08	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir N	upation (for Individua M A	l)		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	266.76	P/	R Dedı	uctio	n (\$14.(	)4 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia HOLOVNIA, KRISTEN, , ,	l) or Full O	rganization Name			ate of	Rec	ceipt				
	Mailing Address 4610 LAKEVIEW DRIVE				09 / D D / Y Y Y Y Y 2017							
	City EDINA	State MN	Zip Code 55424-1518							53304724	0	
	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 Individua outy Gen Counsel Mg	,		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	1826.85	P/I	R Dedu	uctio	n (\$96.1	5 Bi-We	ekly)		
С.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name			ate of	Rec	ceipt				
	Mailing Address 34301 299TH PLACE					<sup>M</sup> 09	1	<sup>D</sup> 30	/ Y	ү 2017	Y	
	City AITKIN	State MN	Zip Code 56431-5914		A					53314724 is Period	.0	
	FEC ID number of contributing federal political committee.	С			ļ			y	,	76.	92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individua Compli	l)		Me	emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	730.74	P/	R Dedi	uctio	on (\$38.4	46 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)							,		297.3	30	
т	OTAL This Period (last page this line number or	ıly)		•••••	Ī			,	-			

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements ma g the name and a	l ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Midd BAHL, ALISA, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 41 BIRCHWOOD DRIVE			09 30 Y Y Y Y 2017					
City GREENWICH	State CT	Zip Code 06831-3311	Transaction ID : PR2575534447240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		43.48					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? Sales	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 347.84	P/R Deduction (\$21.74 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. HAMLIN, THOMAS, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2800 NEWMAN			09 / D D / Y Y Y Y 2017					
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536247240 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) 3ehvrl Med Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. SULLIVAN, EILEEN, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 671 PLANTATION KEY APT 103			09 / D D / Y Y Y Y 30 2017					
City OCOEE	State FL	Zip Code 34761-4665	Transaction ID : PR2575537247240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ssc Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		148.48					
TOTAL This Period (last page this line nur	nber only)							

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

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 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. LUQUE, JOY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 18507 KELLY CAVE TRA	IL		09 30 2017						
City DALLAS	State TX	Zip Code 75252-2688	Transaction ID : PR2575539247240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		31.20						
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 ▼ 280.80	P/R Deduction (\$15.60 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. WENTZIEN, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6350 SUMMIT CIRCLE			09 / D D / Y Y Y Y 2017						
City CHANHASSEN	State MN	Zip Code 55317-9138	Transaction ID : PR2575540847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) OptumI CnsIt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle STEINBRECHER, HOLLY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2101 LILAC LANE			09 / D D / Y Y Y Y 09 / 30 / 2017						
City FRISCO	State TX	Zip Code 75034-3652	Transaction ID : PR2575544547240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	)		251.58						
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	<b>≭</b> 11a 11b 11c 12								
			13     14     15     16     17       erson for the purpose of soliciting contributions								
	the name and a	ddress of any political committee	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, Middl BALCK, AMY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address N3681 VINE RD			09 30 / Y Y Y Y 2017								
City FREEDOM	State WI	Zip Code 54913-6928	Transaction ID : PR2575548447240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. DAIKEN, LAURIE, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5002 ONEIDA ST			09 / D D / Y Y Y Y 2017								
City DULUTH	State MN	Zip Code 55804-1642	Transaction ID : PR2575549647240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		47.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Anlys	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.20	P/R Deduction (\$23.80 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. MORGAN, MARY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 WILBUR MAY PAR APT 705	1		09 / D D / Y Y Y Y 2017								
City RENO	State NV	Zip Code 89521-4007	Transaction ID : PR2575550847240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		103.68								
TOTAL This Period (last page this line num	ber only)										

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ודר			Use separate schedule(s)	(che	eck only	/ on	e)	L					
	MIZED RECEIPTS		for each category of the Detailed Summary Page	×	-		11b	11c			17		
				ry of the ary Page 111a 11b 11c 12 13 14 15 16 sed by any person for the purpose of soliciting contributions ical committee to solicit contributions from such committee Group PAC) Date of Receipt Date of Receipt 9 09 2017 Transaction ID : PR2575579247240 Amount of Each Receipt this Period 192.30 P/R Deduction (\$96.15 Bi-Weekly) 1826.85 P/R Deduction (\$96.15 Bi-Weekly) 1826.85 P/R Deduction ID : PR2575582847240 Amount of Each Receipt this Period 384.60 Wemo Item P/R Deduction (\$192.30 Bi-Weekly) 3653.70 P/R Deduction (\$192.30 Bi-Weekly) 2017 Transaction ID : PR2575583747240 Amount of Each Receipt this Period 34.76		ons							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)									
	Full Name of Individual (Last, First, Middle Initial MOCK, CURTIS, , ,	) or Full Or	ganization Name		M M / D D / Y Y Y Y								
I	Mailing Address 23 KELTON STREET												
	City REHOBOTH	State MA	Zip Code 02769-2530										
	FEC ID number of contributing rederal political committee.	С						-	1	92.30	0		
(	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) ien Mgmt		Me	emo	Item						
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial WINSOR, ELIZABETH, , ,	) or Full Or	ganization Name	Date of Receipt									
-	Mailing Address 57 WILDERS PASS												
	City CANTON	State CT	Zip Code 06019-2259										
	FEC ID number of contributing ederal political committee.	С			384.60								
	Name of Employer (for Individual) Jnited HealthCare Services Inc		Occupation (for Individual) CEO NA Acct				Memo Item						
Ī	Receipt For:	Aggregate \	∕ear-to-Date ▼	P	/R Dedu	ictio	n (\$192	30 Bi-M	/ookly	e)			
	Other (specify) ▼	4	3653.70				π (φ102			,			
	Full Name of Individual (Last, First, Middle Initial EULL, MARY ANN, , ,	) or Full Or	ganization Name		Date of	Ree	ceipt						
-	Mailing Address 11204 BEDFORDSHIRE AVE				09	/	30		201	7			
	City POTOMAC	State MD	Zip Code 20854-2003										
	FEC ID number of contributing rederal political committee.	С					9	y	_	34.76	6		
	Name of Employer (for Individual) Optum Services, Inc	Occuj Exec	pation (for Individual) Dir		Memo Item								
ł	Receipt For: Primary General Other (specify)	Aggregate Y		P	P/R Deduction (\$17.38 Bi-Weekly)								
รเ	JBTOTAL of Receipts This Page (optional)		•				,	. ,	6	611.66	3		
тс	TAL This Period (last page this line number on	ly)		.			r_ 1			-			

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		Use separate schedule(s)	(check only one)								
I LIVILLED REVEILIS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
VinitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I A. HARRIS, EUGENE, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2832 HARBORSIDE WAY			09 30 2017								
City SOUTHPORT	State NC	Zip Code 28461-8373	Transaction ID : PR2575585447240 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) R Reg VP of Brkr Sls	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. LYON, JAMIE, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 2069 CIRCLE DRIVE		I	M         M         /         D         D         /         Y								
City KRONENWETTER	State WI	Zip Code 54455-9062	Transaction ID : PR2575585947240								
		54455-9062	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	1								
Primary     General       Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C. JORGE, DEBORAH, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 45 DELPHI ROAD			M M / D D / Y Y Y Y 09 30 2017								
City STAFFORD SPRINGS	State CT	Zip Code 06076-3405	Transaction ID : PR2575593647240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prod	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			133.00								
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							
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 (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle MILLER, MICHAEL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 213 MAGILL DRIVE			09 30 2017							
City GRAFTON	State MA	Zip Code 01519-1328	Transaction ID : PR2575595647240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		83.32							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 708.22	P/R Deduction (\$41.66 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. CHIMENTO, LISA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 524 FORT WILLIAMS PKW			09 30 Y Y Y Y 2017							
City ALEXANDRIA	State VA	Zip Code 22304-1849	Transaction ID : PR2575596147240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		714.28							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ng Dir OptumI Cons	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.98	P/R Deduction (\$357.14 Bi-Weekly)							
Full Name of Individual (Last, First, Middle IVERSON, LISA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 13341 CARRACH AVENUE		7.0.4	09 / 0 / Y Y Y Y 30 / 2017							
City ROSEMOUNT	State MN	Zip Code 55068-4774	Transaction ID : PR2575603247240 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 CFO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			1182.20							
TOTAL This Period (last page this line number	er only)									

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				or each category of the Detailed Summary Page	×	11a 13		11 14	- H	1 <sup>-</sup>	1c 5	12 16	17		
or	y information copied from such Reports and State for commercial purposes, other than using the na									solic	citing				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) MCNUTT, DIANE, , ,	or Full O	Drgar	nization Name	C	Date of Receipt									
	Mailing Address 11524 ZION ROAD				M = M         /         D = D         /         Y = Y = Y         Y           09         30         2017										
	City BLOOMINGTON	State MN		Zip Code 55437-3636		Transaction ID : PR2575604547240									
		C			Amount of Each Receipt this Period 384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) an Capital Partner	Memo Item										
	Receipt For:			r-to-Date ▼ 3653.70	P/	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name COSTA, JOEL, , ,						Date of Receipt								
	Mailing Address 775 WESTCHESTER AVENUE	I				09 / <sup>1</sup> 2017 2017									
	City SHAKOPEE	State MN		Zip Code 55379-4557	Transaction ID : PR2575605847240           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						230.76							
	Name of Employer (for Individual) Optum Services, Inc	Occ VP		Memo Item											
	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2192.22	P/R Deduction (\$115.38 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) KING, SARAH, , ,	lle Initial) or Full Organization Name					f Re	ecei	ipt						
	Mailing Address 116 CUTLER ROAD	1 -				<sup>M</sup> 09	/	L	<sup>D</sup> 30	/	Y	2017 Y	_		
	City GREENWICH	State CT		Zip Code 06831-2511								128472 s Period			
	FEC ID number of contributing federal political committee.	C				ouri		J			J	400			
	Name of Employer (for Individual) Optum Services, Inc			ion (for Individual) Mgmt		M	emc	o Ite	em						
	Receipt For:     A       Primary     General       Other (specify)	Aggregate	Yea	r-to-Date ▼ 3600.00	P/R Deduction (\$200.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•				,			,	1015	.36		
	OTAL This Period (last page this line number only				ĺ			-			,				

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	Use separate schedule(s)		(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. STOCKHOWE, MARK, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2108 MANOR DRIVE			09 30 / Y Y Y Y 2017								
City BURNSVILLE	State MN	Zip Code 55337-2036	Transaction ID : PR2575619947240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		95.22								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Adv/Tech Cnslt Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. KELLEY, SUSAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2279 STEARNLEE AVE			09 / D D / Y Y Y Y 09 30 2017								
City LONG BEACH	State CA	Zip Code 90815-1934	Transaction ID : PR2575623047240								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 34.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Anlys	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. THOMPSON, BRIAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 17829 63RD AVE N			09 / D D / Y Y Y Y Y 2017								
City MAPLE GROVE	State MN	Zip Code 55311-4650	Transaction ID : PR2575634647240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		521.36								
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Bus	upation (for Individual) Segment CEO	Memo Item								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3175.16	P/R Deduction (\$260.68 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		651.34								
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								
			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. WILSON, STEPHEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2420 DURHAM MANOR	DRIVE		09 / D D / Y Y Y Y 2017								
City FRANKLIN	State TN	Zip Code 37064-5266	Transaction ID : PR2575636147240								
- RANKLIN		37004-3200	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		153.84								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For:	I										
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$76.92 Bi-Weekly)								
Other (specify) ▼		461.52									
Full Name of Individual (Last, First, Middle B. CLARK, TERRENCE, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8 COOPER AVENUE			09 30 2017								
City	State	Zip Code	Transaction ID : PR2575636947240								
EDINA	MN	55436-1315	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) s Segment CMO	Memo Item								
Receipt For:		Year-to-Date ▼									
Primary General Other (specify) ▼	Aggregate	3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle	e Initial) or Full C	rganization Name									
CABANILLAS, MARIA, , ,			Date of Receipt								
Mailing Address 2105 SHERIDAN			09 / D D / Y Y Y Y 2017								
City HOUSTON	State TX	Zip Code 77030-2107	Transaction ID : PR2575637347240								
			Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	Hlth	Plan CEO									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	)		566.52								
	,										
TOTAL This Period (last page this line num	ber only)										

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

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12								
			13     14     15     16     1       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	g the name and a										
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Midd COLLINS, NEIL, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8465 MISSION HILLS LA			09 / D D / Y Y Y Y 09 2017								
City CHANHASSEN	State MN	Zip Code 55317-7712	Transaction ID : PR2575637647240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Midd <b>B.</b> DAVIS, BENTON, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9825 NORTH 53RD PLA			09 / D D / Y Y Y Y 2017								
City PARADISE VALLEY	State AZ	Zip Code 85253-1634	Transaction ID : PR2575639247240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM Clin Comnty Ntwk	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3461.40	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. NICOLL, DEREK, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 155 MEADOWVIEW LAN			09 / 0 / Y Y Y Y 2017								
City MEDINA	State MN	Zip Code 55340-4510	Transaction ID : PR2575648647240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Mktg	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	al)		440.68								
TOTAL This Period (last page this line nun	nber 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 e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	<u> </u>										
VinitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P/	4C)								
Full Name of Individual (Last, First, Mide A. HERMAN, CRAIG, , ,	lle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9609 WYOMING CIRCL	E		09 30 / Y Y Y Y 2017								
City BLOOMINGTON	State MN	Zip Code 55438-1628	Transaction ID : PR2575650247240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. VAN ERT, MARK, , ,	lle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 221 OAKWOOD RD			09 / D D / Y Y Y Y 2017								
City HOPKINS	State MN	Zip Code 55343-8532	Transaction ID : PR2575650547240								
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) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Mido C. HAYHURST, JENNY, , ,	lle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 23A MOUNT HYGEIA R			09 / D D / Y Y Y Y 2017								
City FOSTER	State RI	Zip Code 02825-1434	Transaction ID : PR2575651847240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		440.68								
TOTAL This Period (last page this line nut	mber only)										

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			Use separate schedule(s)	(check only one)									
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a	_	- F	11c	12				
	y information copied from such Reports and Sta					11b       11c       12         14       15       16         14       15       16         12       14       15         14       15       16         14       15       16         15       16       16         16       16       16         17       16       16         18       10       2017         19       30       2017         110       192.30 Bi-Weekly)       384.60         Memo Item       2017         130       2017         130       2017         130       2017         130       2017         14       15         15       16         16       47.60         Memo Item       47.60         Memo Item       2017         130       2017         130       2017         130       2017         14       15         15       16         16       10         17       10         18       2017         19       30         10							
or	for commercial purposes, other than using the n	ame and a	ddress of any political committee	to so	olicit con	tribu	itions fi	rom such	o committ	ee.			
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia MCFANN, ELENA, , ,	l) or Full Oi	rganization Name		Date of	Rec	ceipt						
	Mailing Address 18925 24TH AVENUE NORTH												
	City PLYMOUTH	State MN	Zip Code 55447-2072	Transaction ID : PR2575654747240 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					7		384.0	60			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) n CEO		Me	mo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initia KANE, HEATHER, , ,	Individual (Last, First, Middle Initial) or Full Organization Name											
	Mailing Address 3621 N LAKEWOOD AVENUE UNIT 3S				09 30 2017								
	City CHICAGO	State IL	Zip Code 60613-4842						-	)			
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Gen Mgmt			Me	mo	ltem						
	Receipt For:	Aggregate	Year-to-Date ▼		-								
	Other (specify) ▼		P	P/R Deduction (\$23.80 Bi-Weekly)									
c.	Full Name of Individual (Last, First, Middle Initia PIZZANO, KATHRYN, , ,	l) or Full Oi	rganization Name		Date of	Rec	ceipt						
	Mailing Address 21 STEBBINS FARM ROAD				<sup>M</sup> 09	1		/ Y		Y			
	City PAWLING	State NY	Zip Code 12564-3109				-			0			
	FEC ID number of contributing federal political committee.	С					,	. ,	28.0	08			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•••••				,	.,	460.2	28			
Т	OTAL This Period (last page this line number on	ly)											

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using			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 HUXLEY, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2465 EDGERTON ST			09 / 09 / Y Y Y Y 2017								
City LITTLE CANADA	State MN	Zip Code 55117-1674	Transaction ID : PR2575664247240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle ZIGLER, JANICE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 21 TREVINO CIRCLE			09 / D D / Y Y Y Y 09 30 2017								
City ANGEL FIRE	State NM	Zip Code 87710	Transaction ID : PR2575665647240 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) gn Pres Ntwk Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. ALLEN, CARL, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8675 AZURE SKY DRIVE			09 30 / Y Y Y Y 2017								
City LAS VEGAS	State NV	Zip Code 89129-2227	Transaction ID : PR2575669347240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		78.00								
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) 1ed Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			490.68								
TOTAL This Period (last page this line numb	er only)										

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b	11c		12 16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	g con	tributi	ions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	NC)										
Α.	Full Name of Individual (Last, First, Middle Initia SANTA, ERIC, , ,	l) or Full Oi	rganization Name		Date of Receipt									
	Mailing Address 2101 CAMILLO COURT			09 30 / Y Y Y Y 2017										
	City APEX	State NC	Zip Code 27502-9679	Transaction ID : PR2575673947240 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.										28.0	8			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev		M	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	F	P/R Ded	uctio	on (\$14.	04 Bi-We	eekly)	)				
в.	Full Name of Individual (Last, First, Middle Initia MITCHELL, JILL, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt							
	Mailing Address 11499 ASHLEY COURT				09 / D D / Y Y Y Y 09 30 2017									
	City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251	-				PR2575(						
	FEC ID number of contributing federal political committee.	C					Amount of Each Receipt this Period 30.76							
	Name of Employer (for Individual) United HealthCare Services Inc	Осси	_	M	emo	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.22	P/R Deduction (\$15.38 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initia	l) or Full Oi	rganization Name		Date of	Re	ceipt							
	Mailing Address 8220 HOT CREEK DRIVE				м м 09	/	30	/ Y	201	ү 17	Y			
	City LAS VEGAS	State NV	Zip Code 89128-8247				-	PR2575 eceipt th			)			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	, y		120.0	0			
	Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 780.00	P/R Deduction (\$60.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)		••••••				,	.,		178.8	4			
т	OTAL This Period (last page this line number or	lly)		-			-	40						

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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.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middl A. STIDMAN, CHRISTOPHER, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6504 CHEROKEE TRAIL			M M / D D / Y Y Y Y 09 30 2017						
City EDINA	State MN	Zip Code 55439-1109	Transaction ID : PR2575683847240 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) CInt Relationship	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. OCHIPINTI, JOSEPH, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2751 MEETING PLACE			09 / 09 / 2017						
City ORLANDO	State FL	Zip Code 32814-6136	Transaction ID : PR2575685747240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 756.39	P/R Deduction (\$39.81 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. FINE, BRETT, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 607 STONINGTON ROA	·		09 / 0 / Y Y Y Y 2017						
City SILVER SPRING	State MD	Zip Code 20902-1547	Transaction ID : PR2575692847240 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) ? Corp Strat	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	l)		541.14						
TOTAL This Period (last page this line nun	ber only)								

## Use separate schedule(s)

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(check only one)

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				□					
	y information copied from such Reports and State for commercial purposes, other than using the na													
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) BRASCHAYKO, AVIS, , ,	or Full O	rgar	nization Name		Date of Receipt								
	Mailing Address 10163 MISSISSIPPI BLVD					09 30 2017								
	City COON RAPIDS	State MN		Zip Code 55433-4531	Transaction ID : PR2575695747240									
		C		55455*4551	Amount of Each Receipt this Period 30.76									
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	•	ion (for Individual)		Memo Item								
	Poppint For:	Aggregate	P/	R Ded	uctio	on (\$	\$15.38	8 Bi-We	ekly)					
B.	Full Name of Individual (Last, First, Middle Initial) FARRELL, STEPHEN, , ,	or Full O	rgar	nization Name		Date of Receipt								
	Mailing Address 50 MAJOR DOANE RD	1		1		09 30 / 2017								
	City WELLFLEET	State MA		Zip Code 02667-7836			<b>9624724</b> is Period	-						
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) HIth Plan CEO					Memo Item							
	Name of Employer (for Individual) United HealthCare Services Inc													
	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2730.74	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) MOORE, EDWARD, , ,	al) or Full Organization Name				Date of Receipt								
	Mailing Address 3110 N CHESTNUT ST APT 106	1 -		I		<sup>M</sup> 09	/	L	30 <sup>D</sup>		2017			
	City CHASKA	State MN		Zip Code 55318-4594							70274724 is Period			
		C				inouni	U	J		Jeipt til	28.			
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP IT					Memo Item							
	Receipt For:     Aggregat       Primary     General       Other (specify)			r-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)				[	-	_	7		9	135.	76		
Т	OTAL This Period (last page this line number only	y)		••••••				-				-		

## 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 A. HERMES, JAMIL, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 9809 BROOKFORD ROAD			09 30 / Y Y Y Y Y 2017						
City POTOMAC	State MD	Zip Code 20854-2135	Transaction ID : PR2575705347240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		35.70						
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 ▼ 249.90	P/R Deduction (\$17.85 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. PROKOCKI, ELIZABETH, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 9746 SUNSET HILL DR			M M / D D / Y Y Y Y 09 30 2017						
City LONE TREE	State CO	Zip Code 80124-6720	Transaction ID : PR2575705847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ntwk	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I WILSON, D ELLEN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 400 STUART STREET 25D City	State	Zip Code	09 30 2017 Transaction ID : PR2575708847240						
BOSTON	MA	02116-5011	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 Human Capital	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			612.60						
TOTAL This Period (last page this line numbe	er only)								

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middl A. VOLLRATH, MICHELLE, , ,	le Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 7647 MARKER ROAD			09 30 / Y Y Y Y Y 09 30 2017							
City SAN DIEGO	State CA	Zip Code 92130-5616	Transaction ID : PR2575719847240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		157.88							
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 ▼ 947.28	P/R Deduction (\$78.94 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. CREED, JOHN, , ,	le Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 6813 67TH STREET NE			09 / D D / Y Y Y Y 2017							
City ALBERTVILLE	State MN	Zip Code 55301-4643	Transaction ID : PR2575720547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		Memo Item P/R Deduction (\$15.86 Bi-Weekly)							
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) IT								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 253.76								
Full Name of Individual (Last, First, Middl C. CRANDALL, KIM, , ,	le Initial) or Full C	Date of Receipt								
Mailing Address 6016 BRIGIDS CLOSE E	1		09 / D D / Y Y Y Y 2017							
City DUBLIN	State OH	Zip Code 43017-3428	Transaction ID : PR2575731247240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	al)		217.68							
TOTAL This Period (last page this line nun										

## 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	✗         11a         11b         11c         12           13         14         15         16         17								
or for commercial purposes, other than u			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	oorated PAC (	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Mi HELLAND, ROBYN, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9089 PARTRIDGE R			09 30 Y Y Y Y Y 2017								
City MINNETRISTA	State MN	Zip Code 55375-4513	Transaction ID : PR2575733847240								
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) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Mi OLSON, KRISTIN, , ,											
Mailing Address 5901 TRACY AVENU			09 / D D / Y Y Y Y 2017								
City EDINA	State MN	Zip Code 55436-2516	Transaction ID : PR2575734447240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		Memo Item								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 258.40	P/R Deduction (\$15.20 Bi-Weekly)								
Full Name of Individual (Last, First, Mi C. KNORR, MOLLY, , ,	ddle Initial) or Full C	Date of Receipt									
Mailing Address 1144 PROSPECT AV	1		09 / D D / Y Y Y Y 2017								
City HARTFORD	State CT	Zip Code 06105-1124	Transaction ID : PR2575735447240 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) Risk Adjustment	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	onal)		135.40								
TOTAL This Period (last page this line r	number only)	•									

## Use separate schedule(s)

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			for each category of the Detailed Summary Page									
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) GROSKLAGS, JEFFREY, , ,	) or Full O	rganization Name	Date of Receipt								
	Mailing Address 3233 TIMBERWOLF CIRCLE			09 30 / Y Y Y Y 2017								
		State MN	Zip Code	Transaction ID : PR2575735747240								
	PRIOR LAKE		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	Occi VP I	upation (for Individual) Fin	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		1826.85	P/R Deduction (\$96.15 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial) KRAL, JESSICA, , ,	) or Full O	rganization Name	Date of Receipt								
	Mailing Address 4358 COOLIDGE AVE			09 30 2017								
	City	State	Zip Code	Transaction ID : PR2575736147240								
	SAINT LOUIS PARK	MN	55424-1020	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 VP	upation (for Individual) IT	P/R Deduction (\$38.46 Bi-Weekly)								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74									
с.	Full Name of Individual (Last, First, Middle Initial) MURRAY, THOMAS, , ,	) or Full O	rganization Name	Date of Receipt								
	Mailing Address 10 CIRCLE WEST			09 30 Y Y Y Y 09 30 2017								
	City	State	Zip Code	Transaction ID : PR2575736547240								
	EDINA	MN	55436-1313	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		434.78								
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP (	upation (for Individual) Dps	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼ 3478.24	P/R Deduction (\$217.39 Bi-Weekly)								
S	JBTOTAL of Receipts This Page (optional)			704.00								
т	OTAL This Period (last page this line number onl	y)	•									

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle CESARETTI, GINA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5020 CIRCLE DOWN			09 30 Y Y Y Y Y							
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739047240 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) outy Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. STRICKLAND, JULIE, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 3207 SUNNYWOOD DRIVE			09 / D D / Y Y Y Y Y 2017							
City FULLERTON	State CA	Zip Code 92835-1858	Transaction ID : PR2575740947240 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) Advrtsng	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. WAITE, STEPHANIE, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 2501 S HORIZON DR			M M / D D / Y Y Y Y 09 30 2017							
City APPLETON	State WI	Zip Code 54915-5851	Transaction ID : PR2575743247240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			440.68							
TOTAL This Period (last page this line number	er only)									

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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		Use separate schedule(s)			(check only one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>X</b> 11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	۹C)								
A.	Full Name of Individual (Last, First, Middle Initia PORTZ, THOMAS, , ,	l) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 2119 SHERIDAN HILLS RD				Mon         Constraint         Constraint							
	City WAYZATA	State MN	Zip Code 55391-2327									
	FEC ID number of contributing federal political committee.	С			<u> </u>				28.	08		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	pation (for Individual) ïn		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76		P/R Dedi	uctio	on (\$14.	04 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia LAMOINE, DAVID, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 3607 W 89TH ST			09 / D / Y Y Y 2017								
	City BLOOMINGTON	State MN	Zip Code 55431-1826	$\vdash$					<b>5514724</b>	0		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Dir Proj Mgmt			Amount of Each Receipt this Period							
	Name of Employer (for Individual) Optum Services, Inc				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$47.61 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia DOMER, HERBERT, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 2715 IONE COURT				09	1	30	/ Y	2017 <sup>°</sup>	Y		
	City COLUMBUS	State OH	Zip Code 43235-2810	_					7 <b>5604724</b> is Period	0		
	FEC ID number of contributing federal political committee.	С				_	y .	, y	28.	00		
Name of Employer (for Individual) Optum Services, Inc			pation (for Individual) -		Memo Item							
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 266.00		P/R Ded	uctio	on (\$14.	.00 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•			,	.,	151.3	30		
т	OTAL This Period (last page this line number or	ly)	••••••	-								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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	-	Use separate schedule(s)	(check	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11		11b	11c	12					
Any information copied from such Reports a				he pu								
or for commercial purposes, other than usin	g the name and a	ddress of any political committee	e to solicit	contri	butions	from such	n committe	96.				
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Midd FULTON, RYAN, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 805 LANEWOOD LANE	NORTH			Model         Paragraphic         Paragraphic <th< td=""></th<>								
City PLYMOUTH	State MN	Zip Code 55447-4347										
FEC ID number of contributing federal political committee.	C			_			34.7	76				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Prod		Mem	io Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R D	)educ	tion (\$17	.38 Bi-We	ekly)					
Full Name of Individual (Last, First, Midd B. LOWE, JANET, , ,	le Initial) or Full O	rganization Name	Date	e of P	eceipt							
Mailing Address 2439 BROADMONT DRI	1			09 / D D / Y Y Y Y 09 30 2017								
City CHESTERFIELD	State MO	Zip Code 63017-7801					58647240	)				
· · · · · · · · · · · · · · · · · · ·		03017-7801	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Acct Mgmt TPA			Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻		1								
Primary General Other (specify) ▼		266.76	P/R D	educt	ion (\$14	.04 Bi-We	ekly)					
Full Name of Individual (Last, First, Midd C. EKLO, BENJAMIN, , ,	le Initial) or Full O	rganization Name	Date	e of P	eceipt							
Mailing Address 3942 CAMPELLO CURV	Έ			9	/ 30		2017	Y				
City CHASKA	State MN	Zip Code 55318-4639				<b>PR2575</b> Receipt th	<b>76184724</b> is Period	0				
FEC ID number of contributing federal political committee.	С				y	.,	666.6	6				
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP F	upation (for Individual) Fin		Memo Item								
Receipt For: Primary General Other (specify)						3.33 Bi-W	/eekly)					
SUBTOTAL of Receipts This Page (optional	al)				, .	. ,	729.5	50				
TOTAL This Period (last page this line nur	nber only)				41-1	-						

## 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	<b>X</b> 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 Incorpo	rated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Midd CUNNINGHAM, MICHAEL, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 50 SOUTH 16TH STREE UNIT 4706	ET		09 30 2017					
City PHILADELPHIA	State PA	Zip Code 19102-2534	Transaction ID : PR2575767847240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.76					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D NA Acct	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.22	P/R Deduction (\$15.38 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. MONTOYA, MATTHEW, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 12370 BRADFORD DR			09 30 / Y Y Y Y 2017					
City PARKER	State CO	Zip Code 80134-3609	Transaction ID : PR2575777647240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. ROEPKE, KRISTIN, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 11828 200TH STREET	01-14		09 / D D / Y Y Y Y Y 30 2017					
City SILVER LAKE	State MN	Zip Code 55381-6069	Transaction ID : PR2575777747240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Dev	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		86.84					
TOTAL This Period (last page this line nur	nber only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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171			Use separate schedule(s)	(ch	eck only	/ on	ie)	L				
	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											
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)								
/	Full Name of Individual (Last, First, Middle Initia		-	, 								
A.	MULLINS, CHRISTOPHER, , ,		ganization Name		Date of	Re	ceipt					
	Mailing Address 15560 SMITHFIELD PLACE				Model       Model <td< td=""></td<>							
	City CENTREVILLE	State VA	Zip Code 20120-4901									
	FEC ID number of contributing federal political committee.	С					<del>,</del>		38.	46		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2865.37	]	P/R Dedu	uctic	on (\$19.)	23 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MORRIS, CAROLYN, , ,					Re	ceipt					
	Mailing Address PO BOX 1744			M = M         /         D = D         /         Y = Y = Y         Y           09         30         2017         1000								
	City SHIPROCK	State NM	Zip Code 87420-1744						<b>8094724</b>	0		
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Govt Affs Assc Dir			Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 267.52	] F	P/R Deduction (\$14.08 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia MADDUX, SUSAN, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 16426 FARMERS MILL LANE				09	/	D D D 30		2017			
	City CHESTERFIELD	State MO	Zip Code 63005-4549						78384724 is Period	0		
	FEC ID number of contributing federal political committee.	С					7	,	28.	08		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) harm Ops		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•					94.	70		
т	OTAL This Period (last page this line number or	וy)		•			,					

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		Use separate schedule(s)	(check c	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	۱ <u>–</u>	11b	11c	12					
Any information copied from such Reports and												
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	ne name and a	ddress of any political committee	e to solicit (	contril	outions t	rom sucr		ee.				
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle In MAURER, CARRIE, , ,	nitial) or Full C	organization Name	Date	Date of Receipt								
Mailing Address 2899 EDGEWATER COVE			09 / D D / Y Y Y Y 09 30 2017									
City WOODBURY	State MN	Zip Code 55125-8705		Transaction ID : PR2575798147240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С						432.2	22				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3487.09	P/R D	educt	ion (\$216	6.11 Bi-W	/eekly)					
Full Name of Individual (Last, First, Middle In B. SANKEN, SARA, , ,	nitial) or Full C	organization Name	Date	of R	eceipt							
Mailing Address 3018 ASPEN LAKE DRIVE					09 / D D / Y Y Y Y 2017							
City BLAINE	State MN						<b>'9854724</b>	)				
FEC ID number of contributing federal political committee.	С	Occupation (for Individual) Human Capital Partner Mgr			Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc					Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R D	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In C. WIX, LACOSTA, , ,	nitial) or Full C	organization Name	Date	of R	eceipt							
Mailing Address 910 MANILA ST			09		30		2017 <sup>°</sup>	Y				
City NASHVILLE	State TN	Zip Code 37206-3437					80004724 is Period	0				
FEC ID number of contributing federal political committee.	С		Ē		,	,	125.0	00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs		Memo Item								
Receipt For: Primary General Other (specify)					P/R Deduction (\$62.50 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)					, .		585.3	30				
TOTAL This Period (last page this line numbe	r only)											

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			Use separate schedule(s) for each category of the	(che	(check only one)								
111	ILIVILLED RECEIPIS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<u> </u>			
An	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma	Ay not be sold or used by any p	erson	13 for the	purp	14 Dose of	15 soliciting	g contribut	17 ions			
	NAME OF COMMITTEE (In Full)	name and a			nicit cor		utions	rom suc	n commu	ee.			
$\rangle$	UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC												
Α.	Full Name of Individual (Last, First, Middle Init LEVINE, CAROL, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 9100 LARKSPUR LANE					09 30 2017							
	City EDEN PRAIRIE	State MN	Zip Code 55347-2004						80334724 nis Period	)			
	FEC ID number of contributing federal political committee.		C						714.2	28			
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Gen Mgmt				emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	] P	/R Dedu	uctio	on (\$35	7.14 Bi-V	Veekly)					
в.	Full Name of Individual (Last, First, Middle Init HJERPE, ADAM, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 13932 UTAH AVE S				09 / D D / Y Y Y Y 09 / 30 / 2017								
	City	State MN	Zip Code	_					80624724	)			
	SAVAGE FEC ID number of contributing federal political committee.	C			Amount	of	Each H	leceipt th	nis Period 384.6	60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	_	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Chief of Staff Aggregate Year-to-Date ▼ 3653.70				uctic	on (\$192	2.30 Bi-V	Veekly)				
С.	Full Name of Individual (Last, First, Middle Init LUKENBILL, JAMES, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 1608 SIENNA DR				09 30 2017								
	City CEDAR PARK	State TX	Zip Code 78613-4061						80814724 his Period	0			
	FEC ID number of contributing federal political committee.	С					y .		34.	76			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Proj Mgmt		Me	ema	ltem						
Receipt For:     Aggreen and and and and and and and and and an		Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•					1133.6	64			
	OTAL This Period (last page this line number			• •			,	,					

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ITEMIZED RECEIPTS				or each category of the Detailed Summary Page	×	11a 13		] 11b		11c	12 16	17	
				ot be sold or used by any pe ess of any political committee		or the		pose		oliciting	contribu	tions	
NAME OF COMMITTEE		PAC (L	Jni	tedHealth Group PA	C)								
Full Name of Individual A. RUSSELL, LAURIE,	(Last, First, Middle Initial	) or Full Oi	rgan	ization Name	1	Date o	of Re	eceip	ot				
Mailing Address 3108 S	ONIA DRIVE					<sup>M</sup> 09	/	D	30	/ Y	ү ү 2017	Y	
City		State		Trans	sacti	ion l	ID : P	R25758	81214724	0			
LAS VEGAS		NV		89107-3246	_ /	Amount of Each Receipt this Period							
FEC ID number of contr federal political committe	U U	С						-		-	78.	00	
Name of Employer (for United HealthCare Servio	,		•	ion (for Individual) s Dir		M	lemo	b Iter	m				
Receipt For:		Aggregate	Yea	r-to-Date ▼									
Primary       Other (specify) ▼	General		-	741.00	P	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual B. SHAPIRO, DAVID	Last, First, Middle Initial	) or Full O	rgan	ization Name		Date o	of Re	eceip	ot				
Mailing Address 5215 MORGAN AVENUE SOUTH						09 / D D / Y Y Y Y 2017							
City MINNEAPOLIS		State MN		Zip Code 55419-1026	Transaction ID : PR2575814247240 Amount of Each Receipt this Period								
FEC ID number of contr federal political committe	U U	C Occupation (for Individual) VP Gen Mgmt						-		-1	1111.	10	
Name of Employer (for United HealthCare Servio						Μ	lemo	b Iter	m				
Receipt For: Primary Other (specify) ▼	General	Aggregate Year-to-Date ▼ 1111.10					P/R Deduction (\$555.55 Bi-Weekly)						
Full Name of Individual	(Last, First, Middle Initial	) or Full Oi	rgan	ization Name		Date o	of Re	eceip	ot				
Mailing Address 1828 V	VYNDAM DRIVE					<sup>M</sup> 09	/	D	30	/ Y	2017	Y	
City SHAKOPEE		State MN		Zip Code							31454724		
				55379-5437	- /	Amoun	nt of	Eac	h Re	ceipt th	is Period		
FEC ID number of contr federal political committe	U U	С						9	_	9	384.	60	
Name of Employer (for Individual) Optum Services, Inc			upati Ops	ion (for Individual)	Mem				m				
Receipt For: Primary Other (specify)	Ceipt For: Primary General Aggregate Year-to-Date ▼				P	/R Dec	ducti	on (S	\$192.	30 Bi-W	/eekly)		
SUBTOTAL of Receipts T	his Page (optional)										1573.	70	
TOTAL This Period (last p	bage this line number on	ly)						-		-			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>✗</b> 11a ☐ 11b ☐ 11c ☐ 12				
	01-1-		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	ed PAC (	UnitedHealth Group PA	NC)				
Full Name of Individual (Last, First, Middle Ir A. SEXTON, ELLEN, , ,	of Individual (Last, First, Middle Initial) or Full Organization Name I, ELLEN, , ,						
Mailing Address 14750 CRESTWOOD COUR			09 / D D / Y Y Y Y Y 09 30 2017				
City ELM GROVE	State WI	Zip Code 53122-1603	Transaction ID : PR2575823247240				
	VVI	55122-1005	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		504.80				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item				
Receipt For:	Aggregate	Year-to-Date <b>V</b>					
Primary General Other (specify) ▼		3076.85	P/R Deduction (\$252.40 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir B. MCNATT, RICHARD, , ,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 1120 KENSINGTON COURT		09 / D D / Y Y Y Y Y 2017					
City ALPHARETTA	State GA	Zip Code 30022-6274	Transaction ID : PR2575824947240           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) SIs Ops	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir c. BRADLEY, JOEL, , ,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 300 WHITE MOSS PLACE			09 30 2017				
City FRANKLIN	State TN	Zip Code 37064-8628	Transaction ID : PR2575825847240				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 36.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /led Dir	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.74	P/R Deduction (\$18.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			618.64				
TOTAL This Period (last page this line number		, , , , , , , , , , , , , , , , , , ,					

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	Use separate schedule(s)	(check only one)							
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using			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 KAUFMAN, PHILIP, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1680 NORTH FARM ROAL	2		Model       Model <td< td=""></td<>						
City ORONO	State MN	Zip Code 55356-9309							
FEC ID number of contributing federal political committee.	C		421.24						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3525.58	P/R Deduction (\$210.62 Bi-Weekly)						
Full Name of Individual (Last, First, Middle HUNTLEY, MICHELLE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 19503 HARMONY AVE			09 30 / Y Y Y Y Y 2017						
City ROGERS	State MN	Zip Code 55374-4843	Transaction ID : PR2575832047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		207.36						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Other (specify) ▼		, 2537.46	P/R Deduction (\$103.68 Bi-Weekly)						
Full Name of Individual (Last, First, Middle HARPER, JENNIFER, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8206 WEST 16TH STREE	1		09 / D D / Y Y Y Y Y 2017						
City SAINT LOUIS PARK	State MN	Zip Code 55426-1904	Transaction ID : PR2575835547240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) .ssc Gen Counsel	Memo Item						
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       266.76			P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			656.68						
TOTAL This Period (last page this line numb	er only)								

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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 th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle Ir A. JERDE, MARY, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 304 EAST VERA LANE			M M / D D / Y Y Y Y 09 30 2017					
City TEMPE	State AZ	Zip Code 85284-4036	Transaction ID : PR2575837447240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		95.22					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir B. MANDELL, WILLIAM, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 720 MISSION HILL WAY			M M / D D / Y Y Y Y 09 30 2017					
City COLORADO SPRINGS	State CO	Zip Code 80921-2672	Transaction ID : PR2575837847240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir C. WILLIAMS, DONNA LEE, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5526 55TH AVENUE			09 / D D / Y Y Y Y Y 09 / 30 / 2017					
City VERO BEACH	State FL	Zip Code 32967-2460	Transaction ID : PR2575838347240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		34.76					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Prov Install	Memo Item					
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       243.32			P/R Deduction (\$17.38 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			158.06					
TOTAL This Period (last page this line number	r only)							

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	Use separate schedule(s)	(che	(check only one)											
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
			ay not be sold or used by any p ddress of any political committe			ourp								
	MMITTEE (In Full)					unbu		on suci	Commu	ee.				
		ted PAC (l	JnitedHealth Group P	AC)										
	ndividual (Last, First, Middle I IARY JANE, , ,	nitial) or Full O	rganization Name		Date of	Rec	ceipt							
Mailing Addres	S 204 BLUE INDIGO CT						09 30 2017							
City PONTE VEDRA BEACH		State FL	Zip Code 32082-6543		Transaction ID : PR2575839547240 Amount of Each Receipt this Period									
Optum Services, Inc V							7		192.:	30				
			upation (for Individual) Gen Mgmt		Me	emo	Item							
			Year-to-Date ▼ 1826.85	P	/R Dedu	uctio	n (\$96.1	I5 Bi-We	ekly)					
	ndividual (Last, First, Middle I N, CHARLES, , ,	nitial) or Full O	rganization Name		Date of	Rec	eipt							
Mailing Address 10603 MILLET SEED HILL					м м 09	/	D D 30	/ Y	2017	Y				
City		State MD	Zip Code 21044-4150						4034724	)				
	u of operativity stings	C Occupation (for Individual) Med Dir			Amount of Each Receipt this Period									
federal political	er of contributing I committee.													
United HealthC	oyer (for Individual) are Services Inc				Memo Item									
Receipt For: Primary Other (sp	General becify) ▼	Aggregate	Aggregate Year-to-Date ▼ 266.76				P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of I	ndividual (Last, First, Middle I S, DALE, , ,	nitial) or Full O	rganization Name		Date of	Rec	ceipt							
	<sup>S</sup> 121 CHOCTAW CIRCLE				<sup>M</sup> 09	/	D D 30		2017 <sup>°</sup>					
City CHANHASSE	N	State MN	Zip Code 55317-9505						34924724 is Period	0				
FEC ID number federal political	er of contributing I committee.	С			28.08									
Optum Service	oyer (for Individual) s, Inc		Occupation (for Individual) Dir Proj Mgmt				ltem							
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       Other			266.76	]   P	P/R Dedu	uctio	n (\$14.0	04 Bi-We	ekly)					
SUBTOTAL of R	Receipts This Page (optional)						7		248.4	16				
TOTAL This Per	iod (last page this line numbe	er only)												

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         1 <sup>1</sup>						
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 BOROCH, BLAIR, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 800 BELFRY DRIVE			09 30 2017						
City	State	Zip Code	Transaction ID : PR2575849947240						
BLUE BELL	PA	19422-1210	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		36.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	ot For: Aggregate Year-to-Date ▼ Primary General								
Full Name of Individual (Last, First, Middle I B. GOLDEN, WILLIAM, , ,	l nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 106 SOUND COURT			09 30 2017						
City	State NY	Zip Code	Transaction ID : PR2575859347240						
NORTHPORT		11768-3527	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary     General       Other (specify) ▼		4326.85	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. COTTINGTON, NYLE BRENT, ,		rganization Name	Date of Receipt						
Mailing Address 6630 EMPIRE COURT			09 / D D / Y Y Y Y 09 30 2017						
City MAPLE GROVE	State MN	Zip Code 55311-3433	Transaction ID : PR2575865347240						
FEC ID number of contributing		000110400	Amount of Each Receipt this Period						
federal political committee.	С		76.92						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
United HealthCare Services Inc Receipt For:		Acctng Year-to-Date ▼	_						
Primary General Other (specify)		730.74	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			306.14						
TOTAL This Period (last page this line numbe	r only)								

## 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	<b>X</b> 11a 11b 11c 12							
		Detailed Summary Page	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	rated PAC (I	JnitedHealth Group PA	\C)							
Full Name of Individual (Last, First, Middl A. PEZHMAN, PAYMAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3016 GROVELAND SCH	OOL ROAD		09 30 2017							
City	State MN	Zip Code	Transaction ID : PR2575883547240							
WAYZATA		55391-2816	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Bus	Segment Gen Counsel								
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General Other (specify) ▼		1826.85	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. LANGAN, PATRICK, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 405 MEADOW LANE	09 / D D / Y Y Y Y 2017									
City BENSON	State MN	Zip Code 56215-1033	Transaction ID : PR2575885047240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		P/R Deduction (\$97.00 Bi-Weekly)							
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) IT								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1843.00								
Full Name of Individual (Last, First, Middl c. PLOURDE, ROBERT, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3551 GUNSTON LANE			09 30 2017							
City	State	Zip Code	Transaction ID : PR2575885247240							
WOODBURY	MN	55129-4918	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) T	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	l)		414.38							
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	X         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle <b>A.</b> RANDALL, RHONDA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 48 INTERLAKEN ROAD			09 30 2017							
City ORLANDO	State FL	Zip Code 32804-3418	Transaction ID : PR2575889647240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		36.06							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date  244.49	P/R Deduction (\$18.03 Bi-Weekly)							
Full Name of Individual (Last, First, Middle <b>B. JENSEN PFIEFFER, KIM</b> , , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9449 ASPEN RD	1		09 / D D / Y Y Y Y 2017							
City LAKEVILLE	State MN	Zip Code 55044-8148	Transaction ID : PR2575929747240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		95.22							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)							
Full Name of Individual (Last, First, Middle MCGOLDRICK, CHRISTOPHER		rganization Name	Date of Receipt							
Mailing Address 48 MOUNTAIN TERRACE			M M / D D / Y Y Y Y 09 30 2017							
City WEST HARTFORD	State CT	Zip Code 06107-1533	Transaction ID : PR2575930447240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs & Bus Dev	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			159.36							
TOTAL This Period (last page this line number	er only)									

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			Use separate schedule(s) for each category of the	(check only one)							
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         □							
Ar	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma	ay not be sold or used by any p	erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)										
$\rangle$	UnitedHealth Group Incorporate	AC)									
Α.	Full Name of Individual (Last, First, Middle Ini MEDEIROS, MICHAEL, , ,	me of Individual (Last, First, Middle Initial) or Full Organization Name EIROS, MICHAEL, , ,									
	Mailing Address 7112 LANGMUIR DRIVE			09 30 / Y Y Y Y Y 2017							
	City MCKINNEY	State TX	Zip Code 75071-4606	Transaction ID : PR2575930647240 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) Clnt Mgmt NA Accts	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Ini ZITZER, CHRISTOPHER, , ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 2848 FRANCE AVE S			09 30 / Y Y Y Y 2017							
	City ST LOUIS PARK	State MN	Zip Code 55416-4204	Transaction ID : PR2575933347240 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		88.56							
	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 ▼ 690.12	P/R Deduction (\$44.28 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Ini MATTERA, RICHARD, , ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 483 HIGHCROFT ROAD	State	Zip Code	09 / 2017 Transaction ID : PR2575938447240							
	WAYZATA	MN	55391-1548	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		384.60							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify)		Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			551.16							
т	OTAL This Period (last page this line number	only)									

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		for each category of the Detailed Summary Page		11a 13		11b	11c	12				
			l ay not be sold or used by any pe Iddress of any political committee	erson for	r the p		ose of s					
NAME OF COMMIT		ed PAC (l	JnitedHealth Group PA	C)								
Full Name of Individ A. STANDIG, LAUR	ual (Last, First, Middle Ir EN, , ,	nitial) or Full O	organization Name	Da	Date of Receipt							
Mailing Address 866	60 FARLEY WAY				M         M         /         D         D         /         Y							
City		State CA	Zip Code									
FAIR OAKS			95628-5352	Amount of Each Receipt this Period								
FEC ID number of c federal political comr	U U	С					,	-	30.	00		
Name of Employer ( United HealthCare Se	,		upation (for Individual) d Dir	1 [	Me	emo	Item					
Receipt For:		Aggregate	Year-to-Date ▼									
Primary Other (specify)	General ) ▼		270.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individe B. RILEY, FELICIT	ual (Last, First, Middle Ir ГҮ, , ,	Da	ate of	Ree	ceipt							
Mailing Address 231		09 / 09 / 2017										
City		State	Zip Code	Transaction ID : PR2575943347240								
SAINT PAUL		MN	55104-5003	Ar	Amount of Each Receipt this Period							
FEC ID number of c federal political comr	U U	С										
Name of Employer ( United HealthCare Se			upation (for Individual) Tax	Memo Item								
Receipt For: Primary Other (specify)	General ▼	Aggregate	Year-to-Date ▼ 208.38	P/R Deduction (\$11.00 Bi-Weekly)								
Full Name of Individu	ual (Last, First, Middle Ir DY, , ,	nitial) or Full O	organization Name	Da	ate of	Ree	ceipt					
	BETZ CREEK ROAD				09 <sup>M</sup>	/	30	/ Y	y y 2017	Y		
City		State	Zip Code		Transa	acti	on ID : I	PR25759	95354724	0		
SAVANNAH		GA	31410-2602	Ar	mount	of I	Each Re	eceipt th	is Period			
FEC ID number of c federal political comr	U U	С		28.08						08		
Name of Employer ( United HealthCare S			upation (for Individual) Ntwk Prgms	70	Memo Item							
Receipt For: Primary Other (specify)	y General Aggregate Year-to-Date ▼				R Dedu	uctic	on (\$14.0	)4 Bi-We	eekly)			
SUBTOTAL of Receipt	ts This Page (optional)			. [					80.0	08		
TOTAL This Period (la	ast page this line number	r only)	·····	Ē			,					

#### 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					
			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 Incorp	orated PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Mic A. KISCH, DAVID, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7715 GIBRALTER TER	RACE		09 30 2017					
City SAPPLE VALLEY		Zip Code 55124-6124	Transaction ID : PR2575966047240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Mic PIACENTINI, KAREN, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 132 E 35TH ST APT 13		Zin Oode	09 / D D / Y Y Y Y 2017					
City NEW YORK	State NY	Zip Code 10016-3892	Transaction ID : PR2575968547240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		909.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1818.16	P/R Deduction (\$454.54 Bi-Weekly)					
Full Name of Individual (Last, First, Mic DICELLO, MARK, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5360 ANACALA CT	Otata	Zin Oode	09 / D D / Y Y Y Y 30 2017					
City WESTERVILLE	State OH	Zip Code 43082-8352	Transaction ID : PR2575977947240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.00					
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	VPI	upation (for Individual) Ntwk Contrctng	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optio	nal)		967.08					
TOTAL This Period (last page this line no	umber only)							

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)	ted PAC (I	InitedHealth Group P								
		Shileu lealth Gloup F	AC)							
Full Name of Individual (Last, First, Middle I A. NEUHAUS, NIPA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 422 COLVER ROAD			09 30 2017							
City	State	Zip Code	Transaction ID : PR2575979347240							
NAZARETH	PA	18064-8301	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.76							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Mgr	,								
Receipt For:	<b>_</b>	Year-to-Date ▼								
Primary General	Aggregate		P/R Deduction (\$17.38 Bi-Weekly)							
Other (specify) ▼		243.32								
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name								
B. CHURCHILL, CAROL ANN, , ,			Date of Receipt							
Mailing Address 230 BATTALION WAY			09 / 0 / Y Y Y Y 2017							
City	State	Zip Code	Transaction ID : PR2575988347240							
MOUNT JULIET	TN	37122-6135	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		0.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	-							
Primary General	, iggi oguto		P/R Deduction (\$0.00 Bi-Weekly)							
Other (specify) ▼		224.00								
Full Name of Individual (Last, First, Middle I C. GOLD, PAMELA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8370 DYNASTY WAY			M M / D D / Y Y Y Y							
			09 30 2017							
City SALT LAKE CITY	State UT	Zip Code 84121-6089	Transaction ID : PR2575988647240							
	01	04121-0009	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	SB I	KA VP SIs Acct Mgt								
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
Other (specify)		200.00	J							
SUBTOTAL of Receipts This Page (optional)			62.76							
TOTAL This Period (last page this line number	er only)									

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TEMIZED RECEIPTS		for each category of the	<b>≭</b> 11a ☐ 11b ☐ 11c ☐ 12						
		Detailed Summary Page	13 14 15 16 17						
or for commercial purposes, other than usir			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (	JnitedHealth Group PA	(C)						
Full Name of Individual (Last, First, Mide SCHULTZ, STACY, , ,	me of Individual (Last, First, Middle Initial) or Full Organization Name JLTZ, STACY, , ,								
Mailing Address 4012 S XERXES AVEN	-		09 30 2017						
City MINNEAPOLIS	State MN	Zip Code 55410-1146	Transaction ID : PR2575990947240						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 76.92						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Optum Services, Inc	Dep	outy Gen Counsel Mgr							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Mido B. SCHMITZ, BRADLEY, , ,	Date of Receipt								
Mailing Address 506 CHALUPSKY AVE			09 30 2017						
City NEW PRAGUE	State MN	Zip Code 56071-6819	Transaction ID : PR2576005847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		49.52						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.64	P/R Deduction (\$24.76 Bi-Weekly)						
Full Name of Individual (Last, First, Mido C. SQUARRELL SHABLIN, KAR	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name								
Mailing Address 1377 ROWLAND ROAD	)		09 30 / Y Y Y Y 09 30 2017						
City LANGHORNE	State PA	Zip Code	Transaction ID : PR2576017347240						
		19047-3106	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)	•	154.52						
TOTAL This Period (last page this line nu	mber only)	•••••							

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incol	porated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, M A. SANN, DAVID, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SANN, DAVID, , ,											
Mailing Address 8326 ELKO DRIVE												
City	State MD	Zip Code	Transaction ID : PR2576026447240									
ELLICOTT CITY		21043-6913	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		92.30									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item									
Receipt For:		Year-to-Date ▼	-									
Primary General Other (specify) ▼		776.88	P/R Deduction (\$46.15 Bi-Weekly)									
Full Name of Individual (Last, First, N B. SONERHOLM, KIMBERLY,	Date of Receipt											
Mailing Address 7210 HEGGIE AVE	Mailing Address 7210 HEGGIE AVE											
City	State	Zip Code	Transaction ID : PR2576033247240									
LAS VEGAS	NV	89131-3233	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		28.00									
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) KA VP SIs Acct Mgt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, M C. HOLZER SPARR, CYNTH		rganization Name	Date of Receipt									
Mailing Address 30 BRIDGHAM FAR	M ROAD		09 30 / Y Y Y Y 2017									
City	State	Zip Code	Transaction ID : PR2576034847240									
RUMFORD	RI	02916-1304	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 1ed Dir	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (op	tional)		148.38									
TOTAL This Period (last page this line	number only)											

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle In ADAMS, GAYLE, , ,	itial) or Full C	rganization Name	Date of Receipt							
Mailing Address 39 CANYON RIDGE DRIVE			09 30 2017							
City SANDIA PARK	State NM	Zip Code 87047-8509	Transaction ID : PR2576040347240							
FEC ID number of contributing			Amount of Each Receipt this Period							
federal political committee.	C		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Strategic Acct Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify) ▼		1826.85	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In B. BYRNES, CHRISTOPHER, , ,	itial) or Full C	rganization Name	Date of Receipt							
Mailing Address 705 IRVING PLACE			09 30 2017							
City	State	Zip Code	Transaction ID : PR2576042847240							
DULUTH	MN	55812-1419	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$96.15 Bi-Weekly)							
Other (specify) ▼		1826.85								
Full Name of Individual (Last, First, Middle In C. KANDALAFT, KEVIN, , ,	itial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4189 WINDSOR POINT PLA	CE		09 30 2017							
City	State	Zip Code	Transaction ID : PR2576043647240							
EL DORADO HILLS	CA	95762-3797	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For:		Plan CEO								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			461.52							
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	<b>X</b> 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 Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Midd A. STONE, LAURA, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name									
Mailing Address 4644 VENETO DRIVE			Date of Receipt							
			09 30 2017							
City FRISCO	State TX	Zip Code 75033-7135	Transaction ID : PR2576045147240							
		73033-7133	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.00							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
United HealthCare Services Inc	Ntw	k Contract Dir								
Receipt For:	Aggregate	Year-to-Date ▼	P/D Doduction (\$14.00 Bi Wooldw)							
Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi-Weekly)							
			-							
Full Name of Individual (Last, First, Midd B. <u>GROENENDAAL</u> , MICHAEL, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GROENENDAAL, MICHAEL, , ,									
Mailing Address 1017 N EUCLID			09 30 2017							
City	State	Zip Code	Transaction ID : PR2576046247240							
OAK PARK	IL	60302-1321	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Executive Compensation	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Other (specify) ▼		, 266.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. VINCENT, BRYAN, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4221 WEBSTER AVENU	JE S		09 30 2017							
City	State	Zip Code	Transaction ID : PR2576049147240							
SAINT LOUIS PARK	MN	55416-3143	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	al)		84.08							
TOTAL This Period (last page this line nur										

FOR LINE NUMBER:

PAGE 186 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b 11c	12						
Any information copied from such Reports an or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)	the name and a	doress of any political committee	to solicit contri	Sutions from suc		e.					
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	C)								
Full Name of Individual (Last, First, Middle <b>A.</b> MONICAL, KENT, , ,	Initial) or Full O	rganization Name	Date of Re	eceipt							
Mailing Address 9795 E PIEDRA DRIVE			M M / D D / Y Y Y Y 09 30 2017								
City SCOTTSDALE	State AZ	Zip Code 85255-9231		tion ID : PR2576 f Each Receipt t		)					
FEC ID number of contributing federal political committee.	С				76.9	2					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. REX, JOHN, , ,	Initial) or Full O	rganization Name	Date of R	eceipt							
Mailing Address 503 HARRINGTON ROAD	1		09         30         2017           Transaction ID : PR2576060047240           Amount of Each Receipt this Period								
City WAYZATA	State MN	Zip Code 55391-1512									
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G CFO	Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MCEWAN, JOSHUA, , ,	Initial) or Full O	rganization Name	Date of Re	eceipt							
Mailing Address 4711 WEST 28TH STREE			09								
City SAINT LOUIS PARK	State MN	Zip Code 55416-1927		tion ID : PR2576 Each Receipt t		)					
FEC ID number of contributing federal political committee.	С			176.92							
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP T	upation (for Individual) Fax	Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1380.74	P/R Deduct	tion (\$88.46 Bi-W	/eekly)						
SUBTOTAL of Receipts This Page (optional)				, , ,	638.4	4					
TOTAL This Period (last page this line numb	per only)										

FOR LINE NUMBER:

PAGE 187 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle DUDA, MICHAEL, , ,	Initial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 5208 RICHWOOD DRIVE			09 30 2017								
City EDINA	State MN	Zip Code 55436-2322	Transaction ID : PR2576089947240 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	Occ Dir I	upation (for Individual) M A	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. HARBISON, CECILIA, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 233 MAGNOLIA STREET			09 / D D / Y Y Y Y 09 30 2017								
City DRESHER	State PA	Zip Code 19025-2012	Transaction ID : PR2576100147240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		34.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle DAHL, KEVIN, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 4242 N CAPISTRANO DR APT 135 City	State	Zip Code	09 / 30 / 2017								
DALLAS	TX	75287-4036	Transaction ID : PR2576100247240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.68	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			255.14								
TOTAL This Period (last page this line number	er only)										

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle SCHELKIN, MIKHAIL, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SCHELKIN, MIKHAIL, , ,									
Mailing Address 555 CANAL ST APT 1602			09 30 / Y Y Y Y Y 2017							
City MANCHESTER	State NH	Zip Code 03101-1523	Transaction ID : PR2576103147240							
		00101-1020	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) tware Engineer Cnslt	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)							
			1							
Full Name of Individual (Last, First, Middle B. JOHNSON, DARRIN, , ,	Date of Receipt									
Mailing Address 11 BERTON COURT			09 30 / Y Y Y Y Y 09 30 2017							
City	State	Zip Code	Transaction ID : PR2576103747240							
MIDDLETOWN	DE	19709-9932	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		457.86							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	-							
Primary General Other (specify) ▼		3397.32	P/R Deduction (\$228.93 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. DIAMOND, TIFFANY, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 5 HARVEY DRIVE			09 30 2017							
City	State NH	Zip Code	Transaction ID : PR2576105547240							
GOFFSTOWN		03045-2315	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		95.22							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
Optum Services, Inc Receipt For:		Gen Mgmt	_							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)							
			<u> </u>							
SUBTOTAL of Receipts This Page (optional)			581.16							
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	<b>×</b> 11a 11b 11c 12								
			13     14     15     16     17       berson for the purpose of soliciting contributions       te to solicit contributions from such committee.								
	ig the hame and a										
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mide A. CASEY, TAMMY, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 45 STEELE ROAD			09 30 2017								
City NEW HARTFORD	State CT	Zip Code 06057-2621	Transaction ID : PR2576107347240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Midc B. KIEWEL, NATHAN, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1137 PRAIRIE VIEW DR			09 / 09 / 2017 Transaction ID : PR2576117547240 Amount of Each Descipt this Derived								
City HUTCHINSON	State MN	Zip Code									
FEC ID number of contributing		55350-6725	Amount of Each Receipt this Period								
federal political committee.	C		28.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Apps Dev	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Mido C. KENT, CHRIS, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 13273 CARLINGFORD	1		09 / D D / Y Y Y Y 2017								
City ROSEMOUNT	State MN	Zip Code 55068-6308	Transaction ID : PR2576119047240 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 ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		133.00								
TOTAL This Period (last page this line nur	mber only)										

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12					
			, , ,	13 14 15 16 17					
or for commercial purp	poses, other than using the			rson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMIT	,	ed PAC (l	JnitedHealth Group PA	C)					
Full Name of Indivi A. SANCHEZ, VINC	dual (Last, First, Middle Ini CENT, , ,	itial) or Full O	organization Name	Date of Receipt					
Mailing Address 50	25 BRANFORD COURT	09 30 2017							
City		State CA	Zip Code	Transaction ID : PR2576126947240					
DUBLIN			94568-7241	Amount of Each Receipt this Period					
FEC ID number of federal political con	0	С		34.76					
Name of Employer United HealthCare S	· · · · · ·		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:			Year-to-Date ▼						
Primary Other (specify	General /) ▼		243.32	P/R Deduction (\$17.38 Bi-Weekly)					
Full Name of Indivi B. KERAN, PATR	dual (Last, First, Middle Ini RICK, , ,	Date of Receipt							
Mailing Address 66	31 108TH CT								
City BROOKLYN PARK		State MN	Zip Code 55445-6503	Transaction ID : PR2576137847240 Amount of Each Receipt this Period					
FEC ID number of federal political con	0	С		28.08					
Name of Employer Optum Services, Inc		Occ Dir	upation (for Individual) IT	Memo Item					
Receipt For: Primary Other (specify	General /) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Indivi c. BOADO, AND	dual (Last, First, Middle Ini DREA, , ,	Date of Receipt							
Mailing Address 14	924 PONDVIEW CIRCLE	09 30 2017							
City WAYZATA		State MN	Zip Code 55391-2249	Transaction ID : PR2576144647240           Amount of Each Receipt this Period					
FEC ID number of federal political con	0	С		454.54					
Name of Employer United HealthCare S			upation (for Individual) Deputy Gen Counsel	Memo Item					
Receipt For: Primary Other (specify	General /)	Aggregate	Year-to-Date ▼ 3181.78	P/R Deduction (\$227.27 Bi-Weekly)					
SUBTOTAL of Recei	pts This Page (optional)		····· •	517.38					
TOTAL This Period (	last page this line number	only)	•						

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a		11b		11c	12						
	y information copied from such Reports and Stat																
or	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated					ICIT COI	ntrio	oution	s tro	m sucr		ee.					
/ A.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name NELSON, STEVEN, , ,							Date of Receipt									
	Mailing Address 640 LOCUST HILLS DRIVE					м м 09	/		р 30	/ Y	y y 2017	Y					
	City WAYZATA	State MN		Zip Code 55391-1973	A						<b>14484724</b> is Period	0					
	FEC ID number of contributing federal political committee.	С						-		-1	384.	60					
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) IC CEO		M	emo	lterr	ı								
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)														
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FRIDNER, JOHN, , ,							eceipt									
	Mailing Address 782 PENFIELD DR	State Zip Code						09 / D D / Y Y Y Y 09 30 2017									
	City CAROL STREAM	State IL	Transaction ID : PR2576147547240 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		•	tion (for Individual) VP SIs/Gen		Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 741.00	P/R Deduction (\$39.00 Bi-Weekly)												
<b>.</b>	Full Name of Individual (Last, First, Middle Initial	) or Full O	)rga	nization Name		Date of Receipt											
	Mailing Address 8018 PERLETTE COURT	1 -		1													
	City KERNERSVILLE	State NC		Zip Code 27284-9957	A						15104724 is Period	0					
	FEC ID number of contributing federal political committee.	С						y		y	500.	00					
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) n CEO		M	emo	) Item	ו								
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3250.00					P/R Deduction (\$250.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)				. [			9		,	962.	60					
т	OTAL This Period (last page this line number on	ly)		•						-							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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			Use separate schedule(s)	(che	(check only one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<b>—</b>		
	y information copied from such Reports and Sta for commercial purposes, other than using the n					purp						
<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 MYHRAN, LYNN, , ,	l) or Full Or	rganization Name	[	Date of Receipt							
	Mailing Address 2280 FOX STREET											
City State ORONO MN			Zip Code 55356-9652	4				PR25761 eceipt th		-		
	FEC ID number of contributing federal political committee.	С			_		,		416	6.66		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Im Exec		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3541.61	P/R Deduction (\$208.33 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia BENSON, JEAN, , ,	l) or Full Or	rganization Name	[	Date of	Rec	ceipt					
	Mailing Address 14951 HIGHLAND COURT NE				09 / D D / Y Y Y Y 2017							
	City PRIOR LAKE	State MN	Zip Code 55372-4109					PR25763				
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60								
	Name of Employer (for Individual)	Осси	ΗÌ	Memo Item								
	Optum Services, Inc	VP F	Fin									
	Receipt For:	Aggregate	Year-to-Date ▼			. eti e .	~ (\$100	20 0: 14				
	Other (specify) V		P/R Deduction (\$192.30 Bi-Weekly)									
c.	Full Name of Individual (Last, First, Middle Initia KENIRY, DANIEL, , ,	l) or Full Or	rganization Name	[	Date of	Rec	ceipt					
	Mailing Address 5553 LITTLE FALLS ROAD				<sup>M</sup> 09	/	D D D 30	/ Y	2017	Y		
	City ARLINGTON	State VA	Zip Code 22207-1525					PR25773				
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 384.60							
United HealthCare Services Inc VI			upation (for Individual) Govt Affs		Memo Item							
			Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)								1185	5.86		
т	OTAL This Period (last page this line number or	ıly)					_	-				

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## 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
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	(C)
Α.	Full Name of Individual (Last, First, Middle Initia COMBS MORGAN, LAURIE, , ,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 2720 WINDCREST TRAIL			09 / D D / Y Y Y Y 2017
	City ANTIOCH	State TN	Zip Code 37013-1473	Transaction ID : PR2578719847240 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 Ntwk Contrctng	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
В.	Full Name of Individual (Last, First, Middle Initia TIDMARSH, BRIAN, , ,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 14425 NORTH 15TH STREET			09 30 2017
	City PHOENIX	State AZ	Zip Code 85022-4454	Transaction ID : PR2578724247240 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		29.14
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) E 2 NA Accts	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 263.12	P/R Deduction (\$14.57 Bi-Weekly)
C.	Full Name of Individual (Last, First, Middle Initia LONG, PAUL, , ,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 12352 PRINCETON AVE			09 / D D / Y Y Y Y 2017
	City EDEN PRAIRIE	State MN	Zip Code 55347-1936	Transaction ID : PR2578734947240           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.08
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	134.14
т	OTAL This Period (last page this line number o	nly)	••••••	

FOR LINE NUMBER:

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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 (I	UnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle I STRODE, KURT, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 15 MIRA SEGURA			09 30 2017					
City RANCHO SANTA MARGARITA	State CA	Zip Code 92688-4113	Transaction ID : PR2578819247240					
		32000 4113	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.84					
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 ▼ 273.98	P/R Deduction (\$14.42 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I ASNER, BARTLEY, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 25 OFFSHORE			09 30 / Y Y Y Y Y 2017					
City	State CA	Zip Code	Transaction ID : PR2578819447240					
NEWPORT BEACH	CA	92657-2162	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		469.50					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O Med Grp Physn	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Primary General Other (specify) ▼		, 3356.70	P/R Deduction (\$234.75 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I c. HALTIWANGER, RACHEL, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 1668 KIRKWOOD PLACE			09 30 / Y Y Y Y Y 2017					
City BRENTWOOD	State TN	Zip Code 37027-8678	Transaction ID : PR2578820247240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		29.58					
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 ▼ 261.43	P/R Deduction (\$14.79 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			527.92					
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	✗         11a         11b         11c         12           13         14         15         16         17							
or for commercial purposes, other than using			person for the purpose of soliciting contributions be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle DUFFEY, KRISTY, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8906 WINGED FOOT DRI	VE		M M / D D / Y Y Y Y 09 30 2017							
City PASADENA	State MD	Zip Code 21122-6670	Transaction ID : PR2578823247240           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) ef Clin Off	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. CIAVOLA, LAURA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1686 WILDFIRE LANE										
City FRISCO	State TX	Zip Code 75033-7325	Transaction ID : PR2578824347240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle BUSBEE, NATHANAEL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 611 ORPINGTON RD	04-4-	7.0.4	09 / D D / Y Y Y Y 2017							
City BALTIMORE	State MD	Zip Code 21229-2128	Transaction ID : PR2578826747240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	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) \_\_ \_ \_ \_ \_ \_ \_ \_

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			Use separate schedule(s) for each category of the	(check only one)					
			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
Any or fo	information copied from such Reports and Sta r commercial purposes, other than using the n	tements ma ame and a	l ay not be sold or used by any po ddress of any political committee	erson for the purpose of soliciting contributions					
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	AC)					
	ull Name of Individual (Last, First, Middle Initia COHEN, JAY, , ,	l) or Full O	rganization Name	Date of Receipt					
_	ailing Address 98 VISTA DEL SOL			09 30 2017					
	ty AGUNA BEACH	State CA	Zip Code 92651-6748	Transaction ID : PR2578829647240 Amount of Each Receipt this Period					
	EC ID number of contributing deral political committee.	С		192.30					
0	ame of Employer (for Individual) ptum Services, Inc		upation (for Individual) D Med Grp Physn	Memo Item					
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)					
	III Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Receipt					
М	ailing Address 1929 ALBIZIA COURT			09 / 0 0 / Y Y Y Y 09 30 / 2017					
	ty ATON ROUGE	State LA	Zip Code 70808-3973	Transaction ID : PR2595208347240           Amount of Each Receipt this Period					
	EC ID number of contributing deral political committee.	С		126.92					
	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1055.74	P/R Deduction (\$63.46 Bi-Weekly)					
	II Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Receipt					
	ailing Address 3186 WEST CANYON AVE	-		09 / 0 / Y Y Y Y Y 09 30 / 2017					
Ci	ty AN DIEGO	State CA	Zip Code 92123-5426	Transaction ID : PR2595225847240 Amount of Each Receipt this Period					
	EC ID number of contributing deral political committee.	С		76.92					
U	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)					
SUE	STOTAL of Receipts This Page (optional)			396.14					
тот	AL 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 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 (	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle DUCAYET, JULIA, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5508 HARRIET AVE S			09 30 / Y Y Y Y Y 09 30 2017					
City MINNEAPOLIS	State MN	Zip Code 55419-1830	Transaction ID : PR2595232947240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. SCOTT, WESTON, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 1050 LAKE CAROLYN PK APT 4349 City	WY	Zip Code	09 / D D / Y Y Y Y 2017					
IRVING	TX	75039-3999	Transaction ID : PR2601125347240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		61.54					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 584.63	P/R Deduction (\$30.77 Bi-Weekly)					
Full Name of Individual (Last, First, Middle	Initial) or Full (							
c. SHORT, MARIANNE, , ,	initial) of 1 un C	nganization Name	Date of Receipt					
Mailing Address 2215 SUMMIT AVENUE			09 30 / Y Y Y Y Y 2017					
City SAINT PAUL	State MN	Zip Code 55105-1002	Transaction ID : PR2601133547240 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 Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			474.22					
TOTAL This Period (last page this line numb	per only)							

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13     14     15     16     1       person for the purpose of soliciting contributions       e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. PATRICK, ALLEN, , ,	e Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 225 W ESCALONES			09 30 2017						
City SAN CLEMENTE	State CA	Zip Code 92672-5102	Transaction ID : PR2601136847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. SWANSON, AMY, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 621 SPARROW WAY			09 / 0 / Y Y Y Y 2017						
City WADSWORTH	State OH	Zip Code 44281-7716	Transaction ID : PR2601140747240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCBRIEN, ROBERT, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 4 APPLETREE LANE			09 / D D / Y Y Y Y 09 30 2017						
City CARLE PLACE	State NY	Zip Code 11514-1321	Transaction ID : PR2601148947240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	)		248.46						
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	<b>≭</b> 11a 11b 11c 12						
Any information copied from such Reports	and Statements ma	ay not be sold or used by any r	13     14     15     16     17       person for the purpose of soliciting contributions						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mide A. MOORE, DOUGLAS, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3900 BLACKJACK OAk	LANE		09 30 2017						
City PLANO	State TX	Zip Code 75074-7790	Transaction ID : PR2601149647240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Hlthcare Econ	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Mide LESTER, SHAUNA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1747 228TH PL SE			09 / D D / Y Y Y Y Y 2017						
City SAMMAMISH	State WA	Zip Code 98075-7250	Transaction ID : PR2601154747240						
FEC ID number of contributing federal political committee.	C	30013-1230	Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify) ▼		c Dir Gen Mgmt Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Mide C. PERERA, SUSAN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1201 UNITY AVE N			09 / D D / Y Y Y Y Y 2017						
City GOLDEN VALLEY	State MN	Zip Code 55422-4735	Transaction ID : PR2601168847240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ssc Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	nal)		84.24						
TOTAL This Period (last page this line nu	mber only)								

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(check only one)

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a 13		111	- <u>-</u>	11c 15	12	17	
	y information copied from such Reports and Stat for commercial purposes, other than using the na					or the		pos	e of s	oliciting	contribu	tions	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Un	itedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial KAPROW, MARC, , , Mailing Address 5079 SW 89TH AVE	) or Full O	Orga	nization Name	C	Date of Receipt							
	City	State	_ [	09 Trans	) /	L	30	P2601	2017				
	COOPER CITY	FL		Zip Code 33328-3636	A	Transaction ID : PR2601179047240 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С						-			38.	46	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi	•	tion (for Individual) r		M	emo	o Ite	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 692.28	P/	R Ded	uctio	on (	(\$0.00	Bi-Wee	ekly)		
в.	Full Name of Individual (Last, First, Middle Initial HUDSON, JEFFREY, , , Mailing Address 1536 BREWSTER DRIVE	) or Full O	Orga	nization Name		Date of	f Re		pt	1	- Y - Y	Y	
									30	7 1	2017	1	
	City CARROLLTON	State TX				-			<b>70304724</b> is Period	-			
	FEC ID number of contributing federal political committee.	C						-		-ge.	28.	00	
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir SIs Ops					emo	o Ite	em				
	Respiret For:			ar-to-Date ▼ 266.00	P/1	R Ded	uctic	on (	\$14.0	0 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial, MCBEATH, ROBERT, , ,	) or Full O	Orga	nization Name		Date of	Re	eceip	pt				
	Mailing Address 2537 RED ARROW DRIVE	1				<sup>M</sup> 09	1		30	/ Y	2017	Y	
	City LAS VEGAS	State NV		Zip Code 89135-1628							70894724 is Period		
	FEC ID number of contributing federal political committee.	С	ļ			inoun		J		,	476.	_	
	Name of Employer (for Individual) Southwest Medical Assoc. Inc.		•	tion (for Individual) ed Grp Physn		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3333.26				'R Ded	uctio	on (	(\$238.	09 Bi-V	/eekly)		
s	UBTOTAL of Receipts This Page (optional)			•	[			9		9	542.	64	
Т	OTAL This Period (last page this line number onl	y)		•	Ī			-					

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporation	ted PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle II A. RICKS, RHONDA, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5084 JERICHO ROAD			09 30 / Y Y Y Y Y 2017					
City COLUMBIA	State MD	Zip Code 21044-5409	Transaction ID : PR2605733447240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.76					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.22	P/R Deduction (\$15.38 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In DAVIS, KELLY, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 905 N LEBANON ST			09 30 / Y Y Y Y Y 2017					
City ARLINGTON	State VA	Zip Code 22205-1433	Transaction ID : PR2605734247240 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) ⁄t Affs Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In C. FINLAY, CHRISTOPHER, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3221 COLFAX AVE S	01-1-	7: 0-1	09 / D D / Y Y Y Y Y 30 2017					
City MINNEAPOLIS	State MN	Zip Code 55408-3555	Transaction ID : PR2605735147240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		30.40					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 258.40	P/R Deduction (\$15.20 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			138.08					
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	<b>X</b> 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	prated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Mide A. MALONE, TRACY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 900 S 22ND ST			09 30 Y Y Y Y Y 09 30 2017					
City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736947240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mide B. JAEGER, MICHELLE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 14506 MCGINTY ROAD		1	09 / D D / Y Y Y Y Y 2017					
City WAYZATA	State MN	Zip Code 55391-2541	Transaction ID : PR2605753947240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.40					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 258.40	P/R Deduction (\$15.20 Bi-Weekly)					
Full Name of Individual (Last, First, Mide C. SMITH, LARRY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1164 RUE CHINON			09 / D D / Y Y Y Y 09 30 2017					
City MANDEVILLE	State LA	Zip Code 70471-1213	Transaction ID : PR2605760647240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.46					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Compli	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.37	P/R Deduction (\$19.23 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		453.46					
TOTAL This Period (last page this line nu	mber 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 ee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	ated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle								
A. WEISSEL, MICHAEL, , ,			Date of Receipt					
Mailing Address 99 HAGEN ROAD			09 30 2017					
City NEWTON	State MA	Zip Code 02459-2731	Transaction ID : PR2606842947240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. SONSTEGARD, NATHAN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 4216 ZENITH AVE S			09 30 / Y Y Y Y 2017					
City MINNEAPOLIS	State MN	Zip Code 55410-1413	Transaction ID : PR2606844447240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) UHC International Services Inc	Occ VP	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle MATECZUN, JOHN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 1908 HARBOURSIDE DRI UNIT 403	1	7.0.1	M M / D D / Y Y Y Y 09 / 30 2017					
City LONGBOAT KEY	State FL	Zip Code 34228-4207	Transaction ID : PR2606845147240 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 M&V	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			797.28					
TOTAL This Period (last page this line numb	er only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗     11a     11b     11c     12       13     14     15     16     17			
Any information copied from such Reports and or for commercial purposes, other than using t			rson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	C)			
Full Name of Individual (Last, First, Middle I A. RAWLINSON, DORIEN, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 4795 W RED ROCK DRIVE	1		09 30 / Y Y Y Y 2017			
City LARKSPUR	State CO	Zip Code 80118-8413	Transaction ID : PR2606854647240           Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.08			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Ntwk Contrctng	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)			
Full Name of Individual (Last, First, Middle I B. EYER, JAN, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 6241 CRESTBROOK DRIVE	E		09 30 / Y Y Y Y 2017			
City MORRISON	State CO	Zip Code 80465-2225	Transaction ID : PR2606857547240 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		28.08			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ec Dir	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)			
Full Name of Individual (Last, First, Middle I C. KENNEDY, SHELLEY L, , ,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 706 SUE BARNETT			09 / 09 / Y Y Y Y 09 30 / 2017			
City HOUSTON	State TX	Zip Code 77018-5412	Transaction ID : PR2607803047240           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) Service Acct Mgmt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 950.00	P/R Deduction (\$50.00 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			156.16			
TOTAL This Period (last page this line number	er only)	·····				

FOR LINE NUMBER:

PAGE 205 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(cł	(check only one)						
11	CIVILLED REVEIPIO		for each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12	,	
	y information copied from such Reports and S										
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and a	adress of any political committee	e to s	SOUCIT COL	מוזזר	utions t	rom sucr	i committ	ee.	
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Ini MARGRITZ, CYNTHIA, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 16702 L STREET				09 30 / Y Y Y Y 2017						
	City OMAHA	State NE	Zip Code 68135-1324					PR26078 leceipt th	30614724 is Period	D	
	FEC ID number of contributing federal political committee.							28.0	08		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty		M	emc	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	]	P/R Ded	uctio	on (\$14.	.04 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Ini FICKER, MARK, , ,	tial) or Full O	organization Name		Date of	Re	ceipt				
	Mailing Address 173 LAURELWOOD DRIVE			09 / 30 / 2017 Transaction ID : PR2607806747240							
	City	State CA	Zip Code 94949-8427							)	
	NOVATO			Amount	of	Each R	leceipt th	is Period			
	FEC ID number of contributing federal political committee.	С		Ľ.	_	-		83.3	32		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops		M	emc	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.56	]	P/R Deduction (\$41.66 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Ini CEGLIA, VINCENT, , ,	tial) or Full O	organization Name		Date of	Re	ceipt				
	Mailing Address 47 CONTRY ACRES DRIVE				м м 09	1	D 30		2017	Y	
	City HAMPTON	State NJ	Zip Code 08827-4112						05204724 is Period	0	
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .		28.0	)8	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli		M	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	1	P/R Ded	ucti	on (\$14	.04 Bi-W€	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	,	139.4	18	
т	OTAL This Period (last page this line number	only)		•							

FOR LINE NUMBER:

PAGE 206 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         □	17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements ma	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contribution						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	.C)						
A.	Full Name of Individual (Last, First, Middle Initia SCHWARTZ, SHAWN, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 338 SNELLING AVE S			09 30 / Y Y Y Y 2017						
	City SAINT PAUL	State MN	Zip Code 55105-2048	Transaction ID : PR2608059347240           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		28.08						
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Asso	upation (for Individual) c Dir Ntwk Prgms	Memo Item						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia LANDO, LISA, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 60 PINEAPPLE STREET APT 3J	01-1-	7	09 / D D / Y Y Y Y Y 2017						
	City BROOKLYN	State NY	Zip Code 11201-6839	Transaction ID : PR2608059547240 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 ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia FLYNN, VIRGINIA, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 30 VAN TERRACE			09 / D D / Y Y Y Y 2017						
	City SPARKILL	State NY	Zip Code 10976-1406	Transaction ID : PR2608061247240           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.92						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			181.92						
т	OTAL This Period (last page this line number or	nly)	•••••							

## Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 207 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	UnitedHealth Group PA	NC)				
Full Name of Individual (Last, First, Middle FERGUSON, SANDRA, , ,		organization Name	Date of Receipt				
Mailing Address 710 SOUTH SHERATON D		Zin Onda	09 / 09 / 2017				
City AKRON	State OH	Zip Code 44319-1918	Transaction ID : PR2608061947240 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) c Dir Med Clin Ops	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle CARROLL, SARAH, , ,	Date of Receipt						
Mailing Address 18411 BEAVERWOOD RD			09 / Y Y Y Y 2017				
City MINNETONKA	State MN	Zip Code 55345-3100	Transaction ID : PR2608064147240 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.40				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , , , , 243.20	P/R Deduction (\$15.20 Bi-Weekly)				
Full Name of Individual (Last, First, Middle HECK, ALLYN, , ,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 3233 BARHITE STREET	1-		09 / D D / Y Y Y Y 2017				
City PASADENA	State CA	Zip Code 91107-1254	Transaction ID : PR2609810947240 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) c Dir Underwriting	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).	_, 		135.40				
TOTAL This Period (last page this line number	er only)	•••••	· · · · · · · · · · · · · · ·				

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

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma	I ay not be sold or used by any p uddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
> UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	4C)					
Full Name of Individual (Last, First, Middle A. BODELL, LESLIE, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 18710 34TH AVENUE NOR	TH		09 30 2017					
City PLYMOUTH	State MN	Zip Code 55447-1000	Transaction ID : PR2609811347240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		714.28					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.98	P/R Deduction (\$357.14 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. WRIGHT, NORMAN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 5205 KELSEY TERRACE			09 30 / Y Y Y Y Y 2017					
City EDINA	State MN	Zip Code 55436-1172	Transaction ID : PR2609812347240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	EC ID number of contributing							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Ops	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle FAULKNER, RYAN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 230 W AVENIDA ALESSAN			09 / D D / Y Y Y Y 2017					
City SAN CLEMENTE	State CA	Zip Code 92672-4333	Transaction ID : PR2609813147240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital Partner	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			1126.96					
TOTAL This Period (last page this line number	er only)							

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

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 209 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1					
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle I STRAUSS, DAVID, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 5000 FRANCE AVENUE S UNIT 33			09 30 / Y Y Y Y Y 2017					
City MINNEAPOLIS	State MN	Zip Code 55410-2061	Transaction ID : PR2612521847240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		454.54					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Total Rewards	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3409.05	P/R Deduction (\$227.27 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I SMITH, MELANIE, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 15340 HIGHLAND PLACE			09 / D D / Y Y Y Y Y 2017					
City MINNETONKA	State MN	Zip Code 55345-4613	Transaction ID : PR2612527647240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		95.22					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Recruit Ops	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		666.54	P/R Deduction (\$47.61 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I BAKER, MICHAEL, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2383 HIGHOVER TRAIL	State	Zip Code	09 / 09 / 2017					
CHANHASSEN	MN	55317-4744	Transaction ID : PR2612530547240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			934.36					
TOTAL This Period (last page this line numbe	r only)							

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PAGE 210 OF

ITEMIZED RECEIPTS				for each category of the Detailed Summary Page	×	11:	a		11I 14		11c	12	17
	y information copied from such Reports and State for commercial purposes, other than using the na					for th			oos	e of :	soliciting	g contrib	utions
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Un	itedHealth Group PA	.C)								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A.</b> RIVERS, CAROLINE, , ,							Date of Receipt						
	Mailing Address 6368 TIMBER TRACE					M 0		/		30	/ Y	y y 2017	Y
	City	State Zip Code					insa	acti	on	ID : I	PR2612	5337472	240
	BROWNSBURG	IN		46112-8641	_ 4	Amo	unt	of	Ead	ch Re	eceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С							,			29	9.66
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Ntwk Contract Dir					Me	mo	lte	em			
	Receipt For:	Aggregate Year-to-Date ▼											
	Primary General Other (specify) ▼		-	261.23	P	P/R Deduction (\$14.83 Bi-Weekly)							
<u></u>	Full Name of Individual (Last, First, Middle Initial)	) or Full C	Drga	nization Name		Date	of	Re	cei	pt			
	Mailing Address 34 WEST 17TH STREET #3					09 30 / Y Y Y Y 2017							
	City NEW YORK	StateZip CodeNY10011-5709										5346472 nis Perio	
	FEC ID number of contributing federal political committee.	C							,			384	4.60
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) n Mgmt		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3653.70					P/R Deduction (\$192.30 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initial HANSEN, KIMBERLY, , ,	) or Full C	Drga	nization Name		Date	of	Re	ceij	pt			
	Mailing Address 6227 UPLAND LN N					<sup>™</sup> 0		/		30	/ Y	2017	Y
	City MAPLE GROVE	State MN		Zip Code 55311-4003								3832472	
	FEC ID number of contributing federal political committee.	C	ï			Amo	unt	of	Ead	ch Re	eceipt th	nis Perio 34	d 4.76
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Prov Data					Me	mo	lte	əm			
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 243.32	     P	9/R C	edu	ictic	on (	(\$17.:	38 Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)											449	9.02
т	OTAL This Period (last page this line number onl	y)		·····									

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
	EIVILLED REVEIFIJ		for each category of the Detailed Summary Page				11b	11c	12	□ <i>.</i> –	
	y information copied from such Reports and S										
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and a	doress of any political committee	e to s	SOLICIT COL	ntric	outions i	rom sucr	Committe	ee.	
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Ini DEIDESHEIMER, THERESA, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 6319 21 ST AVE NE				09 30 / Y Y Y Y 2017						
	City SEATTLE	State WA	Zip Code 98115-6915	_				PR26133 Receipt th	38344724 is Period	)	
	FEC ID number of contributing federal political committee.	С		<u> </u>				34.7	76		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		M	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	1	P/R Ded	ucti	on (\$17	.38 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Ini DICKINSON, DAVID, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 57 ATKINSON LANE				м м 09	/	D 10 30	) / Y	2017	Y	
	City SUDBURY	State MA	Zip Code 01776-1938					PR26133 Receipt th	88947240 is Period	)	
	FEC ID number of contributing federal political committee.	C				142.84					
	Name of Employer (for Individual) Optum Services, Inc	upation (for Individual) Mktg Bus Dev		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 999.88				P/R Deduction (\$71.42 Bi-Weekly)					
C.	Full Name of Individual (Last, First, Middle Ini TAYLOR, SCOTT, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 7927 RHODE ISLAND CIRCL		1		м м 09	1	D 30		2017 <sup>°</sup>		
	City BLOOMINGTON	State MN	Zip Code 55438-1194				-	PR26133 Receipt th	39234724 is Period	0	
	FEC ID number of contributing federal political committee.	С			Ľ.		y	, <u>,</u>	38.4	16	
	Name of Employer (for Individual) Optum Services, Inc	Occi VP F	upation (for Individual) Fin		M	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	1	P/R Deduction (\$19.23 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•		l	,	. ,	216.0	6	
T T	OTAL This Period (last page this line number	only)	•	-							

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17					
			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 (	UnitedHealth Group PA	4C)					
Full Name of Individual (Last, First, Middle KREJCI, ANDREW, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 19880 LAKEVIEW AVENU	IE		09 30 2017					
City EXCELSIOR	State MN	Zip Code 55331-9352	Transaction ID : PR2614310747240					
	_	33331 3332	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		28.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual /Last First Middle	Initial) or Full (	Veranization Name	-					
Full Name of Individual (Last, First, Middle <b>LIBERATO</b> , <b>CHRISTINE</b> , , ,		rganization Name	Date of Receipt					
Mailing Address 2334 EAST CAROL AVEN			09 30 Y Y Y Y 2017					
City PHOENIX	State AZ	Zip Code 85028-4613	Transaction ID : PR2614313847240					
· · · · · · · · · · · · · · · · · · ·	C	83028-4013	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	30.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item					
Receipt For:		Year-to-Date ▼	-					
Primary     General       Other (specify) ▼		, 285.00	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. VAIL, ABIGAIL, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 3636 DEXTER DRIVE			09 30 2017					
City	State	Zip Code	Transaction ID : PR2614315647240					
TALLAHASSEE	FL	32312-1022	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		126.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item					
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1055.74	P/R Deduction (\$63.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			185.00					
TOTAL This Period (last page this line numb	per only)	······						

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ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	(check only one)					
			for each category of the Detailed Summary Page				11b	11c	12	
	y information copied from such Reports and S									
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	uuress or any pointcal committee	: 10 SC	JUCIT COL	and	uuons t	IUIII SUCI		<del>.</del>
$\rangle$	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	NC)						
Α.	Full Name of Individual (Last, First, Middle Init THOMPSON, JOHN, , ,	ial) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 1697 COUNCIL BLUFF DRIVE				м м 09	1	30	/ Y	2017	Y
	City ATLANTA	State GA	Zip Code 30345-4137	_					32234724 is Period	0
	FEC ID number of contributing federal political committee.	С			<u> </u>				43.4	46
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Dir SIs		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 347.68	F	P/R Ded	uctio	on (\$21.	73 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Init BURKHOLDER, CHAD, , ,	ial) or Full O	organization Name		Date of	Re	ceipt			
	Mailing Address 2423 DUBONNET DRIVE			09 / 0 0 / Y Y Y Y 09 / 30 2017						
	City	State PA	Zip Code						7344724	)
	MACUNGIE FEC ID number of contributing federal political committee.	C				: of	Each R	eceipt th	is Period 648.:	34
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2730.71	     F	P/R Dedu	uctio	on (\$324	4.17 Bi-W	'eekly)	
с.	Full Name of Individual (Last, First, Middle Init	ial) or Full O	organization Name		Date of	Re	ceipt			
	Mailing Address 6216 CONCORD AVE	1			09	1	30		2017	Y
	City EDINA	State MN	Zip Code 55424-1736						08604724 is Period	0
	FEC ID number of contributing federal political committee.	С			Ē		y .	y	28.0	)8
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Prod			Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	F	P/R Ded	ucti	on (\$14.	.04 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)		•				, .	,	719.8	38
т	OTAL This Period (last page this line number of	only)	••••••	-			<u> </u>	- <b>T</b>		

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPT	3	for each category of the Detailed Summary Page	<b>X</b> 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 (I		, see en any periode commune							
		UnitedHealth Group P/	AC)						
Full Name of Individual (La SOLOMON, RANDALI	ast, First, Middle Initial) or Full C -, , ,	Organization Name	Date of Receipt						
Mailing Address 760 HAIG	HT STREET		M M / D D / Y Y Y Y 09 30 2017						
City SAN FRANCISCO	State CA	Zip Code 94117-3317	Transaction ID : PR2615671547240 Amount of Each Receipt this Period						
FEC ID number of contribution federal political committee.	uting C		76.92						
Name of Employer (for Inc Optum Services, Inc	,	upation (for Individual) Behvrl Med Dir	Memo Item						
Receipt For: Primary Ge Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (La B. BIRNBAUM, MICHA	ast, First, Middle Initial) or Full C EL, , ,	Organization Name	Date of Receipt						
Mailing Address 55 DEAN			09 30 2017						
City	State	Zip Code	Transaction ID : PR2615671647240						
BROOKLYN FEC ID number of contribu	dia a	11201-6245	Amount of Each Receipt this Period						
federal political committee.			428.56						
Name of Employer (for Inc United HealthCare Services	Ino	upation (for Individual) Hlthcare Econ	Memo Item						
Receipt For: Primary Ge Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 3499.92	P/R Deduction (\$214.28 Bi-Weekly)						
Full Name of Individual (La C. NIEMYER, ELIZAB	ast, First, Middle Initial) or Full C ETH, , ,	Organization Name	Date of Receipt						
Mailing Address 9237 ENG		Zin Oada	09 / D D / Y Y Y Y 30 2017						
City LAYTONSVILLE	State MD	Zip Code 20882-1348	Transaction ID : PR2615682847240 Amount of Each Receipt this Period						
FEC ID number of contribution federal political committee.	uting C		184.62						
Name of Employer (for Inc United HealthCare Services		upation (for Individual) Ops	Memo Item						
Receipt For: Primary Ge Other (specify)	neral Aggregate	Year-to-Date ▼ 2853.78	P/R Deduction (\$92.31 Bi-Weekly)						
SUBTOTAL of Receipts This	Page (optional)		690.10						
TOTAL This Period (last page	e this line number 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	I Statements mathematic terms and a	I ay not be sold or used by any paddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. KNUTSON, DIANE, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 4320 POLARIS LANE NOR	TH		M M / D D / Y Y Y Y 09 30 2017					
City PLYMOUTH	State MN	Zip Code 55446-2658	Transaction ID : PR2615923947240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00					
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 ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle <b>B.</b> YOUNG, JENNIFER, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 321 CLINTON PLACE			09 / D D / Y Y Y Y Y 2017					
City HACKENSACK	State NJ	Zip Code 07601-2802	Transaction ID : PR2615929447240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual) Optum Services, Inc								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle KIRBY, WESLEY, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 3213 SAGE BRUSH TRL			09 / 0 / Y Y Y Y Y 2017					
City PLANO	State TX	Zip Code 75023-5631	Transaction ID : PR2615957047240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Cnslt Bus Adv/Tech	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			156.16					
TOTAL This Period (last page this line number	er only)							

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using 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 LONGORIA, PATRICIA, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 906 BLUEBIRD			09 30 2017					
City MANCHACA	State TX	Zip Code 78652-4154	Transaction ID : PR2617361147240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Mktg	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I MIRVISS, ALAN H, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 73 DOWNEY			M         M         /         D         D         /         Y					
City SAN FRANCISCO	State CA	Zip Code 94117-4015	Transaction ID : PR2617361747240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů – Elektrik							
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Proj Mgr II	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I C. PASSINEAU, MEGHAN, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4 BUROAK DRIVE			09 / D D / Y Y Y Y 2017					
City HOPEWELL JUNCTION	State NY	Zip Code 12533-6434	Transaction ID : PR2617363647240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			84.24					
TOTAL This Period (last page this line numbe	er only)							

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	-	Use separate schedule(s)	(check o	nly or	ne)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12		
Any information copied from such Reports an									
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit c	ontrik	outions f	rom such	n committe	ee.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle <b>A.</b> TRAW, KEVIN, , ,	Initial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 518 13TH ST			M 09		D D D 30	/ Y	ү ү 2017	Y	
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038					36564724 is Period	0	
FEC ID number of contributing federal political committee.	C					-	76.9	92	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Process		Memo	o Item				
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 730.74	P/R De	∍ducti	ion (\$38.	46 Bi-We	eekly)			
Full Name of Individual (Last, First, Middle CHERRY, MARK, , ,	Initial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 612 BEMIS HEIGHTS PL			M 09		30	/ Y	2017	Y	
City SAINT CHARLES	State MO	Zip Code 63303-1752			-		22847240 is Period	)	
FEC ID number of contributing federal political committee.	C						28.0	08	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Data/Res Anlyst Cnslt		Memo	o Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R De	ducti	on (\$14.	04 Bi-We	ekly)		
Full Name of Individual (Last, First, Middle C. MILLER, JUMELIE, , ,	Initial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 29415 PEWTER RUN LAN			M OS	)	30		2017		
City KATY	State TX	Zip Code 77494-1279					<b>32524724</b> is Period	0	
FEC ID number of contributing federal political committee.	С				,	,	28.0	)8	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Case Mgmt		Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R De	educti	ion (\$14.	.04 Bi-We	ekly)		
SUBTOTAL of Receipts This Page (optional)					, .		133.0	)8	
TOTAL This Period (last page this line numb	per only)								

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ITEMIZED RECEIPTS	tor each category of the Detailed Summary Page								
		Detailed Summary Faye	X         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and St. or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (I	JnitedHealth Group PA	SC)						
Full Name of Individual (Last, First, Middle Initi BAUBLIT, MICHAEL, , ,	al) or Full C	organization Name	Date of Receipt						
Mailing Address 2201 RIDGEWIND WAY			09 / D D / Y Y Y Y 2017						
City WINDERMERE	State FL	Zip Code 34786-5823	Transaction ID : PR2617927147240						
	1.2	J4700-J023	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initi B. PUTTERMAN, JAY, , ,	al) or Full C	rganization Name	Date of Receipt						
Mailing Address 7 SUNNY REACH DRIVE			09 30 / Y Y Y Y 2017						
City WEST HARTFORD	State CT	Zip Code 06117-1531	Transaction ID : PR2617931347240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initi C. JOHNSON, MARK, , ,	al) or Full C	Prganization Name	Date of Receipt						
Mailing Address 8687 RILEY CURVE			09 30 2017						
City	State	Zip Code	Transaction ID : PR2617933947240						
CHANHASSEN	MN	55317-4822	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		92.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 876.85	P/R Deduction (\$46.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			148.46						
TOTAL This Period (last page this line number o		F							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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ITEINIZED RECEIPTS		Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
		Detailed Summary Faye	13 14 15 16 1							
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements main the name and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpor	ated PAC (	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle MISKELL-CLOUTIER, DOMINIQUE,		organization Name	Date of Receipt							
Mailing Address 12101 STRETFORD FOR			09 / D D / Y Y Y Y 2017							
City	State VA	Zip Code	Transaction ID : PR2618984947240							
BRISTOW	VA	20136-2078	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		34.76							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Preservice Review	Memo Item							
Receipt For:										
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. BROWN, ROGER, , ,	e Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 512 EAST STATE AVE			09 30 2017							
City	State	Zip Code	Transaction ID : PR2622557947240							
PHOENIX	AZ	85020-4940	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		658.24							
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 ▼ 2696.08	P/R Deduction (\$329.12 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. GARELLI, JOLENE, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 9 PROSPECT VIEW DRIV	VE.		09 30 2017							
City	State	Zip Code	Transaction ID : PR2622559247240							
DUMMERSTON	VT	05301-8875	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Proj Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	,		721.08							

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a 11b 11c 12							
			13     14     15     16     17       erson for the purpose of soliciting contributions							
	the name and a	ddress of any political committee	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. CAMPBELL, THERESA, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1117 XERXES AVENUE	SOUTH		09 30 / Y Y Y Y Y							
City MINNEAPOLIS	State MN	Zip Code 55405-2128	Transaction ID : PR2622562147240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Human Capital Partner	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle <b>TROCINSKI, CAROL</b> , , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1030 ROBIN COURT			09 / D D / Y Y Y Y Y 09 30 2017							
City WEST SALEM	State WI	Zip Code 54669-1919	Transaction ID : PR2623691047240							
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) Regl Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 205.29	P/R Deduction (\$22.81 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. MILLER, JOHN, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3107 ECTOR			09 / D D / Y Y Y Y 2017							
City HOUSTON	State TX	Zip Code 77056-4037	Transaction ID : PR2623704747240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
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 ▼ 365.37	P/R Deduction (\$19.23 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	)		112.16							
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	<b>X</b> 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	NC)									
Full Name of Individual (Last, First, Middle In <b>A.</b> MULES, REBECCA, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 660 DOVER STREET			09 30 2017									
City BALTIMORE	State MD	Zip Code 21230-2228	Transaction ID : PR2624442647240           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		126.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1055.74	P/R Deduction (\$63.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In B. SINGH, KANWAR, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5321 TOWN BROOKE			09 30 2017									
City MIDDLETOWN	State CT	Zip Code 06457-6615	Transaction ID : PR2624445947240 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		30.40									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgr	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 258.40	P/R Deduction (\$15.20 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In COLLETTE, CHRISTOPHER, , ,	itial) or Full O	rganization Name	Date of Receipt									
Mailing Address 786 CAMBERWELL DRIVE			09 / D D / Y Y Y Y Y 2017									
City EAGAN	State MN	Zip Code 55123-3939	Transaction ID : PR2625499547240           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		440.56									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ' UnitedHIth Grp	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3458.04	P/R Deduction (\$220.28 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			597.88									
TOTAL This Period (last page this line number	only)											

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12			
Any information copied from such Reports and										
or for commercial purposes, other than using t	he name and a	ddress of any political committee	e to solicit co	ontrib	outions f	rom such	committe	96.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle RELLER, TAMI, , ,	Initial) or Full C	organization Name	Date of	of Re	eceipt					
Mailing Address 5120 MIRROR LAKES DRI	VE		M 09	VI /	D D D	/ Y	y y 2017	Y		
City EDINA	State MN	Zip Code 55436-1342					<b>50194724</b> is Period	D		
FEC ID number of contributing federal political committee.	С					-	384.6	60		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		/lemc	tem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R De	ductio	on (\$192	2.30 Bi-W	′eekly)			
Full Name of Individual (Last, First, Middle B. SMITH, LISA, , ,	Initial) or Full C	organization Name	Date o	of Re	eceipt					
Mailing Address 5040 INTERLACHEN BLUF	F		09	/	30	/ Y	2017	Ŷ		
City EDINA	State MN	Zip Code 55436-1360			-		03747240 is Period	)		
FEC ID number of contributing federal political committee.	С						86.9	96		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		/lemc	tem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 695.68	P/R Dec	ductio	on (\$43.	48 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle C. LAWTON, MICHAEL, , ,	Initial) or Full C	organization Name	Date o	of Re	eceipt					
Mailing Address 1720 CROSS PINES DR			09	/	30	/ Y	2017	Y		
City FLEMING ISLAND	State FL	Zip Code 32003-4915					50544724 is Period	0		
FEC ID number of contributing federal political committee.	С				,		30.4	10		
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 ▼ 258.40	P/R De	ducti	on (\$15.	.20 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional).					,	9	501.9	96		
TOTAL This Period (last page this line number	er only)				-	-				

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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		Detailed Summary Page	×	11a	$\square$	11			11c	12							
	y information copied from such Reports and State for commercial purposes, other than using the na								se of s	soli							
<u> </u>	NAME OF COMMITTEE (In Full)				10 301			and		011		Sommitt					
$\rangle$	UnitedHealth Group Incorporated	PAC (l	Uni	itedHealth Group PA	C)												
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HOMER, WILLIAM, , ,								Date of Receipt									
Mailing Address 3120 LAKE CENTER DR							09 30 2017 Transaction ID : PR2625507747240										
	CityStateZip CodeSANTA ANACA92704-6917											<b>0774724</b> s Period	0				
	FEC ID number of contributing federal political committee.	С				_		,				30.4	40				
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) roj Mgmt		Me	emo	o Ite	em								
	Receipt For:       /         Primary       General         Other (specify) ▼	Aggregate	P/	R Dedi	uctic	on	(\$15.2	20	Bi-We	ekly)							
B.	Full Name of Individual (Last, First, Middle Initial) COWEN, WESLEY, , ,		rga	nization Name		Date of	Re	ecei	ipt								
	Mailing Address 825 VIRGINIA PARK CIRCLE NE				09 / D / Y Y Y Y 2017												
	City ATLANTA	StateZip CodeGA30306-4081						Transaction ID : PR2625532347240           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	ů l					76.92										
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Acct Mgmt		Memo Item											
	Receipt For:     Primary     General       Other (specify) ▼     730.74						uctic	on (	(\$38.4	46 E	Bi-Wee	ekly)					
C.	Full Name of Individual (Last, First, Middle Initial)	) or Full O	rgar	nization Name		Date of	Re	ecei	ipt								
	Mailing Address 402 DERBY COURT					м м 09	/	L	30	J.	Y	2017					
	City MEBANE	State NC		Zip Code 27302-9452	A			-				4604724 s Period	0				
	FEC ID number of contributing federal political committee.	С				_		y			y	28.0	08				
	Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncDir Gen Mgmt							Memo Item									
	Receipt For:     /       Primary     General       Other (specify)	Aggregate	Yea	ur-to-Date ▼ 266.76	P/	R Ded	uctio	on	(\$14.0	04	Bi-We	ekly)					
s	UBTOTAL of Receipts This Page (optional)			•	[			,		I	, ,	135.4	40				
т	OTAL This Period (last page this line number only	y)		•••••				,			- <b>y</b>						

## 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 th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle II CULHANE, DEBORAH, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 100 COVE WAY UNIT 301			09 30 / Y Y Y Y 2017							
City QUINCY	State MA	Zip Code 02169-5857	Transaction ID : PR2626356047240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		446.42							
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 ▼ 3437.45	P/R Deduction (\$223.21 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In B. TERRAL, RECCA, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 6828 SIMMONS RD			09 30 / Y Y Y Y 2017							
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-4259	Transaction ID : PR2626359647240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.76							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In CHINES, GREGORY, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 3660 SILVERWOOD RD			09 / 0 / Y Y Y Y 09 30 / 2017							
City WEST SACRAMENTO	State CA	Zip Code 95691-5403	Transaction ID : PR2626886547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		176.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1380.74	P/R Deduction (\$88.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			658.10							
TOTAL This Period (last page this line numbe	r 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	<b>X</b> 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   BONAR, BRUCE, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 1362 DOS HERMANOS GL		[	09 / D D / Y Y Y Y Y 2017						
City ESCONDIDO	State CA	Zip Code 92027-1270	Transaction ID : PR2626906847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		34.76						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) tware Engineer Cnslt	Memo Item						
Receipt For: Primary General Other (specify) ▼									
Full Name of Individual (Last, First, Middle I B. STOCKSTAD, LYNNE, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 55 GIDEONS POINT RD	Mailing Address 55 GIDEONS POINT RD								
City EXCELSIOR	State MN	Zip Code 55331-9526	Transaction ID : PR2626915547240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Chief Mktg Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. SCHENCK, ERIK, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 1 FLORENCE CT	State	Zin Code	09 / 09 / 2017						
City PALM COAST	FL	Zip Code 32137-8305	Transaction ID : PR2627730447240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		34.76						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Clin Cnslt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			97.60						
TOTAL This Period (last page this line numbe	er only)								

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIF13		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 (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. SCOTT, NICOLE, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 29039 HOBBLEBUSH			M M / D D / Y Y Y Y Y 09 30 2017						
City SAN ANTONIO	State TX	Zip Code 78260-2249	Transaction ID : PR2627731947240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. MORRIS, BARBARA, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1045 SWEET GUM WAY			09 / D D / Y Y Y Y Y 2017						
City MEBANE	State NC	Zip Code 27302-6511	Transaction ID : PR2627735547240						
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) Clms	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle LINDLEY, SHEILA, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 102 NORMANDY CT			09 30 2017						
City MADISON	State MS	Zip Code 39110-6711	Transaction ID : PR2627739847240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		34.76						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Med	upation (for Individual) I Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	)		90.92						
TOTAL This Period (last page this line num	ber only)								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
116			for each category of the Detailed Summary Page		<b>4</b> 11a		11b	11c	12	<u> </u>
	information copied from such Reports and Stat or commercial purposes, other than using the na									
1	NAME OF COMMITTEE (In Full)									-
$\rangle$	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	AC)						
	Full Name of Individual (Last, First, Middle Initial SENDEN, SCOTT, , ,	) or Full Or	ganization Name		Date of	Re	eceipt			
N	Aailing Address 6285 BUTTERWORTH LANE				м м 09	1	D D D 30	) / Y	y y 2017	Y
	Dity CORCORAN	State MN	Zip Code 55340-9406					PR26277 leceipt th		
	EC ID number of contributing ederal political committee.	С							28.	08
C	Name of Employer (for Individual) Dptum Services, Inc	Occu VP I	pation (for Individual) Г		Me	emc	tem			
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 266.76	I F	P/R Dedu	uctio	on (\$14.	.04 Bi-We	eekly)	
	ull Name of Individual (Last, First, Middle Initial NAKAJIMA, KENICHI, , ,	) or Full Or	ganization Name		Date of	Re	eceipt			
_	Aailing Address 15822 BELFAST LANE				м м 09	1	30	/ Y	ү 2017	Y
	City HUNTINGTON BEACH	State CA	Zip Code 92647-3104					PR26283 leceipt th		-
F	EC ID number of contributing ederal political committee.	С				0	1		34.	_
- 1 1	Name of Employer (for Individual) Inited HealthCare Services Inc		pation (for Individual) ct Cnslt		Me	emc	tem			
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 243.32	I F	P/R Dedu	uctio	on (\$17.	38 Bi-We	ekly)	
	ull Name of Individual (Last, First, Middle Initial RANHEIM, CRAIG, , ,	) or Full Or	ganization Name		Date of	Re	eceipt			
_	Aailing Address 5228 ABBOTT AVENUE SOUTH		Za Osta		09 <sup>M</sup>	1	30		2017 <sup>°</sup>	
	City MINNEAPOLIS	State MN	Zip Code 55410-2125					PR2628: leceipt th		
	EC ID number of contributing ederal political committee.	С			<u> </u>		,	. ,	76.	92
(	lame of Employer (for Individual) Dptum Services, Inc		pation (for Individual) en Mgmt		Me	emo	tem			
F	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 730.74	]   '	P/R Ded	ucti	on (\$38	.46 Bi-We	ekly)	
su	BTOTAL of Receipts This Page (optional)			•			,		139.	76
то	TAL This Period (last page this line number on	ly)	•••••	•			<b>,</b>			

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

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle MANNING, KIM, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 12703 DEER CREEK DRIV	Έ		09 30 2017									
City OMAHA	State NE	Zip Code 68142-1762	Transaction ID : PR2628331447240           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Mktg	Memo Item									
Receipt For: Primary General Other (specify) $\forall$	P/R Deduction (\$14.04 Bi-Weekly)											
Full Name of Individual (Last, First, Middle <b>B.</b> VAN DER WALDE, LAMBERT, , ,		rganization Name	Date of Receipt									
Mailing Address 45 AUDUBON CAUSEWAY	/		09 30 / Y Y Y Y Y 2017									
City LANTANA	State FL	Zip Code 33462-4756	Transaction ID : PR2628332347240 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 HIth Reform/Modernizatn	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. BROERSE, DEBRA, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 443 FARLEY DR	1		09 / 09 / 2017									
City INDIANAPOLIS	State IN	Zip Code 46214-3572	Transaction ID : PR2628791347240           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Underwriting	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			440.76									
TOTAL This Period (last page this line number	er only)											

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 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 MALIK, SHKEELA, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4410 APPLE VALLEY LN			09 30 / Y Y Y Y 2017								
City W BLOOMFIELD	State MI	Zip Code 48323-2804	Transaction ID : PR2628798147240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		34.76								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Clin Qlty	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. ERICKSON, ALYSSA, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6430 POLARIS LANE N			09 / 30 / 2017 Transaction ID : PR2628798947240								
City	State	Zip Code									
MAPLE GROVE	MN	55311-4320	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		33.10								
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 ▼ 248.25	P/R Deduction (\$16.55 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. HANSEN, YVETTE, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HANSEN, YVETTE, , ,										
Mailing Address 10524 MUIRFIELD DRIV	1		09 / D D / Y Y Y Y 09 30 2017								
City NAPERVILLE	State IL	Zip Code 60564-8086	Transaction ID : PR2628807147240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Recruit	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		95.94								
TOTAL This Period (last page this line num	ber only)										

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(check only one)

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
			13 14 15 16 17					
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle A. SHAPIRO, VICTORIA, , ,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 3106 FABER DRIVE			09 30 / Y Y Y Y 2017					
	State VA	Zip Code	Transaction ID : PR2628826147240					
FALLS CHURCH	VA	22044-1711	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		416.02					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	-					
Primary     General       Other (specify) ▼		3543.89	P/R Deduction (\$208.01 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. THOMPSON, BRUCE, , ,	e Initial) or Full C	Prganization Name	Date of Receipt					
Mailing Address 2509 WELBORN STREE	09 30 2017							
City DALLAS	State TX	Zip Code 75219-4039	Transaction ID : PR2628833647240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	1111.10						
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 ▼ 1111.10	P/R Deduction (\$555.55 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. JARVIE, BRUCE, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name							
	Mailing Address 18750 KIPHEART DRIVE							
City	State	Zip Code	Transaction ID : PR2629554547240					
LEESBURG	VA	20176-8220	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	Occ VP I	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	l)	••••••	1604.04					
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 ar or for commercial purposes, other than using	nd Statements ma the name and a	L ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. WONG, MING, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 21066 ASHLEY LANE			09 30 2017								
City	State	Zip Code	Transaction ID : PR2629556847240								
	CA	92630-5867	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		192.30								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	VP	Gen Mgmt									
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		1826.85	P/R Deduction (\$96.15 Bi-Weekly)								
Other (specify) V		7									
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name									
B. TITA, MARYBETH, , ,			Date of Receipt								
Mailing Address 16 BEACH WOOD ROAD			09 30 2017								
City	State	Zip Code	Transaction ID : PR2632077847240								
FERNANDINA BEACH	FL	32034-6504	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		100.00								
Name of Employer (for Individual) United HealthCare Services Inc	Occ	upation (for Individual) Fin	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General	33 - 3 - 4		P/R Deduction (\$50.00 Bi-Weekly)								
Other (specify) <b>v</b>		, 650.00									
Full Name of Individual (Last, First, Middle C. OTTESON, WILLIAM, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4545 OXFORD AVE			M M / D D / Y Y Y Y 09 30 2017								
City	State	Zip Code	Transaction ID : PR2632082547240								
EDINA	MN	55436-1405	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
United HealthCare Services Inc		uty Gen Counsel Mgr									
Receipt For:	Aggregate	Year-to-Date <b>V</b>									
Primary General		730.74	P/R Deduction (\$38.46 Bi-Weekly)								
Other (specify)		730.74									
SUBTOTAL of Receipts This Page (optional	)		369.22								
TOTAL This Period (last page this line num	ber only)										

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS for			Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12	<u> </u>					
	y information copied from such Reports and S													
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit co	ntrib	outions 1	from such	n committ	ee.				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HIBBERT, LINDA, , ,					Date of Receipt								
	Mailing Address 924 BENTLEY COURT				09 30 / Y Y Y Y Y 2017									
	City CHALFONT	State PA	Zip Code 18914-3762						08534724 is Period	0				
	FEC ID number of contributing federal political committee.	С							83.3	32				
	Name of Employer (for Individual)Occupation (for Individual)Optum Services, IncVP Gen Mgmt					emo	tem							
	Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-Date V					on (\$41	.66 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Ini NAPOLITANO, DIANE, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 9 CHESTNUT COURT			м м 09	/	30	) / Y	2017	Y					
		State NJ	Zip Code 07920-3100						8774724	)				
	BASKING RIDGE	INJ	_	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri							28.0	08				
	Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) T Proj Mgmt		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	]   '	P/R Ded	uctio	on (\$14.	.04 Bi-We	ekly)						
с.	Full Name of Individual (Last, First, Middle Ini GORSUCH, KIRSTEN, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 2780 COUNTRYSIDE DRIVE WEST					/	30		үүү 2017	Y				
	ORONO	State MN	Zip Code 55356-9676						08784724 is Period	0				
	FEC ID number of contributing federal political committee.	С			Ľ.		<b>,</b>	,	430.4	40				
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Occi VP (		M	emo	o Item								
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3493.55	]	P/R Ded	lucti	on (\$21	5.20 Bi-W	/eekly)					
s	UBTOTAL of Receipts This Page (optional)			•			, ,	. ,	541.8	30				
T	OTAL This Period (last page this line number	only)	<b>b</b>	- •	Γ.									

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TEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1							
Any information copied from such 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 PA	AC)							
Full Name of Individual (Last, First, Middle TUFFIN, MICHAEL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5904 ASHBY MANOR PLA	ACE		09 30 / Y Y Y Y Y 2017							
City ALEXANDRIA	State VA	Zip Code 22310-2267	Transaction ID : PR2632087947240           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 Public Affairs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle <b>EXAMPLY, CRAIG</b> , , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6233 CRESCENT DRIVE			09 30 / Y Y Y Y Y 2017							
City	State	Zip Code	Transaction ID : PR2632088347240							
EDINA	MN	55436-2572	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		666.66							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2666.58	P/R Deduction (\$333.33 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. WALTER, JEFFREY, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1490 SETTLER ST			09 / D D / Y Y Y Y 2017							
City ELBURN	State IL	Zip Code 60119-7841	Transaction ID : PR2632088847240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) T Architecture	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1128.18							
TOTAL This Period (last page this line numb	per only)									

## Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>४</b> 11a ☐ 11b ☐ 11c ☐ 12						
		Detailed Summary Page	13 14 15 16 17						
or for commercial purposes, other than u			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	porated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, M A. DICKSON, CHARLES, , ,	liddle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 17494 POND CIRCL	Mailing Address 17494 POND CIRCLE								
	State MN	Zip Code	Transaction ID : PR2632089947240						
EDEN PRAIRIE		55346-4150	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		43.02						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Bus Process	Memo Item						
Receipt For:	Aggregate	Year-to-Date V	-						
Primary General Other (specify) ▼		214.43	P/R Deduction (\$21.51 Bi-Weekly)						
Full Name of Individual (Last, First, M B. ORRICK, VERONICA, , ,	liddle Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 10403 SANTA RITA S	09 30 2017								
City CYPRESS	State CA	Zip Code 90630-4221	Transaction ID : PR2632858547240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgm Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Receipt For:     Aggregate Year-to-Date ▼       Primary     General								
Full Name of Individual (Last, First, M C. TEMPLE, MARTHA, , ,	liddle Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 194 LITTLE LANE									
City	State	Zip Code	Transaction ID : PR2632873647240						
DURHAM	СТ	06422-1303	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		430.40						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 3493.55	P/R Deduction (\$215.20 Bi-Weekly)						
SUBTOTAL of Receipts This Page (opti	ional)	•	501.50						
TOTAL This Period (last page this line	number only)	••••••							

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
			Person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	4C)						
Full Name of Individual (Last, First, Middle WALTHOUR, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5049 COLFAX AVE S			09 30 Y Y Y Y 2017						
City MINNEAPOLIS	State MN	Zip Code 55419-1145	Transaction ID : PR2632877047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. KRUPNICK, BRUCE, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KRUPNICK, BRUCE, , ,								
Mailing Address 5616 GATE PARK RD									
City EDINA	State MN	Zip Code 55436-2208	Transaction ID : PR2632878047240						
FEC ID number of contributing			Amount of Each Receipt this Period						
federal political committee.	ů (								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgr	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		258.40	P/R Deduction (\$15.20 Bi-Weekly)						
Full Name of Individual (Last, First, Middle . PLATT, LAWRENCE, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3830 KING STREET			09 / 0 / Y Y Y Y 09 2017						
City ALEXANDRIA	State VA	Zip Code 22302-1906	Transaction ID : PR2632880747240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	I)		443.08						
TOTAL This Period (last page this line num	ber only)								

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FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)											
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13	$\square$	11b 14	11c		12 16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the p		oose of	solicitir		ntributi	ons				
	NAME OF COMMITTEE (In Full)														
$\left\langle \right\rangle$	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initial HOWARD, PATRICIA A, , ,	) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 12 STAYMAN COURT	RT					09 30 2017								
	City	State NJ	Zip Code					PR263			)				
	MANALAPAN		07726-7928	_  A	mount	of	Each F	leceipt	this F	Period					
	FEC ID number of contributing federal political committee.	С					,			384.6	0				
	Name of Employer (for Individual)Occupation (for Individual)Optum360 Services IncVP Gen Mgmt					emo	Item								
		Receipt For: Aggregate Year-to-Date ▼													
	Primary General Other (specify) ▼		3653.70	P/	K Dedu	uctic	on (\$19	2.30 Bi-	Weel	kly)					
			ge												
B.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PARR, MICHAEL, , ,					Re	ceipt								
	Mailing Address 2625 LEROY LANE City State Zip Code						D 10 30			ү 017	Y				
		State MI	Transaction ID : PR2632883547240												
	WEST BLOOMFIELD		Amount of Each Receipt this Period							_					
	FEC ID number of contributing federal political committee.					-	,			34.7	6				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Compli		Me	emo	ltem								
		Aggregate	Year-to-Date 🔻		_										
	Other (specify)	243.32					on (\$17.	38 Bi-W	/eekl	y)					
— C.	Full Name of Individual (Last, First, Middle Initial SARGENT, GLORIA, , ,	) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 3659 HEMPSTEAD					/	30			017 <sup>°</sup>	Ŷ				
	City SAINT CHARLES	State MO	Zip Code 63301					PR263			)				
					mount	of	⊢ach F	leceipt	this F	-eriod					
	FEC ID number of contributing federal political committee.	С				_	- 1	y		28.0	8				
	Name of Employer (for Individual)		pation (for Individual)		Me	emo	Item								
	United HealthCare Services Inc Receipt For:	I	/P SIs Acct Mgmt	_											
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/	R Dedu	uctio	on (\$14	.04 Bi-V	Veekl	ly)					
s	UBTOTAL of Receipts This Page (optional)				_	_				447.4	4				
				Ì	-	-	,	, ,	÷		÷				
$\mathbf{T}$	OTAL This Period (last page this line number on	ıy)	•••••••••••••••••••••••••••••••••••••••	- L			-								

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

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			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. HAYES, TREVOR, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HAYES, TREVOR, , ,								
Mailing Address 3108 SONIA DRIVE			M = M         /         D = D         /         Y = Y = Y         Y           09         30         2017						
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2634166847240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		36.50						
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item								
Receipt For: Primary General Other (specify) $\checkmark$	Primary General General								
Full Name of Individual (Last, First, Middle B. HAPGOOD, WADE, , ,	Date of Receipt								
Mailing Address 330 NW 82ND			M M / D D / Y Y Y Y 09 30 2017						
City TOPEKA	State KS	Zip Code 66617-2223	Transaction ID : PR2634167047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	s a l								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1055.74	P/R Deduction (\$63.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CASTILLO, FLORA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 202 N ROSBOROUGH AV		09 / D D / Y Y Y Y Y 30 2017							
City VENTNOR CITY	State NJ	Zip Code 08406-2022	Transaction ID : PR2634177947240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1826.85	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			355.72						
TOTAL This Period (last page this line number	er only)								

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a │ 11b │ 11c │ 12			
		, , ,	13 14 15 16 17			
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	.C)			
Full Name of Individual (Last, First, Middl A. PRIBLE, JOHN, , ,	e Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 1923 SHIVER DR			09 / D D / Y Y Y Y 2017			
City ALEXANDRIA	State VA	Zip Code 22307-1629	Transaction ID : PR2634656647240			
FEC ID number of contributing	C		Amount of Each Receipt this Period 384.60			
federal political committee.						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify) ▼		3653.70	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middl B. SCHEID, ADREAN, , ,	e Initial) or Full C	Date of Receipt				
	Mailing Address 2915 CATHEDRAL AVENUE NW					
City WASHINGTON	State DC	Zip Code 20008-3406	Transaction ID : PR2634880447240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middl C. LARAMEE, CHRISTINE, , ,	e Initial) or Full C	Date of Receipt				
Mailing Address 2902 S ESPERANZA AV	Mailing Address 2902 S ESPERANZA AVENUE					
City TAMPA	State FL	Zip Code	Transaction ID : PR2634881547240			
		33629-7119	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		126.30			
Name of Employer (for Individual) United HealthCare Services Inc	Occ Mec	upation (for Individual) I Dir	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$63.15 Bi-Weekly)			
Other (specify)		757.80				
SUBTOTAL of Receipts This Page (optiona	l)	•	895.50			
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	<b>X</b> 11a 11b 11c 12					
			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Midd PESCATELLO, SARA, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2149 CALIFORNIA STR APT #D	EET NW		09 / 09 / Y Y Y Y 09 30 2017					
City WASHINGTON	State DC	Zip Code 20008-1834	Transaction ID : PR2634888547240 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		470.08					
Name of Employer (for Individual) United HealthCare Services Inc	United HealthCare Services Inc Dir Govt Affs							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3354.64	P/R Deduction (\$235.04 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. POWER, ROBERT, , ,	Date of Receipt							
Mailing Address 20 SMITH LANE		09 / 0 / Y Y Y Y 09 30 / 2017						
City SAINT JAMES	State NY	Zip Code 11780-3810	Transaction ID : PR2634892847240					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
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 ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)					
Full Name of Individual (Last, First, Midd CREED, PAM, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name REED, PAM, , ,							
Mailing Address 2983 BLACKSTONE			09 / D D / Y Y Y Y 2017					
City FRISCO	State TX	Zip Code 75033-7389	Transaction ID : PR2635426347240           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		40.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Agr Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		610.08					
TOTAL This Period (last page this line nur	nber only)							

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			Use separate schedule(s)	(check only one)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page								
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
			and so any pointed committee								
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	.C)							
A.	Full Name of Individual (Last, First, Middle Initia ROOS, THOMAS, , ,	l) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 3199 KAGEN AVE NE			09 30 / Y Y Y Y 2017							
	City SAINT MICHAEL	State MN	Zip Code 55376-3416	Transaction ID : PR2635451247240           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 Acctng Off	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Initia NELSON, MICHAEL, , ,	Date of Receipt									
	Mailing Address 3253 MARSCHALL RD	09 / D D / Y Y Y Y 2017									
	City SHAKOPEE	State MN	Zip Code 55379-3337	Transaction ID : PR2636719347240 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.08							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Recruit Global	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia FAGERSTROM, BRADLEY, , ,	l) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 3736 ZENITH AVENUE SOUTH		Zin Oode	M M / D D / Y Y Y Y 09 30 2017							
	City MINNEAPOLIS	State MN	Zip Code 55410-1166	Transaction ID : PR2636728047240           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		30.76							
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP C	ipation (for Individual) Comp	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 292.22	P/R Deduction (\$15.38 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			443.44							
т	OTAL This Period (last page this line number on	ly)	•								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			Use separate schedule(s)	(ch	(check only one)								
111			for each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)									
	Full Name of Individual (Last, First, Middle Initia GRIMES, MATT, , ,		-		<b>D</b> i i i	_							
Α.	Mailing Address 136 SOUTH PERKINS ROAD				Date of	Re	ceipt		- Y - Y -	Y			
					09 30 2017								
City State MEMPHIS TN			Zip Code 38117-3233		Transaction ID : PR2636733347240 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					7		28.0	08			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia SMITH, KENNETH, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt						
Mailing Address 1200 WASHINGTON ST #202			Zin Oode		м м 09	/	<sup>D</sup> 30	/ Y	2017	Y			
	City BOSTON	State MA	Zip Code 02118-2132						<b>3454724</b> is Period	0			
	FEC ID number of contributing federal political committee.	С				76.92							
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)									
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia PEDERSEN, NICHOLAS, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 1862 CLOVER MEADOW DR				09	1	D D D 30	/ Y	y y 2017	Y			
	City CHASKA	State MN	Zip Code 55318-5400						58474724 is Period	0			
	FEC ID number of contributing federal political committee.	С					1		28.	08			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir C	upation (for Individual) Comp		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	]	P/R Ded	uctio	on (\$14.	04 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•••••	•			,	,	133.(	08			
т	OTAL This Period (last page this line number or	וy)	••••••	•									

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a │ 11b │ 11c │ 12							
			, ,	13 14 15 16 17							
	y information copied from such Reports and State for commercial purposes, other than using the nar										
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initial) LARSON, CHRISTINE, , ,	or Full Or	rganization Name	Date of Receipt							
	Mailing Address 3360 VISTA COURT			09 30 2017							
	City	State MN	Zip Code	Transaction ID : PR2637688747240							
	HASTINGS		55033-3347	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.08							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) us Anlys Cnslt	Memo Item							
	Receipt For:	ggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		266.76	P/R Deduction (\$14.04 Bi-Weekly)							
В.	Full Name of Individual (Last, First, Middle Initial) FLOOD, ANDREW, , ,	rganization Name	Date of Receipt								
	Mailing Address 4833 TOWNES ROAD	09 30 2017									
	City	State	Zip Code	Transaction ID : PR2637693247240							
	EDINA	IA MN 55424-1239									
	FEC ID number of contributing federal political committee.	C		28.08							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cnslt Data/Res Anlyst	Memo Item							
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate	Year-to-Date ▼ , 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) LIST, CHRISTINE, , ,	or Full Or	rganization Name	Date of Receipt							
	Mailing Address 340 DAVIS ST			09 / D D / Y Y Y Y 09 30 2017							
	5	State	Zip Code	Transaction ID : PR2637694647240							
	NORTHBOROUGH	MA	01532-2420	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		95.22							
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Sen Mgmt	Memo Item							
	Receipt For:     A       Primary     General       Other (specify)	ggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•••••	151.38							
т	OTAL This Period (last page this line number only	)	·····								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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				Detailed Summary Page	×			-	1b	_	11c		12	
Anv	information copied from such Reports and Sta	atements m	av ı	not be sold or used by any n	erson	13 for the	pur		4 se of		15 icitina		16 htribut	17 ions
	r commercial purposes, other than using the													
\	AME OF COMMITTEE (In Full)			ite all le alth Oracum D/										
/ (	JnitedHealth Group Incorporate		Un	itedHealth Group PA	AC)									
	ull Name of Individual (Last, First, Middle Initia SMITH, STEPHANIE, , ,	al) or Full C	Drga	nization Name										
_	lailing Address 14 GATE HILL DRIVE				Date of Receipt									
_					09 30 2017									
	ity	State		Zip Code		Transaction ID : PR2638107247240								
	THE WOODLANDS	ТХ	_	77381-3278	_	Amoun	t of	Ea	ach R	ece	eipt thi	s Pe	eriod	
	EC ID number of contributing deral political committee.	С	_			31.24								
	ame of Employer (for Individual) nited HealthCare Services Inc	Occ Med	•	tion (for Individual)		М	emo	o l'	tem					
_	eceipt For:			ar-to-Date ▼	_									
	Primary General	Aggregate	10	249.92	I F	/R Ded	lucti	ion	n (\$15.	62	Bi-We	ekly	')	
	Other (specify) ▼	L	4											
	ull Name of Individual (Last, First, Middle Initia OGAN, BRETT, , ,	nization Name	Date of Receipt											
N	ailing Address 121 3RD STREET NE			м м 09	1	'	D D 30	1	/ Y	۲ 20	ү 17	Y		
	ity	State		Zip Code 20002-7313		Trans	act	ioi	n ID : I	PR	26381	127	47240	
_V	VASHINGTON	DC	_	Amoun	t of	Ea	ach R	ece	eipt thi	s Pe	eriod			
	FEC ID number of contributing federal political committee.							-		_	-g=-		95.2	2
	ame of Employer (for Individual) nited HealthCare Services Inc	Occ Ass		М	emo	o l'	tem							
R	eceipt For:	Aggregate	Ye	ar-to-Date 🔻										
	Primary General Other (specify) ▼	618.93					P/R Deduction (\$47.61 Bi-Weekly)							
	ull Name of Individual (Last, First, Middle Initia	al) or Full C	Drga	nization Name										
_					_	Date o		ece	•					
IV	lailing Address 111 4TH AVE N UNIT 703					09	1		D D D	1	/	20	ү 17	Y
	ity	State		Zip Code		Trans	sact	tio	n ID :	PR	26381	147	4724	)
1	/INNEAPOLIS	MN		55401-1538		Amoun	t of	E	ach R	ece	eipt thi	s Po	eriod	
	EC ID number of contributing deral political committee.	С						,		_	9		76.9	2
N	ame of Employer (for Individual)	Occ	upa	tion (for Individual)	_	М	emo	οI	ltem					
C	ptum Services, Inc	VP	IT											
R	eceipt For:	Aggregate	Ye	ar-to-Date 🔻										
	Other (specify)	730.74					P/R Deduction (\$38.46 Bi-Weekly)							
SU	BTOTAL of Receipts This Page (optional)							-		-		_	203.3	8
				-	-		÷		-	+	9		-	-
то	TAL This Period (last page this line number o	nly)		••••••	•			-		_	-			

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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			for each category of the	<b>X</b> 11a 11b 11c 12								
			Detailed Summary Page	13         14         15         16         17								
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	4C)								
Α.	Full Name of Individual (Last, First, Middle Initial) FRY, BENJAMIN, , ,	) or Full O	rganization Name	Date of Receipt								
	Mailing Address 3115 BRIARCLIFF GABLES CIR	CLE		09 30 2017								
	City	State	Zip Code	Transaction ID : PR2638114947240								
	ATLANTA	GA	30329-2456	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		126.92								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		1055.74	P/R Deduction (\$63.46 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial) ZEGLINSKI, MICHAEL, , ,	) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1 TRIMONT LANE #610A			09 / D D / Y Y Y Y Y 2017								
	City	State	Zip Code	Transaction ID : PR2639701847240								
	PITTSBURGH	PA	15211-1206	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) Pharm Ops	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial) EDWARDS, MICHAEL, , ,	) or Full O	rganization Name	Date of Receipt								
	Mailing Address 379 DURHAM ROAD			09 30 / Y Y Y Y 2017								
	City	State	Zip Code	Transaction ID : PR2639702047240								
	WYCKOFF	NJ	07481-1018	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		500.00								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI	Memo Item								
	Bessint For:	1	Year-to-Date ▼									
	Primary General Other (specify)		3250.00	P/R Deduction (\$250.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			1011.52								
т	OTAL This Period (last page this line number only	y)	•••••									

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s	s) (c	(check only one)							
	1713		for each category of the Detailed Summary Page		<b>X</b> 11a	11b	11c	12	<b>_</b>			
			ay not be sold or used by a ddress of any political comr									
NAME OF COMMITT		d PAC (l	JnitedHealth Group	PAC)								
Full Name of Individu A. SKOMO, DAVID,	ual (Last, First, Middle Initia	al) or Full O	rganization Name		Date of	Receipt						
Mailing Address 400	2 PHILLIPS COURT				09 30 / Y Y Y Y 09 30 2017							
Optum Services, Inc VF			Zip Code 16046-2140				: PR2639 Receipt th					
						- 45-		76.9	92			
			upation (for Individual) Pharm Ops		Me	emo Item						
			Year-to-Date ▼ 730.74		P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individu B. CALABRESE, D	ual (Last, First, Middle Initia DAVID, , ,	al) or Full Oi	rganization Name		Date of	Receipt						
Mailing Address 85 L				м м 09	/ D 3	D / Y	2017	Y				
City NORTHBOROUGH		State Zip Code MA 01532-1686					: PR26397 Receipt th		-			
FEC ID number of conference of the federal political comm	0	С		95.22								
Name of Employer (i Optum Services, Inc	ior Individual)	Occu VP I		Me	emo Item							
Receipt For: Primary Other (specify)	General ▼	Aggregate	Year-to-Date ▼ 666.54		P/R Deduction (\$47.61 Bi-Weekly)							
Full Name of Individu	ual (Last, First, Middle Initia T, , ,	al) or Full O	rganization Name		Date of	Receipt						
	MANCHESTER LANE				м м 09		80	ү ү 2017				
City PORT BARRINGTO	N	State IL	Zip Code 60010-7054				B : PR2639 Receipt th					
Optum Services, Inc D					<u>_</u> .	.,	. ,	28.0	08			
			upation (for Individual) CInt Svc Acct Mgt		Me	emo Item						
Receipt For: Primary Other (specify)					P/R Ded	uction (\$1	14.04 Bi-We	eekly)				
SUBTOTAL of Receipt	s This Page (optional)			···· ►				200.2	22			
TOTAL This Period (la	st page this line number o	nly)		►								

## Use separate schedule(s)

FOR LINE NUMBER:

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	Use separate schedule(s)	(check	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11		11b	11c	12				
Any information copied from such Reports and or for commercial purposes, other than using				he pu							
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle MESSING, KEITH, , ,	Initial) or Full C	rganization Name	Date	e of R	eceipt						
Mailing Address 9 BUTTERFIELD DR				09 / D D / Y Y Y Y 09 30 2017							
City GREENLAWN	State NY	Zip Code 11740-2001				PR26397 Receipt th	<b>3494724</b> is Period	0			
FEC ID number of contributing federal political committee.	С					1 - 1F	28.0	)8			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Apps Dev		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle SURRELL, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date	e of R	eceipt						
Mailing Address 620 DARTINGTON WAY			9	/ D D D 30		2017	Y				
City JOHNS CREEK	State GA	Zip Code 30022-8045				PR26397 Receipt th	5814724	)			
FEC ID number of contributing federal political committee.	С						76.9	92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Mem	o Item						
Receipt For:	Aggregate	Year-to-Date ▼		1							
Other (specify) ▼		730.74	P/R D	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle <b>HEPLER, CAREY, , ,</b>	,	rganization Name	Date	e of R	eceipt						
Mailing Address 2936 RIVERSIDE AVENUE 	State	Zip Code	(	9	30		2017 7 <b>6074724</b>				
JACKSONVILLE	FL	32205-8133				Receipt th		0			
FEC ID number of contributing federal political committee.	C				y	. ,	34.7	76			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process		Mem	o Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.32	P/R [	Deduc	tion (\$17	.38 Bi-We	ekly)				
SUBTOTAL of Receipts This Page (optional).					,	. ,	139.7	76			
TOTAL This Period (last page this line numb	er only)										

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FOR LINE NUMBER:

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111				h category d Summary		×	11a		11b		11c	12			
	y information copied from such Reports and Staten for commercial purposes, other than using the nan														
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F														
A.	Full Name of Individual (Last, First, Middle Initial) of JENSEN MOORE, KIMBERLY, , ,	or Full Or	ganization	Name		Date of Receipt									
	Mailing Address 230 ROSE AVENUE					09 / 09 / 2017									
		State CA	Zip Co				Trans	sacti	ion	ID : P	R26397	7034724	0		
	MILL VALLEY		9494	41-1728		- /	Amoun	t of	Eac	h Re	ceipt th	s Period			
	FEC ID number of contributing federal political committee.	C							-		-7-	61.	90		
	Name of Employer (for Individual) Optum Services, Inc		pation (for ien Mgmt		М	emo	lte	m							
	Receipt For: Ag	gregate `	/ear-to-Da	ate 🔻		-   P/	/R Ded	luctio	on (S	\$30.9	5 Bi-We	ekly)			
	Other (specify)	433.30							``						
	Full Name of Individual (Last, First, Middle Initial) of BIGHAM, ANNE, , ,	or Full Or	ganization	Name			Date o	f Re	eceip	ot					
	Mailing Address 2610 HOLLY LANE NORTH							/	D	ао 30	/ Y	y y 2017	Y		
		State MN	Zip Co						-			7144724	0		
		IVIIN	5544	17-1727	_		Amoun	t of	Eac	h Re	ceipt thi	s Period			
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Gen Mgmt					_		-		-7	476.	18		
	Name of Employer (for Individual) Optum Services, Inc					Memo Item									
	Receipt For: Ac Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3333,26					P/R Deduction (\$238.09 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial)		,												
C.	THIERER, MARK A, , ,		ganization	i Name		[	Date o	f Re	ceip	ot					
	Mailing Address 11 EAST WALTON UNIT 4701						м м 09	/	L	30 <sup>D</sup>	/ Y	2017			
	City S CHICAGO	State IL	Zip Co 6061	ode 1-5441					-			7364724	0		
					7		Amoun		Eac	n Re	ceipt th	192.	30		
		_									<u> </u>		_		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Segment C	r Individual) CEO		Memo Item									
	Receipt For: Ac	gregate `	/ear-to-Da	ate 🔻				1 4	(1	¢4.00					
	Other (specify)	3461.40					P/R Deduction (\$192.30 Bi-Weekly)								
s	JBTOTAL of Receipts This Page (optional)											730.	38		
т	OTAL This Period (last page this line number only)				····· •	j			,		-, -,				

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         1							
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
		laite di la alth. One un Di								
UnitedHealth Group Incorport	ated PAC (I	United Health Group PA	AC)							
Full Name of Individual (Last, First, Middle <b>A.</b> DUTTA, SUMIT, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1112 W WRIGHTWOOD	AVE		09 30 2017							
City CHICAGO	State IL	Zip Code 60614-1315	Transaction ID : PR2639773847240 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) Seg Chief Med Off	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1538.40	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle 3. FITZGERALD, JAMES, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6206 CLIFTON COURT			09 30 / Y Y Y Y Y 2017							
City PLAINFIELD	State IL	Zip Code 60586-1761	Transaction ID : PR2639783047240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		53.32							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) · Voice/Data Ntwkng	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 213.28	P/R Deduction (\$26.66 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. HINES, KIRSTEN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 27 E BIRCHWOOD AVE			09 / D D / Y Y Y Y Y 2017							
City HINSDALE	State IL	Zip Code 60521-2802	Transaction ID : PR2639786947240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) uty Gen Counsel Mgr	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)	)		466.00							
TOTAL This Period (last page this line num	per only)									

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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 (	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle KOUZIOS, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2650 CONNOLLY LN			M M / D D / Y Y Y Y 09 30 2017							
City WEST DUNDEE	State IL	Zip Code 60118-1756	Transaction ID : PR2639790047240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		133.32							
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 533.28	P/R Deduction (\$66.66 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. NELSON, ELLEN, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 11882 TILDEN PLACE			09 / D D / Y Y Y Y Y 2017							
City WELLINGTON	State FL	Zip Code 33414-6056	Transaction ID : PR2639795347240 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) CInt Svc Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle SMITH, DELYLE, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address PO BOX 447			09 30 / Y Y Y Y Y 2017							
City MT PROSPECT	State IL	Zip Code 60056-0447	Transaction ID : PR2639801547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		133.32							
Name of Employer (for Individual) Optum Services, Inc	Occ Dir I	upation (for Individual) T	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V 466.62	P/R Deduction (\$66.66 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			343.56							
TOTAL This Period (last page this line numb	er only)									

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
			person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle BARRAGREE, SHERI, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 812 BARNES STREET			M M / D D / Y Y Y Y 09 30 2017							
City MCKINNEY	State TX	Zip Code 75069-5549	Transaction ID : PR2640450147240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		40.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. GALLOWAY, MERCEDEIS, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 630 E 10TH STREET	M M / D D / Y Y Y Y 09 30 2017									
City CHARLOTTE	State NC	Zip Code 28202-3130	Transaction ID : PR2640452047240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.40							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 258.40	P/R Deduction (\$15.20 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. MOHORIC, MARGARET, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6000 REDONDO SIERRA	1		M M / D D / Y Y Y Y 30 2017							
City RIO RANCHO	State NM	Zip Code 87144-0606	Transaction ID : PR2640460047240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	l)		98.48							
TOTAL This Period (last page this line num	ber only)									

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 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 (l	JnitedHealth Group PA	λC)								
Full Name of Individual (Last, First, Midd A. WU, LAMBERT, , ,	le Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 11008 CHERWELL COU	IRT		09 30 2017								
City	State	Zip Code	Transaction ID : PR2640461647240								
LAS VEGAS	NV	89144-4526	_ Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) Health Plan of Nevada	Occu Med	upation (for Individual) Dir	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary     General       Other (specify) ▼		730.74	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. STOW, CHRISTINA, , ,	le Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4709 ALTON PL NW	09 30 2017										
City WASHINGTON	State DC	Zip Code 20016-2041	Transaction ID : PR2640466447240 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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. WILJANEN HATHAWAY, AM		rganization Name	Date of Receipt								
Mailing Address 369 135TH AVE			09 30 / Y Y Y Y Y 2017								
City	State MI	Zip Code	Transaction ID : PR2640835247240								
WAYLAND	IVII	49348-9402	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		38.42								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dvlp Cons	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.52	P/R Deduction (\$19.21 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	al)		499.94								
TOTAL This Period (last page this line nur	nber 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	★         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 Incorporation	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle In SHARKEY, S PAUL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8607 ELLISTON DRIVE			09 30 Y Y Y Y 2017							
City WYNDMOOR	State PA	Zip Code 19038-7957	Transaction ID : PR2640845447240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In B. SCHUTT, ERIC, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2359 US HWY 51			09 / D D / Y Y Y Y 2017							
City	State	Zip Code	Transaction ID : PR2640846247240							
MC FARLAND	WI	53558-9142	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 ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In C. BRISSON, SAMUEL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3408 YUKON AVENUE			09 30 2017							
City ST LOUIS PARK	State MN	Zip Code 55426-3840	Transaction ID : PR2640854547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.04							
Name of Employer (for Individual) Optum Services, Inc	Occ Mgr	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.32	P/R Deduction (\$15.02 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			442.72							
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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IT.			Use separate schedule(s)		(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	47	
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
$\overline{)}$	NAME OF COMMITTEE (In Full)			<u> </u>							
/	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	(C)							
Α.	Full Name of Individual (Last, First, Middle Initia PIERCE-HARRIS, PHELISHA, , ,	l) or Full O	rganization Name	C	Date of	Re	ceipt				
	Mailing Address 3041 DEE ANN DRIVE			M M / D D / Y Y Y Y 09 30 2017							
	City MEMPHIS	State TN	Zip Code 38119-9132	A					86634724 iis Period		
	FEC ID number of contributing federal political committee.	С							34.	76	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) oc Dir Clin Pract Perf		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/	R Dedu	uctic	on (\$17.:	38 Bi-We	eekly)		
B.	Full Name of Individual (Last, First, Middle Initia WAGNER, JOSEPH, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 3405 MEREDITH RIDGE ROAD						<sup>D</sup> 30	/ Y	2017	Y	
	PHOENIX	MD	21131-1456						37584724 iis Period		
	FEC ID number of contributing federal political committee.	ů l					,		38.	_	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP	upation (for Individual) Fin	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.37	P/	R Dedu	ictio	on (\$19.2	23 Bi-We	ekly)		
C.	Full Name of Individual (Last, First, Middle Initia WITT, JULIE, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 14273 WATERFORD SQUARE				м м 09	/	30	JL	2017 <sup>Y</sup>		
	City NEW BERLIN	State WI	Zip Code 53151-9509	A					87604724 his Period		
	FEC ID number of contributing federal political committee.	С			_		y	, , , , , , , , , , , , , , , , , , ,	28.	08	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Act Cnslt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.76	P/	ſR Dedu	uctio	on (\$14.)	04 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)						, ,		101.	30	
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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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mido A. WONG, PAMELA, , ,		organization Name	Date of Receipt							
Mailing Address 5200 SUMMIT RIDGE D #1621	RIVE		09 / D D / Y Y Y Y 2017							
City RENO	State NV	Zip Code 89523-9033	Transaction ID : PR2640876947240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.			28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.72	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Mide STEGMAN, PAM, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
#110										
City MINNEAPOLIS	State MN	Zip Code 55401-1578	Transaction ID : PR2640878447240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.76							
Name of Employer (for Individual) Optum Services, Inc	Occ	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
Full Name of Individual (Last, First, Mido C. MINTO, RYAN, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 1505 HERITAGE CLUB		7. 0.1	09 / D D / Y Y Y Y Y 2017							
City WAKE FOREST	State NC	Zip Code 27587-7698	Transaction ID : PR2640882447240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		101.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 893.24	P/R Deduction (\$50.96 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		164.76							
TOTAL This Period (last page this line nu	mber only)									

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	I EIVIIZED RECEIPIS		Detailed Summary Page			<b>X</b>   1	1a		11	b		11c	12		
				Jetaneu Summary Paye		_	3		14	H		15	16	17	
An or	v information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay n addre	ot be sold or used by any poess of any political committee	erson e to s	for olici	the t cor	purp ntrib	pos	e of ons f	so fron	liciting n such	contrib commi	utions ttee.	
$\langle \rangle$	NAME OF COMMITTEE (In Full)														
$\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Uni	tedHealth Group PA	AC)										
١.	Full Name of Individual (Last, First, Middle Init ADVANI, PROTIMA, , ,	tial) or Full O		Date of Receipt											
	Mailing Address 7618 BRITTANY PARC CT					09 30 / Y Y Y Y Y 09 30 2017									
	City	State		Zip Code		Transaction ID : PR2642024147240									
	FALLS CHURCH	VA		22043-2907	_	Am	ount	of	Ea	ch R	lece	eipt thi	s Perio	b	
	FEC ID number of contributing federal political committee.	С				200.00									
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP I	•	ion (for Individual)		Memo Item									
	Receipt For:	Anareaste	Vos	r-to-Date ▼											
Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼												eekly)			
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name														
8.	LIMBAGO, DANIEL, , ,	tial) or Full O	rgai	nization Name		Date of Receipt									
	Mailing Address 9100 PIXIE COURT						09	/		30	)	/ Y	ү ү 2017	Y	
	City	State		Zip Code		Т	rans	acti	on	ID :	PR	26420	274472	40	
	FAIRFAX	VA		22031-3119	Amount of Each Recei						eipt thi	s Perio	b		
	FEC ID number of contributing federal political committee.	C					_		,			-y-	28	.08	
	Name of Employer (for Individual) Jnited HealthCare Services Inc			tion (for Individual) fs Dir		Memo Item									
	Receipt For:	Aggregate	Yea	r-to-Date ▼		-									
	Primary General Other (specify) ▼		,	266.76	'	P/R	Ded	uctic	on (	(\$14.	04	Bi-We	əkly)		
	Full Name of Individual (Last, First, Middle Init FISHMAN, EINA, , ,	tial) or Full O	)rgai	nization Name		Da	te of	Re	cei	pt					
	Mailing Address 27708 WATER ASH DRIVE						09 <sup>M</sup>	/	Γ	30		/ Y	y y 2017	Ŷ	
	City	State		Zip Code		Т	rans	acti	ion	ID :	PR	26420	278472	40	
	WESLEY CHAPEL	FL		33544-8752	_	Am	ount	of	Ea	ch R	lece	eipt thi	s Perio	b	
	FEC ID number of contributing federal political committee.	С							,			y	517	.44	
	Name of Employer (for Individual)	Occi	unat	ion (for Individual)	_	Memo Item									
	United HealthCare Services Inc	Med	•												
	Receipt For:	Agareaate	Yea	r-to-Date ▼											
	Primary General Other (specify)		]	P/R	Ded	uctio	on	(\$25	8.7	2 Bi-W	eekly)				
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FOR LINE NUMBER:

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ידו	EMIZED RECEIPTS		Use separate schedule(s)		(check only one)							
111			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17		
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma	I ay not be sold or used by any p address of any political committee	erson f e to so	or the	pur ntrib	pose of	f solicitin	g contribut	tions		
<u> </u>	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini DASTVAR, DEAN, , ,	,	Date of Receipt									
	Mailing Address 11540 QUAILWOOD MANOR				м м 09	/	D 30		2017	Y		
	City FAIRFAX STATION	State VA	Zip Code 22039-2034						02854724 his Period	0		
	FEC ID number of contributing federal political committee.	С							28.	08		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	<b>P</b>	/R Dedi	ucti	on (\$14	l.04 Bi-W	'eekly)			
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BRUECKMAN, BRIAN, , ,					Re	eceipt					
	Mailing Address 4601 PARK COMMONS DRIV #417				м м 09	1	D 30		2017	Y		
	City SAINT LOUIS PARK	State MN	Zip Code 55416-4993						02944724 his Period	0		
	FEC ID number of contributing federal political committee.	C			Amount	U			666.0	66		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHC Operations		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2666.64	] Р	/R Dedu	uctio	on (\$33	3.33 Bi-V	Veekly)			
	Full Name of Individual (Last, First, Middle Ini BRANNEN, RAYMOND, , ,	tial) or Full O	Organization Name		Date of	Re	eceipt					
	Mailing Address 6258 FORT PIERCE WAY	Otata	7. 0.4		09 <sup>M</sup>	1	30	)	2017			
	City HERRIMAN	State UT	Zip Code 84096-3977				-	-	203074724 his Period	0		
	FEC ID number of contributing federal political committee.	С					y	. ,	61.9	90		
	Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Training		Me	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	]   P	/R Ded	ucti	on (\$30	).95 Bi-W	/eekly)				
	UBTOTAL of Receipts This Page (optional) DTAL This Period (last page this line number						9 	. ,	756.6	54		

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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IT.			Use separate schedule(s)		(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>′</b> 11a 13		11b 14	11c	12	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		oose of	soliciting	contribu	tions	
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group P	AC)							
A.	Full Name of Individual (Last, First, Middle Initia YOUNG, ALLISON, , ,	dle Initial) or Full Organization Name					ceipt				
	Mailing Address 15222 ALMA MATER CT				м м 09	/	D D 30	/ Y	ү 2017	Y	
	City BATON ROUGE	State LA	Zip Code 70810-8389						3 <b>3034724</b> is Period		
	FEC ID number of contributing federal political committee.								95.	22	
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.54					on (\$47.	61 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initia LONG, RICHARD, , ,	al) or Full O		Date of	Re	ceipt					
	Mailing Address 618 WASHINGTON AVE N UNIT 504				09	/	D D D 30	/ Y	ү 2017	Ŷ	
	City MINNEAPOLIS	State MN	Zip Code 55401-4111	-			-		<b>3124724</b> is Period	-	
	FEC ID number of contributing federal political committee.	C				U			117.	_	
	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 ▼ 588.20	P/R Deduction (\$58.82 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 1021 NORTH GARFIELD STR				<sup>M</sup> 09	1	30		2017 <sup>°</sup>		
	City ARLINGTON	State VA	Zip Code 22201-2548				-		33204724 is Period	-	
	FEC ID number of contributing federal political committee.	C			<u> </u>		y .	9	192.	30	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emc	tem				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1826.85					on (\$96.	.15 Bi-We	eekly)		
	UBTOTAL of Receipts This Page (optional)		•	▶ _		_	<del>y</del>	5	405.	16	
Т	OTAL This Period (last page this line number of	nly)	······ ]	•	L		_				

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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         11							
			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle BUECHLER, JESSICA, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1408 C STREET SE			09 / D D / Y Y Y Y 2017							
City WASHINGTON	State DC	Zip Code 20003-2363	Transaction ID : PR2642833947240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle A. KEISER-JENKINS, KAREN, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9325 MARTINS LAKE DR	09 / D D / Y Y Y Y Y 2017									
City	State	Zip Code	Transaction ID : PR2642834447240							
ROSWELL	GA	30076-2865	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		31.72							
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 ▼ 237.90	P/R Deduction (\$15.86 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. CRESTA, BRIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5 OGDEN LANE			09 / D D / Y Y Y Y 09 30 2017							
City MIDDLETON	State MA	Zip Code 01949-1669	Transaction ID : PR2642837547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		95.22							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /ktg Bus Dev	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	)		155.02							
TOTAL This Period (last page this line numl	per 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	<b>X</b> 11a		11b	11c	12	<i>,</i>		
Any information copied from such Reports and or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full)	no name anu a	across of any pointeal committee		Jun	5000113 1	ioni suci	- commu			
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle SOCZYNSKI, PAUL, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 915 SOUTH 91ST STREET	г 		09 30 / Y Y Y Y 2017							
City WEST ALLIS	State WI	Zip Code 53214-2848					<b>19774724</b> is Period	0		
FEC ID number of contributing federal political committee.	С					1.45	125.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir		Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 562.50	P/R De	educti	ion (\$62.	.50 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle <b>CRAGLE, STEVE</b> , , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 6604 MOHAWK TRAIL	01-1	Zin Onde	09		30		2017	Y		
City EDINA	State MN	Zip Code 55439-1030					200647240 is Period	)		
FEC ID number of contributing federal political committee.	С			Int Of			95.2	22		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R De	educti	on (\$47.	61 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle <b>NEELY, MARC</b> , , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 1159 BUFFALO RIDGE RE			M 09		30		2017	Y		
City CASTLE PINES	State CO	Zip Code 80108-8190					20314724 is Period	0		
FEC ID number of contributing federal political committee.	С				y		95.2	22		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mem	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 666.54	P/R De	educt	ion (\$47.	.61 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional).					, .	. ,	315.4	4		
TOTAL This Period (last page this line number	er only)				-ap.					

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			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 HAMMOND, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 244 NE 59TH TERR			09 30 / Y Y Y Y Y 2017					
City TOPEKA	State KS	Zip Code 66617-1661	Transaction ID : PR2644644847240					
FEC ID number of contributing	_		Amount of Each Receipt this Period					
federal political committee.	C		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.74	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. WINNEROSKI, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4624 WASHBURN AVE S			09 30 / Y Y Y Y Y 2017					
	State MN	Zip Code	Transaction ID : PR2644647147240					
	IVIIN	55410-1846	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.40					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item					
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (specify) ▼		258.40	P/R Deduction (\$15.20 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. MCKOY, PHILIP, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 927 LINCOLN AVE			09 30 2017					
City SAINT PAUL	State MN	Zip Code 55105-3149	Transaction ID : PR2644651647240					
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)	Memo Item					
United HealthCare Services Inc Receipt For:		Grp CIO						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3653.70	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			491.92					
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 only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>✗</b> 11a ☐ 11b ☐ 11c ☐ 12							
			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 (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle ZIRKELBACH, ANGELA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1615 Q ST NW APT #1110			09 30 / Y Y Y Y 2017							
City WASHINGTON	State DC	Zip Code 20009-6349	Transaction ID : PR2644660247240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.76	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MISTRY, RASHMITA, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 404 RAVENSCLIFF DR			09 30 Y Y Y Y Y 2017							
City MEDIA	State PA	Zip Code 19063-1457	Transaction ID : PR2645169147240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	476.18									
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 ▼ 3333.26	P/R Deduction (\$238.09 Bi-Weekly)							
Full Name of Individual (Last, First, Middle <b>NEALE, MATTHEW</b> , , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11380 WILD HERON PT			09 / D D / Y Y Y Y 2017							
City EDEN PRAIRIE	State MN	Zip Code 55347-4729	Transaction ID : PR2645175247240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		95.22							
Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			599.48							
TOTAL This Period (last page this line numb	er only)									

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)										
ITEMIZED RECEI	-13		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
			v not be sold or used by any pe			ourp								
		me and ad	dress of any political committee	to so	licit con	tribu	itions tr	rom sucr	i committ	ee.				
NAME OF COMMITTE		PAC (U	nitedHealth Group PA	C)										
Full Name of Individual A. HOFFMAN, SHERF	(Last, First, Middle Initial) RI, , ,	or Full Org	ganization Name		Date of	Rec	ceipt							
Mailing Address 3409	DEEP WILLOW AVENUE			09 30 / Y Y Y Y Y										
City PIKESVILLE		State MD	Zip Code 21208-3116		Transaction ID : PR2646294647240 Amount of Each Receipt this Period									
FEC ID number of con federal political commit	Ũ	С					,	- 7	95.2	22				
Name of Employer (for Optum Services, Inc	Individual)		pation (for Individual) Int Svc Acct Mgt		Me	emo	Item							
Receipt For: Primary Other (specify) ▼	General	Aggregate Y	′ear-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)										
Full Name of Individual B. MEBANE, JEREN	(Last, First, Middle Initial)	or Full Org	ganization Name		Date of	Rec	ceipt							
	Mailing Address 1808 PICADILLY PL						D D 30	/ Y	2017	Y				
City TYLER		State TX	Zip Code 75703-2400	-					9804724	)				
FEC ID number of con federal political commit	Ũ	C						eceipt tri	is Period 80.0	00				
Name of Employer (for United HealthCare Serv			pation (for Individual) twk Prgms		Ме	emo	Item							
Receipt For: Primary Other (specify) ▼	General		/ear-to-Date ▼ 720.00	P/R Deduction (\$40.00 Bi-Weekly)										
Full Name of Individual c. ALEXANDER, B	(Last, First, Middle Initial)	or Full Org	ganization Name		Date of	Rec	eipt							
Mailing Address 2600 APT 4					м м 09	/	D D 30		2017					
City RICHMOND		State VA	Zip Code 23223-7895						29864724 is Period	0				
FEC ID number of con federal political commit	Ũ	С					,		36.	50				
Name of Employer (for United HealthCare Serv	,		pation (for Individual) Dir Comm		Me	emo	ltem							
Receipt For: Primary Other (specify)	General	Aggregate Y	/ear-to-Date ▼ 237.25	P	P/R Dedu	uctio	n (\$18.:	25 Bi-We	ekly)					
SUBTOTAL of Receipts	This Page (optional)		••••••				,	,	211.7	<b>7</b> 2				
TOTAL This Period (last	page this line number only	/)	••••••				-							

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only 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	Statements mane and a	L ay not be sold or used by any p address of any political committe	erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I A. STANKIEWICZ, DENNIS, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 17761 WEAVER LAKE DRI	VE		M M / D D / Y Y Y Y 09 30 2017						
City MAPLE GROVE	State MN	Zip Code 55311-1328	Transaction ID : PR2646304047240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		0.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. LANIER, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 10006 FOX SPRING COUR	09 30 / Y Y Y Y Y 2017								
City OAKTON	State VA	Zip Code 22124-2657	Transaction ID : PR2698404247240 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 Dvlp Sr Cons	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 237.25	P/R Deduction (\$18.25 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I ROSENHAUS, MORGANNE, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 3801 GEORGIA AVE NW APT 506 City	State	Zip Code	09 30 2017 Transaction ID : PR2698409847240						
WASHINGTON	DC	20011-5938	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.40						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Assc Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.20	P/R Deduction (\$15.20 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			66.90						
TOTAL This Period (last page this line numbe	r only)								

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorport	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle ZENICK, GEOFFREY, , ,	,	rganization Name	Date of Receipt							
Mailing Address 7714 TWISTED OAKS CIF	RCLE		09 / D D / Y Y Y Y 2017							
City	State TX	Zip Code	Transaction ID : PR2698410847240							
DALLAS		75231-4711	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		365.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 730.00	P/R Deduction (\$365.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. GROSSMAN, BEVERLY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5 BROOKSIDE AVE			09 30 / Y Y Y Y 2017							
City	State	Zip Code	Transaction ID : PR2699179847240							
MENANDS	NY	12204-2301	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		47.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For:	Aggregate	Year-to-Date <b>V</b>								
Primary General Other (specify) ▼		333.20	P/R Deduction (\$23.80 Bi-Weekly)							
Full Name of Individual (Last, First, Middle AHLSTROM, ALEXIS, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3421 OAKWOOD TERRA			09 / D D / Y Y Y Y Y 2017							
City WASHINGTON	State DC	Zip Code 20010-1819	Transaction ID : PR2699187147240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.72							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 728.84	P/R Deduction (\$38.36 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)	)		489.32							
TOTAL This Period (last page this line numb	per only)									

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 265 OF

				tailed Summary Page	×			11b	11c		12									
۸	u information conied from such Departs and O	latomonte		he cold or used by any		13		14	15		16 ntribut	17 iono								
	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 (I	Unite	edHealth Group PA	AC)															
Α.	Full Name of Individual (Last, First, Middle Init ZHOU, JINGXIN, , ,	ame of Individual (Last, First, Middle Initial) or Full Organization Name DU, JINGXIN, , ,									Date of Receipt									
	Mailing Address 12011 FAIRVIEW CT					09 30 2017														
	City	State	Z	Zip Code		Transaction ID : PR2699187847240														
	MINNETONKA	MN		55343-4516		Amount of Each Receipt this Period														
	FEC ID number of contributing federal political committee.	С																		
	Name of Employer (for Individual) Optum Services, Inc		cupatio Fin	n (for Individual)		М	emo	o Item												
	Receipt For:	Aggregate	Year-	to-Date ▼																
	Primary General Other (specify) ▼		-	666.54		P/R Ded	lucti	on (\$47	.61 Bi-We	ekly	y)									
	Full Name of Individual (Last, First, Middle Init BETCHLEY, ROBERT, , ,	ial) or Full C	Organiz		Date of Receipt															
	Mailing Address 3371 EMERALD VALLEY DRI		09 30 2017																	
	City	State	Z	lip Code		Trans	act	ion ID :	PR26991	1896	647240	)								
	ONALASKA	WI		54650-8746		Amount of Each Receipt this Period														
	FEC ID number of contributing federal political committee.	С				<u> </u>				_	100.0	0								
	Name of Employer (for Individual) Optum Services, Inc		cupatio Gen N	n (for Individual) Igmt		Memo Item														
	Receipt For:	Aggregate	Year-	to-Date 🔻																
	Primary General Other (specify) ▼		,	1215.86	P	P/R Deduction (\$100.00 Bi-Weekly)														
c.	Full Name of Individual (Last, First, Middle Init FARRELL, ELIZABETH, , ,	ial) or Full C	Organiz	ration Name		Date of	f Re	eceipt												
	Mailing Address 18777 THE PINES					09 30 / Y Y Y Y 2017														
	City EDEN PRAIRIE	State MN	Z	Zip Code 55347	_				PR2699		-	0								
				55347	-	Amoun	t of	Each F	Receipt th	is F	Period									
	FEC ID number of contributing federal political committee.	С				Ľ.		y 1	y	_	384.6	60								
	Name of Employer (for Individual)	Occ	cupatio	n (for Individual)		M	emo	o Item												
	Optum Services, Inc	SVF	P Ops																	
	Receipt For:	Aggregate	Year-	to-Date 🔻																
	Other (specify)		-	3653.70	]   「	P/R Deduction (\$192.30 Bi-Weekly)														
s	UBTOTAL of Receipts This Page (optional)				•			,	. ,	-	579.8	2								
т	OTAL This Period (last page this line number of	only)		•••••••	•	L														

## 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	<b>X</b> 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma	A not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)		duress of any pointear commute								
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle Ir A. HECK, DARRYL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9801 DORSET LANE			Mom         /         Y							
City EDEN PRAIRIE	State MN	Zip Code 55347-3139								
FEC ID number of contributing federal political committee.	C		34.76							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Yroj Mgr	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir B. BOOGERD, MICHAEL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1595 SUMMIT SHORES CIR			M M       /       D D       /       Y Y Y Y         09       30       2017         Transaction ID : PR2700842347240         Amount of Each Receipt this Period							
City BURNSVILLE	State MN	Zip Code 55306-5817								
FEC ID number of contributing		33300-3017								
federal political committee.	С		34.76							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Sys Anlys Cnslt	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir TERRANOVA, THOMAS, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 18 DANEMAR DRIVE			09 / D D / Y Y Y Y Y 2017							
City MIDDLETOWN	State NJ	Zip Code 07748-3625	Transaction ID : PR2700843647240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.76							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Agnt Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			104.28							
TOTAL This Period (last page this line number	r 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							
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions							
UnitedHealth Group Incorpora	ited PAC (I	UnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle TAGGART, ELIZABETH, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8530 BELNOR DRIVE			09 30 / Y Y Y Y 2017							
City CICERO	State NY	Zip Code 13039-8845	Transaction ID : PR2700846547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		31.72							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Agnt Mgr	Memo Item							
Receipt For: Primary General Other (specify) $\checkmark$	Aggregate	Year-to-Date ▼ 253.76	P/R Deduction (\$15.86 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. OFFIELD, MIRANDA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2240 N COUNTRY VISTA E	BLVD		09 30 2017							
City LIBERTY LAKE	State WA	Zip Code 99019-5071	Transaction ID : PR2700857547240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Anlys	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.56	P/R Deduction (\$19.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle STEARNS, SALLIE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 211 COLONIAL HOMES DI #1505			M M / D D / Y Y Y Y 09 30 2017							
City ATLANTA	State GA	Zip Code 30309-1293	Transaction ID : PR2700861747240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.76							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nt Executive II	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			104.56							
TOTAL This Period (last page this line number	er only)									

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
ILEIVIIZED RECEIFIJ		for each category of the Detailed Summary Page	<b>X</b> 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)	<u>.</u>										
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Midd WARNER, JONATHAN, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 258 CAMBRIDGE DRIVE	E		09 30 2017								
City RAMSEY	State NJ	Zip Code 07446-1260	Transaction ID : PR2700873547240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		34.76								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) t Mgt Cons CInt Svc	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. PERRY, KIMBERLY, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 5045 LINDELL BLVD			09 / D D / Y Y Y Y Y 2017								
City SAINT LOUIS	State MO	Zip Code 63108-1219	Transaction ID : PR2700918047240								
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) d Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. MCCAIN, KELLY, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 531 T STREET NW APT 204	01-1-	7. 0.4	09 / D D / Y Y Y Y 30 2017								
City WASHINGTON	State DC	Zip Code 20001-2087	Transaction ID : PR2700923547240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		120.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1080.00	P/R Deduction (\$60.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	al)		189.52								
TOTAL This Period (last page this line num	nber only)										

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

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 be to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. FRINGER, TRICIA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2809 STANFORD AVE			09 30 / Y Y Y Y 2017						
City DALLAS	State TX	Zip Code 75225-7917	Transaction ID : PR2701818647240           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		476.18						
Name of Employer (for Individual) Optum Services, Inc	Occi VP	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3333.26	P/R Deduction (\$238.09 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. O'CONNELL, DANIEL, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3325 W 18TH AVENUE			09 30 / Y Y Y Y 2017						
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819647240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		204.16						
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 ▼ 1635.36	P/R Deduction (\$102.08 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SPARKS, KEVIN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10681 S CEDAR NILES BL		7.0.1	M M / D D / Y Y Y Y 09 30 2017						
City OLATHE	State KS	Zip Code 66061-7415	Transaction ID : PR2701825547240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		416.66						
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 ▼ 1041.65	P/R Deduction (\$208.33 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1097.00						
TOTAL This Period (last page this line number	er only)								

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

FOR LINE NUMBER:

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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 (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I ROTH, TROY, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7982 WOOD COURT			09 30 2017								
City FRISCO	State TX	Zip Code 75034-8203	Transaction ID : PR2701828947240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		95.22								
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. UNGAR, ELIZABETH, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 10115 48TH AV N			09 / D D / Y Y Y Y Y 2017								
City PLYMOUTH	State MN	Zip Code 55442-2521	Transaction ID : PR2702474947240 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		34.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir HRIS	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary     General       Other (specify) ▼		243.32	P/R Deduction (\$17.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I PEDRONCELLI, ANTONIO, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2824 KATHRYN SE			09 / D D / Y Y Y Y Y 2017								
City ALBUQUERQUE	State NM	Zip Code 87106-3106	Transaction ID : PR2702482147240           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		34.76								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Gen Mgmt	P/R Deduction (\$17.38 Bi-Weekly)								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.32									
SUBTOTAL of Receipts This Page (optional)			164.74								
TOTAL This Period (last page this line number	er only)										

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 271 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       verson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mic A. KRAMER, NANCY, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5701 STONE TRACE I	DRIVE		M M / D D / Y Y Y Y 09 30 2017							
City MASON	State OH	Zip Code 45040-8315	Transaction ID : PR2702501447240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		95.22							
Name of Employer (for Individual) Optum Services, Inc	Occ Dir I	upation (for Individual) RN	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.54	P/R Deduction (\$47.61 Bi-Weekly)							
Full Name of Individual (Last, First, Mic ALLEN, RONALD, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1245 4TH ST SW APT E709	State	Zin Code	09 / 0 D / Y Y Y Y 2017							
City WASHINGTON	State DC	Zip Code 20024-2318	Transaction ID : PR2702503847240           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		83.34							
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 ▼ 208.35	P/R Deduction (\$41.67 Bi-Weekly)							
Full Name of Individual (Last, First, Mic c. CHURCHES, KATHRYN, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 705 CORK CROSSING	1		09 / D D / Y Y Y Y 09 30 2017							
City COTTAGE GROVE	State WI	Zip Code 53527-8111	Transaction ID : PR2702506747240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.76							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$17.38 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optio	nal)		213.32							
TOTAL This Period (last page this line n	umber only)									

FOR LINE NUMBER:

PAGE 272 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	rated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Midd <b>A.</b> MORRIS, MITCHELL, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 200 CONGRESS AVE 47Y			09 30 2017						
City AUSTIN	State TX	Zip Code 78701-4507	Transaction ID : PR2702508447240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		0.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Optuml Cnslt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. CARMAN, VIRGINIA, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 74 CHARING ROAD			09 / 0 2017						
City SOUTH WINDSOR	State CT	Zip Code 06074-2228	Transaction ID : PR2702509647240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		44.44						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgr II	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 244.42	P/R Deduction (\$22.22 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. BENSON-SCEARCE, DENA,		rganization Name	Date of Receipt						
Mailing Address 406B RUDOLPH AVE			09 / D D / Y Y Y Y 2017						
City NASHVILLE	State TN	Zip Code 37206-1811	Transaction ID : PR2703224647240 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		105.26						
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 ▼ 631.56	P/R Deduction (\$52.63 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		149.70						
TOTAL This Period (last page this line nur	nber only)								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)							
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 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	I PAC (L	UnitedHealth Group PA	(C)							
A.	Full Name of Individual (Last, First, Middle Initia MERZLICKER, CAREY, , ,	ll) or Full O	Organization Name	Date of Receipt							
	Mailing Address 950 BENTLEY PARK CIRCLE			09 30 / Y Y Y Y 2017							
	City O FALLON	State MO	Zip Code 63368-8022	Transaction ID : PR2703246947240 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.				200.00							
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	upation (for Individual) Fin	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia VENNERSTROM, EMILY, , ,	l) or Full O	Organization Name	Date of Receipt							
	Mailing Address 179 MEADOW LANE			09 / D D / Y Y Y Y Y 2017							
	City LONG LAKE	State MN	Zip Code 55356-9493	Transaction ID : PR2703253747240 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		42.94							
	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 ▼ 214.70	P/R Deduction (\$21.47 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia CRIPPIN, TODD, , ,	ll) or Full O	Organization Name	Date of Receipt							
	Mailing Address 1309 RUSTICVIEW DRIVE			09 / D D / Y Y Y Y 09 / 30 / 2017							
	City BALLWIN	State MO	Zip Code 63011-4266	Transaction ID : PR2703639547240           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		45.62							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item							
Receipt For:       Aggregate         Primary       General         Other (specify)			Year-to-Date ▼ 205.29	P/R Deduction (\$22.81 Bi-Weekly)							
s	JBTOTAL of Receipts This Page (optional)		····· •	288.56							
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PAGE 274 OF

				Jse separate schedule(s)	(ch	(check only one)								
11	EMIZED RECEIPTS			or each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12	<u> </u>			
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
$\overline{\langle}$	NAME OF COMMITTEE (In Full)				10 0									
$\rangle$	UnitedHealth Group Incorporated	I PAC (l	Uni	tedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia SAMMY, VANESSA, , ,	ll) or Full O	Drgar	nization Name		Date of	Re	ceipt						
	Mailing Address 3344 BRANTLY RD					м м 09	/	30	/ Y	ү ү 2017	Ŷ			
	City GLENWOOD	State MD		Zip Code 21738-9523		Transaction ID : PR2704190747240 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C						y- 1		312.	50			
	Name of Employer (for Individual) United HealthCare Services Inc	ion (for Individual) fs Dir		Me	emo	Item								
Receipt For:       Aggregate Ye         Primary       General         Other (specify) ▼				r-to-Date ▼ 1250.00		P/R Dedu	uctic	on (\$156	.25 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia SPADE, NATHAN, , ,	Name of Individual (Last, First, Middle Initial) or Full Organization Name					Re	ceipt						
	Mailing Address 12 WARWICK CIRCLE	I				09 / D D / Y Y Y Y 09 30 2017								
	City MECHANICSBURG	State PA		Zip Code 17050-2643						<b>8704724</b> is Period	0			
FEC ID number of contributing federal political committee.			C					1000.00						
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1000.00	P/R Deduction (\$1000.00 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia AGEN RYAN, BARBARA, , ,	ll) or Full O	Drgar	nization Name		Date of	Re	ceipt						
	Mailing Address 180 HIGH PARK LANE 1-0433	1.0				м м 09	/	<sup>D</sup> 30	L	ү 2017				
	City SILVER SPRING	State MD		Zip Code 20910-5834						98744724 is Period				
	FEC ID number of contributing federal political committee.	ů – Le				<u> </u>		<b>,</b>	,	555.	54			
Name of Employer (for Individual)     Occupation       Optum Services, Inc     VP Gen M       Receipt For:     Aggregate Year-       Primary     General       Other (specify)     Image: Comparison of the second secon			•	ion (for Individual) Mgmt		Me	emo	ltem						
			r-to-Date ▼ 555.54		P/R Ded	uctio	on (\$277	.77 Bi-V	/eekly)					
s	UBTOTAL of Receipts This Page (optional)			•				,	.,	1868.	04			
Т	OTAL This Period (last page this line number or	וy)		•••••				,	-	123801.	31			

S	CHEDULE B (FEC Form 3X)			FC	FOR LINE NUMBER: PAGE 275 O							OF 318					
IT	EMIZED DISBURSEMENTS	Use sepa		neck	only	one)											
			for each category of the Detailed Summary Page			21b 28a	22 	×	23 28c	+	26		27 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na				any j	persoi	n for the		pose		solic	ting o	ontribu				
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	<b>D</b> 4 6 % ·		_	_												
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	3rou	р Р.	AC)											
Α.	Full Name (Last, First, Middle Initial) Citizens for Prosperity in America Mailing Address 228 S Washington Street, Suite 1		-						Date of Disbursement								
	City Alexandria	State VA	Zip Code 22314				FEC Identification Number										
	Purpose of Disbursement Contribution		22314	0	11	1	С	1.00	04916		1						
	Candidate Name			Cate	gory	/	Amoun				<b>D : 41</b> Disbur	-		Period			
	Citizens for Prosperity in America		AC		/pe					_							
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼				Contribution Memo Item										
в.	Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen Mailing Address P.O. Box 44369						Date o		D		/		2017	Y			
	250 Prairie Center Drive																
	City State Zip Code Eden Prairie MN 55344						FEC Identification Number										
	Purpose of Disbursement Contribution			0	11	1	C C00439661 Transaction ID : 41315719										
	Paulsen, Erik, , Rep.,       Office Sought:     x       House     Disburse	ement For: 2 Primary Other (spec	General		gory. /pe	/	Amount of Each Disbursement this Period 2500.00 Contribution Memo Item							00			
C.	Full Name (Last, First, Middle Initial) Common Ground PAC						Date o		sburs		_	Y	YY	Y			
	Mailing Address 1490 Quarterpath Rd #272						09	<i>'</i>		18			2017				
	City Williamsburg Purpose of Disbursement Contribution	State VA	Zip Code 23185		11	-	FEC Identification Number										
	Candidate Name Common Ground PAC						<b>Transaction ID : 41316184</b> Amount of Each Disbursement this Period										
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼				Me	emo	ltem	С	ontrib	ution	2500.	00			
⊢	UBTOTAL of Disbursements This Page (optional).					_			<del>,</del>				8000	.00			

	IEDULE B (FEC Form 3X)					NUMBER: PAGE 276 OF 318								
ITEMIZED DISBURSEMENTS		Use sepa for each	(c		only 21b	y one) 22 🗶 23 26 27								
			Summary Page			28a	28b 28c 29 30b							
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	AME OF COMMITTEE (In Full)													
	InitedHealth Group Incorporated	PAC (Ur	itedHealth (	Grou	p P	PAC	S)							
	II Name (Last, First, Middle Initial) era for Congress					Date of Disbursement								
Ma	ailing Address PO Box 582496						09 / D D / Y Y Y Y Y 28 2017							
Cit	ty k Grove	State CA	Zip Code 95758				FEC Identification Number							
Pu	irpose of Disbursement		00100	C	)11		C C00461061							
Ca	andidate Name				eqor	/	Transaction ID : 41346792 Amount of Each Disbursement this Period							
B	era, Amerish, , Rep.,				ype	"								
	fice Sought: x House Disburse	ement For:					4000.00							
	Senate x	-	General				Contribution							
St	ate: CA District: 07	Other (spe	ciiy) ▼				Memo Item							
	Il Name (Last, First, Middle Initial)													
	enham for Congress						Date of Disbursement							
Ma	ailing Address 2150 River Plaza Dr., #150						09 28 2017							
Cit	-	State	Zip Code				FEC Identification Number							
	acramento Irpose of Disbursement	CA 95833				_	C C00473272							
	Contribution			011		011	Transaction ID : 41346793							
	andidate Name			Cate	egory	//	Amount of Each Disbursement this Period							
	enham, Jeff, , Rep.,			T	ype									
Of		ement For:					2000.00							
	Senate <b>x</b> President						Contribution							
Sta	ate: CA District: 10		Sily)				Memo Item							
-	II Name (Last, First, Middle Initial)						Date of Disbursement							
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Ma	ailing Address PO Box 2018						09 28 2017							
Cit	ty iousand Oaks	State CA	Zip Code 91358				FEC Identification Number							
Pu	rpose of Disbursement			-	-		C C00513077							
	contribution			C	)11		Transaction ID : 41346794							
	andidate Name			Category		//	Amount of Each Disbursement this Period							
	Brownley, Julia, , Rep., fice Sought:	ement For:	2019	I.	ype		2500.00							
01	tice Sought: X House Disburse Senate X	Primary	General											
	President	Other (spe	cify) 🔻				Contribution							
Sta	ate: CA District: 26	-												
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SCHEDULE B (FEC Form 3X)					NUMBER: PAGE 277 OF 318
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(chec	k only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth G	Group I	PAC	)
Full Name (Last, First, Middle Initial) A. Pete Aguilar For Congress					Date of Disbursement
Mailing Address PO Box 10954					09 28 2017
San Bernardino	State CA	Zip Code 92423			FEC Identification Number
Purpose of Disbursement Contribution			011		C C00510461 Transaction ID : 41346795
Candidate Name Aguilar, Pete, , Rep.,			Catego Type		Amount of Each Disbursement this Period 2500.00
Office Sought: Senate President State: CA District: 31	ment For: 2 Primary Other (spec	General			Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Pete Aguilar For Congress Mailing Address PO Box 10954					Date of Disbursement
City San Bernardino Purpose of Disbursement	State CA	Zip Code 92423			FEC Identification Number
Contribution Candidate Name Aguilar, Pete, , Rep.,			011 Catego Type		Transaction ID : 41346796 Amount of Each Disbursement this Period
	ment For: 2 Primary Other (spec	General			Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Walters for Congress					Date of Disbursement
Mailing Address 9070 Irvine Center Drive #150					09 28 2017
Irvine Purpose of Disbursement	State CA	Zip Code 92618		_	FEC Identification Number
Contribution Candidate Name Walters, Mimi, , Ms.,			011 Catego Type		Transaction ID : 41346797 Amount of Each Disbursement this Period
Office Sought: Senate Disbursel  Senate President State: CA District: 45	ment For: 2 Primary Other (spec	General			Contribution Memo Item
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IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(C		only 21b	one)	×	23	2	3 [	27
		Detailed	Summary Page		$\square$	28a	28b		28c	2	9  -	30b
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$\square$	NAME OF COMMITTEE (In Full)			_								
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (	Grou	p P	PAC)	)					
	Full Name (Last, First, Middle Initial) Larson for Congress						Date o					
	Mailing Address PO Box 261172						09	/	2			2017
	City Hartford	State CT	Zip Code 06126-1172				FEC I	dentif	icatio	ח Num	oer	
	Purpose of Disbursement Contribution			C	)11		С	1.00	33014	-		
	Candidate Name			Cat	eqor	//				ID:41 Disbur		98 nt this Period
	Larson, John, B., Rep.,				ype	<i>"</i>	7 1110 1		Luon	Biobai	Connor	
		ment For: 2							,		-	1000.00
	President	Primary Other (spec	General				- T			Contrib	ution	
	State: CT District: 01		Convention201	18			M	emo	ltem			
	Full Name (Last, First, Middle Initial)											
Β.	Larson for Congress						Date of	of Dis	burse	ment		
	Mailing Address PO Box 261172						M 09	/	2	D / 8		2017
	City	State CT	Zip Code				FEC le	dentif	icatio	n Num	oer	
	Hartford Purpose of Disbursement		06126-1172	_	_		С	C00	33014	12		-
	Contribution			(	011			1		'- ID : 41	34670	9
	Candidate Name				egory	//						nt this Period
	Larson, John, B., Rep., Office Sought: x House Disburse	ement For:	004.0	Т	уре							1500.00
	Office Sought: X House Disburse	Primary	2018 General						,	Contrik		1300.00
	President	Other (spec						emo		Contin	Julion	
	State: CT District: 01	1	Convention207	18			IVI	emo	item			
C.	Full Name (Last, First, Middle Initial) Bill Nelson For U S Senate						Date of	of Dis	burse	ment		
							M	1 /	D			Y Y Y
	Mailing Address 972 W Whitmire Drive						09		2	8		2017
	City Melbourne	State FL	Zip Code 32935				FEC I	dentif	icatio	n Num	oer	
	Purpose of Disbursement Contribution						С	COC	3440	51		
	Candidate Name			C	)11					ID : 4′		
	Nelson, Bill, , Mr.,				egory ype	//	Amour	nt of	Each	Disbur	semer	nt this Period
		ment For: 2	2018	<b>·</b>		-						5000.00
	x Senate	Primary	x General						7	Contril	oution	
	State: FL District:	Other (spec	cify) 🔻				М	emo	ltem			
	State: FL District:						_	_	_		_	
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т	OTAL This Period (last page this line number only	/)							,		,	

	HEDULE B (FEC Form 3X)		visito achadula(s)				IUMBER:			P	AGE	279 OF 318
ITE	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(c		only ( 21b   28a	one) 22 28b		23 28c	26 29		27 30b
or f	v information copied from such Reports and State for commercial purposes, other than using the na											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Grou	рF	PAC)						
	Full Name (Last, First, Middle Initial) Stephanie Murphy For Congress						Date of	Dist	ourse		Y	YY
	Mailing Address PO Box 205		1				09		28	3	2	017
1	City Winter Park Purpose of Disbursement	State FL	Zip Code 32790				FEC Ide	-	-		er	-
	Contribution			0	11		Tra	nsac		ID : 413		
	Murphy, Stephanie, , Rep.,	ment For: 2	2018		egory ype	//	Amount	of E	Each	Disburs		t this Period 2500.00
	State: FL District: 07	Primary Other (spec	General cify) ▼				Me	mo It		Contribu	tion	
В.	Full Name (Last, First, Middle Initial)         David Scott For Congress         Mailing Address       P.O. Box 960821						Date of	Dist	ourse	D /		017
	City	State GA	Zip Code 30296		FEC Iden			entific				
1	Purpose of Disbursement Contribution Candidate Name	-			)11		Tra	nsac		ID : 413		
Ō	Scott, David, Albert, Rep.,	ment For: 2 Primary Other (spec	X General		egory ype	//		mo It	(	Disburse		t this Period
	Full Name (Last, First, Middle Initial) Rodney for Congress						Date of	Dist				
·	Mailing Address PO Box 344						м м 09	/	28			017
-	City Taylorville Purpose of Disbursement Contribution	State IL	Zip Code 62568-0344	0	11		•	C005	52194	8	1	
	Candidate Name Davis, Rodney, L., Rep.,	Rodney, L., Rep.,					Transaction ID : 41346804 Amount of Each Disbursement this Period					
	Senate President	Primary Other (spec	General				Me	mo It		Contribu		2500.00
รเ	State: IL District: 13 JBTOTAL of Disbursements This Page (optional). DTAL This Period (last page this line number only									· · ·		0000.00

S	CHEDULE B (FEC Form 3X)			F	OR LINI	E NUMBER: PAGE 280 OF 318
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		heck or	nly one)
			Summary Page		288	
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or us ress of any politic	ed by al con	any per nmittee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)			<b>-</b>		
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (	rouز	р РА	
Α.	Full Name (Last, First, Middle Initial) Volunteers for Shimkus					Date of Disbursement
	Mailing Address PO Box 661					09 28 2017
	City Collinsville	State IL	Zip Code 62234-0661			FEC Identification Number
	Purpose of Disbursement Contribution	IL	02234-0001	C	)11	C C00258855
	Candidate Name			Cate	egory/	Transaction ID : 41346805 Amount of Each Disbursement this Period
	Shimkus, John, M., Rep.,				ype	
	Office Sought:  House Disburse Senate President State: IL District: 15	ement For: Primary Other (spe	General			Contribution Memo Item
	Full Name (Last, First, Middle Initial)					
В.	Richmond For Congress					Date of Disbursement
	Mailing Address 1631 Elysian Fields Suite 150					09 28 2017
	City New Orleans	State LA	Zip Code 70126			FEC Identification Number
	Purpose of Disbursement Contribution			(	)11	C C00451336
	Candidate Name				egory/	Amount of Each Disbursement this Period
	Richmond, Cedric, , Rep., Office Sought: x House Disburse	ement For:	2018	T	ype	2000.00
	Senate X	1	General			Contribution
	State: LA District: 02	Other (spe	cify)			Memo Item
C.	Full Name (Last, First, Middle Initial) Joe Kennedy For Congress					Date of Disbursement
	Mailing Address PO Box 590464					09 / 28 / Y Y Y Y 09 / 28
	City Newton	State MA	Zip Code 02459			FEC Identification Number
	Purpose of Disbursement Contribution				)11	C C00512970 Transaction ID : 41346818
	Kennedy, Joseph, , Rep.,				egory/ ype	Amount of Each Disbursement this Period
		ement For:				1000.00
	State: MA District: 04	Primary Other (spe	General cify) ▼			Contribution Memo Item
Г						
⊢	<b>UBTOTAL</b> of Disbursements This Page (optional).					8000.00
T	OTAL This Period (last page this line number only	/)			••••• ►	, ,

	CHEDULE B (FEC Form 3X)		visito polocidado			NUMBER: PAGE 281 OF 318
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(ch	neck onl 21b 28a	22 🗶 23 🗌 26 🗌 27
	ny information copied from such Reports and State for commercial purposes, other than using the na					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Grou	p PAC	C)
Α.	Full Name (Last, First, Middle Initial) Mike Bishop For Congress Mailing Address PO Box 1148	Congress				Date of Disbursement
	City	State	Zip Code			FEC Identification Number
	Brighton Purpose of Disbursement Contribution	MI	48116	0,	11	C C00561001 Transaction ID : 41346819
	Candidate Name Bishop, Michael, , ,				gory/ pe	Amount of Each Disbursement this Period
	Office Sought:  House Senate President State: MI District: 08 Disburse	ement For: 2 Primary Other (spec	General			Contribution Memo Item
в.	Full Name (Last, First, Middle Initial) Mike Bishop For Congress					Date of Disbursement
	Mailing Address PO Box 1148	Ctata	Zin Codo			09 28 2017
	City Brighton Purpose of Disbursement Contribution Candidate Name	State MI	Zip Code 48116 011 Category/			FEC Identification Number C C00561001 Transaction ID : 41346821 Amount of Each Disbursement this Period
	Senate X President	ment For: 2 Primary Other (spec	General		pe	Contribution
С.	State:       MI       District:       08         Full Name (Last, First, Middle Initial)         Moolenaar For Congress					Date of Disbursement
	Mailing Address 5915 Eastman Avenue Suite 100					09 28 2017
	City Midland	State MI	Zip Code 48640			FEC Identification Number
	Purpose of Disbursement Contribution Candidate Name Moolenaar, John, , ,			Cate	11 gory/ pe	C C00561530 Transaction ID : 41346833 Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President State: MI District: 04	ment For: 2 Primary Other (spec	General			Contribution Memo Item
s	<b>UBTOTAL</b> of Disbursements This Page (optional).				••••• •	7500.00
т	<b>OTAL</b> This Period (last page this line number only	/)			···· ►	, ,

SC	CHEDULE B (FEC Form 3X)			FC	OR L	INE I	NUMBER	:			F	PAGE	282 O	F 318
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(C		-	one)		22		7 00			
			Summary Page			21b 28a	22 28b	×	23 28c	$\vdash$	26	-	27 30b	
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso	on for the		ose		solici		contributi	
$\setminus$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth C	Grou	p P	AC	)							
	Full Name (Last, First, Middle Initial) Peters For Michigan						Date of Disbursement					Y		
	Mailing Address PO Box 32072						09	ĺ		28			2017	·
	City	State	Zip Code				FEC Identification Number							
	Detroit Purpose of Disbursement Contribution	MI	48244	0	)11		С	C00	4378	89				
	Candidate Name								ction ⊑ach					oriod
	Peters, Gary, , Sen.,				egory ype	′	Amoun	. 01	∟acn	DIS	sours	enie	nt this P	enou
		ement For: Primary	🗶 General				<u>_</u>			Со	ntribu	ution	1000.00	)
	State: MI District:	Other (spe	y v (ing) v				Me	emo	Item					
_	Full Name (Last, First, Middle Initial)													
	Walberg for Congress						Date o		burse		ent /	Y	YYY	Y
	Mailing Address PO Box 1362						09		2	28			2017	
	City Jackson	State MI	Zip Code 49204-1362				FEC Id	entif	icatio	n N	lumb	er		
	Purpose of Disbursement Contribution		10204 1002	C	)11		•		39072	-				
	Candidate Name				egory	/	Transaction ID : 41346868 Amount of Each Disbursement this Period					eriod		
	Walberg, Timothy, Lee, Rep.,				ype	<u> </u>								
		ement For:							_	_			2500.00	
	Senate President	Primary Other (spe	General							Co	ntrib	ution		
	State: MI District: 07		, on y )				Me	emo	Item					
<u>с</u> .	Full Name (Last, First, Middle Initial)						Date o	f Dis	burse	eme	ent			
							MM	/	D		1		YYY	Y
	Mailing Address PO Box 998	I					09		2	28			2017	
	City Anoka	State MN	Zip Code 55303				FEC Id	entif	icatio	n N	lumb	er		
	Purpose of Disbursement Contribution	<b>_</b>		0	)11	7	C		5457 otion	_		2460	60	
	Candidate Name Emmer, Thomas, , , Jr			Cate	egory ype	/			<b>ction</b> Each				69 nt this P	eriod
		ement For:	2018										2500.00	)
	Senate President	Primary Other (spe	General ecify)				Ме	emo	Item	Со	ntrib	ution		
_	State: MN District: 06									_				
s	UBTOTAL of Disbursements This Page (optional)								,		,		6000.0	0
Т	OTAL This Period (last page this line number only	/)							,		,			

	HEDULE B (FEC Form 3X)						NUMBER: PAGE 283 OF 318
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c		only 21b	one) 22 🗶 23 26 27
		Detailed	Summary Page		$\square$	28a	28b 28c 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the na						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_			
$\square$	UnitedHealth Group Incorporated	PAC (Ur	itedHealth (	Grou	p F	PAC)	
	Full Name (Last, First, Middle Initial) Virginia Foxx For Congress						Date of Disbursement
	Mailing Address PO Box 2676						09 / D D / Y Y Y Y Y 28 2017
	City	State	Zip Code				FEC Identification Number
	Boone	NC	28607				
	Purpose of Disbursement Contribution			0	)11	1	C C00386748
	Candidate Name						Transaction ID: 41346870 Amount of Each Disbursement this Period
	Foxx, Virginia, , Rep.,				egory ype	y/	Amount of Lach Disbursement this Feliou
	Office Sought: 🗶 House Disburse	ement For:					2500.00
	Senate x	-	General				Contribution
	State: NC District: 05	Other (spe	ciiy) 🔻				Memo Item
	Full Name (Last, First, Middle Initial)						
Β.	Cramer For Congress						Date of Disbursement
	Mailing Address DO D. 200						
	Mailing Address PO Box 396						09 28 2017
	City	State ND	Zip Code				FEC Identification Number
	Bismarck Purpose of Disbursement	ND	58502	_	_		C C00504704
	Contribution			C	011		Transaction ID : 41346872
	Candidate Name			Cate	egory	y/	Amount of Each Disbursement this Period
	Cramer, Kevin, , Rep.,			Ţ	ype		2500.00
		ement For:	2018 General				
	President	Other (spe					Contribution
	State: ND District: 00						Memo Item
	Full Name (Last, First, Middle Initial)						Date of Disburgement
<b>с</b> .	Kuster For Congress, Inc						Date of Disbursement
	Mailing Address PO Box 1498						09 28 2017
	City	State	Zip Code				FEC Identification Number
	Concord Purpose of Disbursement	NH	03302	_			C C00462861
	Contribution			0	11		Transaction ID : 41346873
	Candidate Name			Cate	egory	y/	Amount of Each Disbursement this Period
	Kuster, Ann, , Rep.,			Ţ	ype		2500.00
	Office Sought: X House Disburse Senate	ement For: ;					2500.00
	President	Primary Other (spe	cify) ▼				Contribution
	State: NH District: 02		•••••				Memo Item
Г							
s	JBTOTAL of Disbursements This Page (optional).						7500.00
Т	OTAL This Period (last page this line number only	/)					

S	CHEDULE B (FEC Form 3X)			F	OR I		NUMBER: PAGE 284 OF 318
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c	heck	k only 21b	one) 22 🗶 23 26 27
		Detailed	Summary Page			28a	28b 28c 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the na						
$\setminus$	NAME OF COMMITTEE (In Full)					_	
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (	Grou	p F	PAC	)
Α.	Full Name (Last, First, Middle Initial) Crowley for Congress						Date of Disbursement
	Mailing Address 84-56 Grand Avenue						09 28 2017
	City Elmhurst	State NY	Zip Code 11373				FEC Identification Number
	Purpose of Disbursement Contribution		11373	C	011		C C00338954
	Candidate Name			Cate	eaor	· /	Transaction ID: 41346875 Amount of Each Disbursement this Period
	Crowley, Joseph, , Rep.,				ype	y,	
	Office Sought:     x     House     Disburse       Senate     President     x	ment For: 2 Primary Other (spec	General				Contribution Memo Item
	State: NY District: 14	1					
в.	Full Name (Last, First, Middle Initial) Faso For Congress Mailing Address PO Box 448						Date of Disbursement
			1				09 20 2017
	City Kinderhook	State NY	Zip Code 12106				FEC Identification Number
	Purpose of Disbursement Contribution			C	011		C C00580415 Transaction ID : 41346880
	Candidate Name Faso, John, , ,			Cate	egor ype	ry/	Amount of Each Disbursement this Period
		ment For:	2018		yhe		2500.00
	Senate <b>x</b>		General				Contribution
	State: NY District: 19	Other (spec	cify)				Memo Item
C.	Full Name (Last, First, Middle Initial) Katko For Congress						Date of Disbursement
	Mailing Address 228 S Washington St Ste 115						09 28 2017
	City Alexandria	State VA	Zip Code 22314				FEC Identification Number
	Purpose of Disbursement Contribution			0	)11		C C00556365 Transaction ID : 41346887
	Candidate Name Katko, John, , Rep.,				egor ype	ry/	Amount of Each Disbursement this Period
		ment For: 2					2500.00
	State: NY District: 21	Primary Other (spec	General cify) ▼				Contribution Memo Item
	State: NY District: 24						
s	UBTOTAL of Disbursements This Page (optional).						7000.00
т	OTAL This Period (last page this line number only	/)				►	, ,

SCHEDULE B (FEC Form 3X)		arata pahadula/-				NUMBER: PAGE 285 OF 318
ITEMIZED DISBURSEMENTS	for each	earate schedule(s) category of the Summary Page	(C		21b	y one) 22 X 23 26 27 23 20 20 20
Any information copied from such Reports and Sta or for commercial purposes, other than using the				any		
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorporate	d PAC (U	nitedHealth	Grou	рР	AC	2)
Full Name (Last, First, Middle Initial) A. Johnson for Congress						Date of Disbursement
Mailing Address PO Box 906						09 28 2017
City Marietta	State OH	Zip Code 45750				FEC Identification Number
Purpose of Disbursement Contribution			0	)11	٦	C C00476820 Transaction ID : 41346888
Candidate Name				egory	/	Amount of Each Disbursement this Period
Johnson, William, Leslie, Rep., Office Sought:	rsement For:	2018	Ty	ype		2500.00
Senate President	Primary Other (spe	General				Contribution Memo Item
State: OH District: 06 Full Name (Last, First, Middle Initial)						
B. Friends Of Jim Inhofe Committee	е					Date of Disbursement
Mailing Address PO Box 13300						09 28 2017
City Oklahoma City	State OK	Zip Code 73113				FEC Identification Number
Purpose of Disbursement Contribution			C	)11	1	C C00207993 Transaction ID : 41346890
Candidate Name				egory	/	Amount of Each Disbursement this Period
Inhofe, James, M., Sen., Office Sought: House Disbut	rsement For:	2020	Iy	ype		2000.00
	× Primary	General				Contribution
State: OK District:	Other (spe	ecify)				Memo Item
Full Name (Last, First, Middle Initial) C. Bonamici For Congress						Date of Disbursement
Mailing Address PO Box 1632						09 / D D / Y Y Y Y 28 2017
City Beaverton	State OR	Zip Code 97075				FEC Identification Number
Purpose of Disbursement Contribution			0	)11	٦	C C00500421
Candidate Name Bonamici, Suzanne, , Rep.,				egory ype	/	Transaction ID : 41346891 Amount of Each Disbursement this Period
· · · · · · · · · · · · · · · · · · ·	rsement For:	2018		<u> </u>		2500.00
Senate President	Primary     Other (spe	General				Contribution Memo Item
State: OR District: 01						
SUBTOTAL of Disbursements This Page (optiona	al)					7000.00
TOTAL This Period (last page this line number o	nly)					

SCHEDULE B (FEC Form 3X)	11				NUMBER: PAGE 286 OF 318
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(che	eck only 21b 28a	one)     22     X     23     26     27       28b     28c     29     30b
Any information copied from such Reports and State or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth 0	Group	PAC	)
Full Name (Last, First, Middle Initial) A. Ryan Costello For Congress					Date of Disbursement
Mailing Address PO Box 3154					09 28 2017
City West Chester Purpose of Disbursement	State PA	Zip Code 19381			FEC Identification Number
Contribution			01	- H	C C00554899 Transaction ID : 41346892 Amount of Each Disbursement this Period
Costello, Ryan, , , Office Sought:	ment For: 2 Primary Other (spec	General	Categ Typ		Contribution Memo Item
Full Name (Last, First, Middle Initial)         B. Tim Murphy For Congress         Mailing Address       PO Box 24551					Date of Disbursement
Pittsburgh Purpose of Disbursement Contribution Candidate Name	State PA	Zip Code 15234	01 Categ	jory/	FEC Identification Number C C00372201 Transaction ID : 41346894 Amount of Each Disbursement this Period
	ment For: 2 Primary Other (spec	General	Тур		5000.00 Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Friends for Chris Stewart, Inc.					Date of Disbursement
Mailing Address PO Box 540370					09 28 2017
City North Salt Lake Purpose of Disbursement Contribution Candidate Name Stewart, Chris, , Rep.,	State UT	Zip Code 84054	01 <sup>-</sup> Categ Typ	jory/	FEC Identification Number C C00506931 Transaction ID : 41346895 Amount of Each Disbursement this Period
· · · · · · · · · · · · · · · · · · ·	ment For: 2 Primary Other (spec	General			Contribution Memo Item
SUBTOTAL of Disbursements This Page (optional)					12500.00

SCHEDULE B (FEC Form 3X)		parate schedule(s)			NE NUMBER: PAGE 287 OF 318
ITEMIZED DISBURSEMENTS	for each	a category of the I Summary Page	(cł	2	nly one) 1b 22 <b>X</b> 23 26 27 3a 28b 28c 29 30b
Any information copied from such Reports and Stat or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (U	nitedHealth (	Grou	p PA	AC)
Full Name (Last, First, Middle Initial) A. Friends of Mark Warner					Date of Disbursement
Mailing Address 201 North Union Street, Suite 30	1				09 28 2017
City Alexandria Purpose of Disbursement	State VA	Zip Code 22314		FEC Identification Number	
Contribution			1.1.1	11	C C00438713 Transaction ID : 41346896
Warner, Mark, Robert, Sen., Office Sought: House Disburs	ement For:	2020 X General		egory/ /pe	Amount of Each Disbursement this Period
State: VA District:	Other (spe	·			Contribution Memo Item
Full Name (Last, First, Middle Initial)         B. Duffy For Wisconsin         Mailing Address       PO Box 538					Date of Disbursement
City Wausau Purpose of Disbursement	State WI	Zip Code 54402	_	_	FEC Identification Number
Senate	ement For:	General	Cate	11 gory/ vpe	Transaction ID : 41346897 Amount of Each Disbursement this Period 2500.00 Contribution
State: WI District: 07	Other (spe	ecity)			Memo Item
Full Name (Last, First, Middle Initial) C. Duffy For Wisconsin					Date of Disbursement
Mailing Address PO Box 538					09 28 2017
City Wausau Purpose of Disbursement Contribution	State WI	Zip Code 54402	0	11	FEC Identification Number C C00464339 Transaction ID : 41346898
Candidate Name Duffy, Sean, , Rep., Office Sought:	ement For:	2018		egory/ /pe	Amount of Each Disbursement this Period
State: WI District: 07	Primary Other (spe	<b>x</b> General			Contribution Memo Item
SUBTOTAL of Disbursements This Page (optional)	)			•	6000.00
TOTAL This Period (last page this line number on	ly)			Þ	, ,

S	CHEDULE B (FEC Form 3X)			F	OR I	.INE	NUMBER: PAGE 288	OF 318
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the			only	y one)	
			Summary Page		$\left  - \right $	21b 28a	22 <b>X</b> 23 26 27 28b 28c 29 30b	
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso	son for the purpose of soliciting contribu	
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_		<b>-</b> \	
Ľ	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (	Grou	p F	'AC	<i>)</i>	
A.	Full Name (Last, First, Middle Initial) Mike Gallagher For Wisconsin						Date of Disbursement	Y
	Mailing Address PO Box 1027						09 28 2017	
	City Green Bay	State WI	Zip Code 54305				FEC Identification Number	
	Purpose of Disbursement		54305	_		_	C C00610212	
	Contribution			C	)11		Transaction ID : 41346901	
	Candidate Name			Cat	egory	//	Amount of Each Disbursement this	Period
	Gallagher, Michael, , ,				ype		0500	00
		ement For:	2018 General				2500.	00
	President	Other (spe					Contribution	
	State: WI District: 08	(opo	J) <del>T</del>				Memo Item	
	Full Name (Last, First, Middle Initial)							
Β.	House Conservatives Fund						Date of Disbursement	Ý
	Mailing Address 228 South Washington Street Suite 115						09 28 2017	
	City Alexandria	State VA	Zip Code 22314				FEC Identification Number	
	Purpose of Disbursement Contribution				)11		C C00326439	
	Candidate Name			1.00	egory		Transaction ID : 41346903 Amount of Each Disbursement this	Period
	House Conservatives Fund				ype	″	Anount of Lach Disbursement this	Tenou
		ement For:					2500.	00
	Senate	Primary	General				Contribution	
	State: District:	Other (spe	спу)				Memo Item	
с С	Full Name (Last, First, Middle Initial) New Democrat Coalition PAC						Date of Disbursement	
•								Y
	Mailing Address 700 13th Street NW, Suite 600						09 28 2017	_
	City	State	Zip Code				FEC Identification Number	
	Washington Purpose of Disbursement	DC	20005	_			C C00409730	
	Contribution			C	)11			
	Candidate Name		Cat	egory	//	Amount of Each Disbursement this	Period	
	New Democrat Coalition PAC				ype			
		ement For:	Concert				5000.	00
	President	Primary Other (spe	cify)				Contribution	
	State: District:		city) 🔻				Memo Item	
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s	UBTOTAL of Disbursements This Page (optional).						10000	.00
т	OTAL This Period (last page this line number only	/)						

SCHEDULE B (FEC Form 3X)			FC	DR L	INE N	IUMBER	:			P	AGE	289 OF 3	18
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the				only								
		Summary Page			21b 28a	22 28b	×	23 28c		26	$\vdash$	27 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na				any	perso	n for the		oose (		oliciti		ntributions	
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorporated	PAC (Ur	itedHealth G	Grou	p F	PAC)								
Full Name (Last, First, Middle Initial) A. Tuesday Group PAC				Date of Disbursement									
Mailing Address 610 S. BOULEVARD								09 / 28 / Y Y Y Y 2017					
City	State FL	Zip Code				FEC lo	dentif	icatio	n N	umbe	er		
Tampa Purpose of Disbursement Contribution		L 33606			011			)4330	60				
Candidate Name			Cate					Each				<b>)</b> this Perioc	4
Tuesday Group PAC				/pe	″	Anou		Lach	DIS	ibul 30			
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼							Cor	ntribu	-	5000.00	1
State: District:		., .				IVI	emo	item					
Full Name (Last, First, Middle Initial) B. GSD PAC Mailing Address PO Box 25879					Date of 09		D		nt /		017		
										_			
City Tempe	State AZ	Zip Code 85285				FEC Identification Number							
Purpose of Disbursement Contribution		0	011	٦	C C00571182 Transaction ID : 41346912								
Candidate Name			Category/ Type									this Period	ł
GSD PAC Office Sought: House Disburse	ement For:											5000.00	1.
Senate	Primary	General						7	Cor	ntribu	1		1
State: District:	Other (spe	cify)				M	emo						
Full Name (Last, First, Middle Initial) C. More Conservatives PAC						Date of Disbursement							
Mailing Address 228 S Washington Street Suite 115			09 / D						28 / Y Y Y Y 2017				
City Alexandria	State VA	Zip Code 22314				FEC lo	dentif	icatio	n N	umbe	er	_	
Purpose of Disbursement Contribution Candidate Name							ansa	05401	ID	-			
More Conservatives PAC	Cated					Amour	it of	∟ach	DIS	ourse	ement	this Perioc	1
Office Sought: House Disburs											2	2500.00	
Senate						_			Co	ntribu	tion		
State: District:	Other (spe	ciiy) ▼				M	emo	Item					
SUBTOTAL of Disbursements This Page (optional)								,		-,	1	2500.00	]

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SCHEDULE B (FEC Form 3X)			FC	R LINF	E NUMBER: PAGE 290 OF 31		
ITEMIZED DISBURSEMENTS	Use sepa for each		neck on	y one)			
		Summary Page		21b 28a			
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporated	PAC (UN	ItedHealth G	roup		C)		
Full Name (Last, First, Middle Initial) A. Promoting Our Republican Team I			Date of Disbursement				
Mailing Address 8331 Little Harbor Drive	1			09 28 2017			
City Cincinnati	State OH	Zip Code 45244-2768			FEC Identification Number		
Purpose of Disbursement Contribution		43244-2700	0'	11	C C00440032 Transaction ID : 41346914		
Candidate Name				gory/	Amount of Each Disbursement this Period		
Promoting Our Republican Team F	PAC ment For:		Ту	ре	5000.00		
State: District:	Primary Other (spec	General cify) ▼			Contribution Memo Item		
Full Name (Last, First, Middle Initial)							
B					Date of Disbursement		
Mailing Address							
City	State	Zip Code			FEC Identification Number		
Purpose of Disbursement				-	С		
Candidate Name			Category/ Type		Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ment For: Primary	General					
State: District:	Other (spec	лу)			Memo Item		
Full Name (Last, First, Middle Initial)					Date of Disbursement		
Mailing Address							
City	State	Zip Code			FEC Identification Number		
Purpose of Disbursement				C			
Candidate Name			gory/ pe	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For: Primary	General			1 1 9 1 1 9 1 1 9		
State: District:	Other (spec	cify) 🔻			Memo Item		
SUBTOTAL of Disbursements This Page (optional).				►	5000.00		
TOTAL This Period (last page this line number only	′)			▶	133000.00		

SCHEDULE B (FEC Form 3X)			FOR LIN	E NUMBER: PAGE 291 OF 318			
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(check o				
	Detailed	Summary Page	× 28				
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporated	PAC (Ur	integhealth G	roup PA				
Full Name (Last, First, Middle Initial) A. BETCHLEY, ROBERT, , ,	Date of Disbursement						
Mailing Address 3371 EMERALD VALLEY DRIVE	09 / 18 / Y Y Y Y 2017						
City ONALASKA	State WI	Zip Code 54650-8746		FEC Identification Number			
Purpose of Disbursement Refund of PAC contribution		54650-8746	010	C			
Candidate Name			Category/ Type	Transaction ID : 41315718 Amount of Each Disbursement this Period			
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General cify) ▼		Refund of PAC contribution			
State: District:	_						
Full Name (Last, First, Middle Initial) B.				Date of Disbursement			
Mailing Address		1					
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement				С			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General					
State: District:	Other (spe	city)		Memo Item			
Full Name (Last, First, Middle Initial) C.				Date of Disbursement			
Mailing Address							
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement		С					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General					
State: District:		ony) v		Memo Item			
SUBTOTAL of Disbursements This Page (optional)				100.00			
TOTAL This Period (last page this line number onl	y)		••••••	100.00			

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 292 OF 318		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a			
Any information copied from such Reports and Sta or for commercial purposes, other than using the r						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (Ur	nitedHealth G	Group PAC	)		
Full Name (Last, First, Middle Initial) A. Asa for Governor 2018 Mailing Address PO Box 22467				Date of Disbursement 09 / 05 / YYYYY 2017		
City Little Rock	State AR	Zip Code 72221-2467		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name			011 Category/	C Transaction ID : 41279113 Amount of Each Disbursement this Period		
Hutchinson, Asa, , Gov., Office Sought: House Disbur Senate President State: District:	sement For: Primary Other (spe	General ecify) ▼	Туре	2700.00 Contribution Memo Item		
Full Name (Last, First, Middle Initial)         B. Jason Rapert for Senate         Mailing Address       PO Box 10388		Date of Disbursement				
	State AR sement For:	Zip Code 72034	011 Category/ Type	FEC Identification Number C Transaction ID : 41279114 Amount of Each Disbursement this Period 500.00		
Senate President State: District:	Primary Other (spe	cify)		Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. Brian Calley for Michigan Mailing Address PO Box 16173				Date of Disbursement		
City Lansing Purpose of Disbursement	Lansing MI 48901					
Contribution Candidate Name Calley, Brian, , ,		011 Category/ Type	<b>Transaction ID : 41279203</b> Amount of Each Disbursement this Period			
Office Sought: House Disbur Senate President State: District:	sement For: Primary Other (spe	General ecify) ▼		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optiona TOTAL This Period (last page this line number or				5200.00		

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 293 OF 318			
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	y one) 22 23 26 27 28b 28c <b>x</b> 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ments may i me and addi	not be sold or use ress of any politica	d by any pers al committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	iitedHealth G	iroup PAC	2)			
Full Name (Last, First, Middle Initial) A. Committee to Elect Dan Lauwers				Date of Disbursement			
Mailing Address 12401 Speaker Road		1		09 05 2017			
City Brockway Purpose of Disbursement	State MI	Zip Code 48097		FEC Identification Number			
Contribution Candidate Name			011 Category/	Transaction ID : 41279204 Amount of Each Disbursement this Period			
Lauwers, Dan, , MI Rep.,         Office Sought:       House         Senate         President         State:       District:	ment For: Primary Other (spec	General cify) ▼	Туре	Contribution Memo Item			
Full Name (Last, First, Middle Initial) B. Committee to Elect Mike Shirkey S Mailing Address 11757 Sutfin Road		Date of Disbursement					
City Clarklake Purpose of Disbursement Contribution	011	FEC Identification Number					
Candidate Name Shirkey, Mike, , , Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General Cify)	Category/ Type	Transaction ID : 41279205 Amount of Each Disbursement this Period 500.00 Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. Committee to Elect Peter MacGree	gor for S	tate Senate		Date of Disbursement			
Mailing Address 12759 W Greenfield				09 05 2017			
City Grand Ledge Purpose of Disbursement Contribution Candidate Name	State MI	Zip Code 48837	011 Category/	FEC Identification Number C Transaction ID : 41279206 Amount of Each Disbursement this Period			
MacGregor, Peter, , MI Sen., Office Sought: House Disburser Senate President District:	ment For: Primary Other (spec	General cify) ▼	Туре	Contribution Memo Item			
SUBTOTAL of Disbursements This Page (optional)			F	1500.00			

SCHEDULE B (FEC Form 3X)			F	OR I	INE	NUMBER:	PA	GE 294 OF 318		
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the		heck	only	one)				
		Summary Page			21b 28a		26 8c <b>x</b> 29	27 30b		
Any information panied from such Denote and Other		not be cold as as					~			
Any information copied from such Reports and Sta or for commercial purposes, other than using the n										
		., <u></u>	~	_		<b>`</b>				
UnitedHealth Group Incorporated	I PAC (U	nitedHealth (	rou	ip P		)				
Full Name (Last, First, Middle Initial) A. Committee to Elect Rob VerHeule	20					Date of Disb	ursement			
	311							Y Y Y Y		
Mailing Address 4167 Imperial Drive						09 05 2017				
City	State	Zip Code				FEC Identification Number				
Walker Purpose of Disbursement	MI	49534				0				
Contribution			C	011		С				
Candidate Name				_			t <b>ion ID : 412</b> ach Disburse	79207 ment this Period		
VerHeulen, Robert, J., MI Rep.,				egory ype	"					
	ement For:							250.00		
Senate	Primary	General				,	Contribut	ion		
President	Other (spe	ecify) 🔻				Memo Ite				
State: District:										
Full Name (Last, First, Middle Initial) B. Dave Hildenbrand for State Sena	to					Date of Disb	ursement			
Mailing Address PO Box 1075	PO Box 1075					09 05 2017				
City	State	Zip Code 49501				FEC Identific	ation Numbe	r		
Grand Rapids Purpose of Disbursement										
Contribution			011			С				
Candidate Name			la de la compañía de		./	Transaction ID : 41279208				
Hildenbrand, Dave, , MI Sen.,			Category/ Type			Amount of Each Disbursement this Period				
	ement For:			,,				500.00		
Senate	Primary	General					Contribut	ion		
President	Other (spe	ecify)				Memo Ite	em			
State: District:										
Full Name (Last, First, Middle Initial)						Date of Disb	urcomont			
c. Dave Robertson for State Senate										
Mailing Address PO Box 181						M M / 09	05	2017		
City	State	Zip Code								
Grand Blanc	MI	48480				FEC Identific	ation Numbe	r		
Purpose of Disbursement			_	_		С				
Contribution	ibution late Name Ca						tion ID : 412	79209		
Candidate Name					//	Transaction ID: 41279209 Amount of Each Disbursement this Period				
	Senate Primary General			ype				500.00		
						Contribution				
President										
State: District:		voliy) ▼				Memo Ite	em			
SUBTOTAL of Disbursements This Page (optional	)							1250.00		
TOTAL This Period (last page this line number on	ly)					,	,			

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 295 OF 318
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c <b>x</b> 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Froup PAC	)
Full Name (Last, First, Middle Initial) A. Friends of Jim Tedder			Date of Disbursement	
Mailing Address 4900 Lakeview Blvd				09 05 2017
City Clarkston	State MI	Zip Code 48348		FEC Identification Number
Purpose of Disbursement Contribution			011	C Transaction ID : 41279210
Candidate Name Tedder, Jim, , ,			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼		Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Jim Marleau for State Senate Mailing Address 3181 Sandoval		Date of Disbursement		
City	State	Zip Code		
Lake Orion Purpose of Disbursement Contribution	MI 48360			FEC Identification Number C Transaction ID : 41279211
Marleau, James, , MI Sen.,	ment For: Primary Other (spec	General	Category/ Type	Amount of Each Disbursement this Period 500.00 Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Jim Stamas for State Senate				Date of Disbursement
Mailing Address 5915 Eastman Ave Suite 100				09 05 7 Y Y Y Y 2017
City Midland Purpose of Disbursement Contribution	State MI	011	FEC Identification Number	
Candidate Name Stamas, Jim, , MI Sen., Office Sought: House Disburse	ment For:	Category/ Type	Transaction ID : 41281356 Amount of Each Disbursement this Period 600.00	
Senate President State: District:	Primary Other (spe	General cify) ▼		Contribution Memo Item
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only				1600.00

SCHEDULE B (FEC Form 3X)			FC	RLINF	NUMBER: PAGE 296 OF 318	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	-	21b	ly one) 22 23 26 27	
Any information copied from such Reports and State or for commercial purposes, other than using the nat						
NAME OF COMMITTEE (In Full)	PAC (Un	nitedHealth G	frou		C)	
Full Name (Last, First, Middle Initial)						
A. Joe Hune for State Senate					Date of Disbursement	
Mailing Address 4849 Hogback Rd.					09 05 2017	
City Fowlerville	State MI	Zip Code 48836			FEC Identification Number	
Purpose of Disbursement Contribution			0,	11	C Transaction ID : 41281357	
Candidate Name Hune, Joe, , MI Sen.,				gory/	Amount of Each Disbursement this Period	
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼		pe	Contribution Memo Item	
State:       District:         Full Name (Last, First, Middle Initial)         B. John Proos for State Senate         Mailing Address       PO Box 271					Date of Disbursement	
City St. Joseph Purpose of Disbursement	FEC Identification Number					
Contribution Candidate Name Proos, John, , MI Sen., IV				11 gory/ pe	C Transaction ID : 41281358 Amount of Each Disbursement this Period	
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General Cify)			Contribution Memo Item	
Full Name (Last, First, Middle Initial) C. Lee Chatfield for State Representation	ative				Date of Disbursement	
Mailing Address 2481 US 31 North					09 05 2017	
City Levering	State MI	Zip Code 49755			FEC Identification Number	
Contribution Candidate Name Chatfield, Lee, , MI Rep.,	Candidate Name				C Transaction ID : 41281395 Amount of Each Disbursement this Period	
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼			Contribution Memo Item	
SUBTOTAL of Disbursements This Page (optional).				•••• •	1250.00	
TOTAL This Period (last page this line number only	′)			····· <b>Þ</b>	L , ,	

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 297 OF 318		
ITEMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	(check only 21b 28a			
Any information copied from such Reports and Staten or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (Un	itedHealth G	roup PAC	)		
Full Name (Last, First, Middle Initial) A. Margaret O'Brien for State Senate		Date of Disbursement				
Mailing Address PO Box 2318	Mailing Address PO Box 2318					
Portage	State MI	Zip Code 49081		FEC Identification Number		
Purpose of Disbursement Contribution			011	C Transaction ID : 41281397		
Candidate Name O'Brien, Margaret, , MI Sen., Office Sought: House Disbursen	nont For:		Category/ Type	Amount of Each Disbursement this Period 500.00		
Senate	Primary Other (spec	General tify) ▼		Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Dr Henry Vaupel for State Rep Cor Mailing Address PO Box 363		Date of Disbursement				
City S Fowlerville Purpose of Disbursement Contribution	State MI	Zip Code 48836	011	FEC Identification Number		
	nent For: Primary Other (spec	General	Category/ Type	Transaction ID : 41281415 Amount of Each Disbursement this Period 500.00 Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. House Republican Campaign Com	mittee			Date of Disbursement		
Mailing Address PO Box 15035				09 / D D / Y Y Y Y Y 05 / 2017		
City Lansing Purpose of Disbursement Contribution	State MI	Zip Code 48901	011	FEC Identification Number		
Candidate Name	Transaction ID : 41281673 Amount of Each Disbursement this Period					
	nent For: Primary Other (spec	General cify) ▼	Туре	Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				2125.00		

S	CHEDULE B (FEC Form 3X)	[		FOR	LINE I	NUMBER: PAGE 298 OF 318	
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(chec	k only 21b 28a	one) 22 23 26 27 28b 28c <b>x</b> 29 30b	
	y information copied from such Reports and State for commercial purposes, other than using the nar						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	iroup l	PAC	)	
Α.	Full Name (Last, First, Middle Initial) Senate Republican Campaign Cor Mailing Address P.O. Box 12023	nmittee				Date of Disbursement	
	City	State	Zip Code			FEC Identification Number	
	Lansing Purpose of Disbursement Contribution	MI	48901	011		C	
	Candidate Name			Catego Type		Transaction ID : 41281674 Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼			Contribution Memo Item	
в.	Full Name (Last, First, Middle Initial) Bill Schuette for Michigan		Date of Disbursement				
	Mailing Address PO Box 12337	09 18 2017					
	City Lansing Purpose of Disbursement Contribution	011	_	FEC Identification Number			
	Candidate Name Schuette, Bill, , , Office Sought: House Disburse	ment For:		Category/ Type		Transaction ID : 41315739 Amount of Each Disbursement this Period 2000.00	
	State: District:	Primary Other (spec	General cify)			Contribution Memo Item	
C.	Full Name (Last, First, Middle Initial) Bobby Guerra Campaign					Date of Disbursement	
	Mailing Address 10213 N. 10th Street					09 / D D / Y Y Y Y Y 2017	
	City McAllen Purpose of Disbursement	State TX	Zip Code 78504			FEC Identification Number	
	Contribution Candidate Name Guerra, Roberto, Bobby, TX Rep.,				ry/	<b>Transaction ID : 41315740</b> Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼			Contribution Memo Item	
s	UBTOTAL of Disbursements This Page (optional)				•	4125.00	
Т	OTAL This Period (last page this line number only	)				, ,	

S	CHEDULE B (FEC Form 3X)			FOR LINE				
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	rone) 22 23 26 27 28b 28c <b>x</b> 29 30b			
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may i me and addi	not be sold or use ress of any politic	ed by any perse al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
$\backslash$	NAME OF COMMITTEE (In Full)				,			
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group PAC	·)			
A.	Full Name (Last, First, Middle Initial) Brian Birdwell Campaign				Date of Disbursement			
	Mailing Address PO Box 1111				09 18 2017			
	City	State	Zip Code		FEC Identification Number			
	Granbury Purpose of Disbursement	ТХ	76048		0			
	Contribution			011	C			
	Candidate Name			Category/	Transaction ID : 41315741 Amount of Each Disbursement this Period			
	Birdwell, Brian, , TX Sen.,			Type				
		ement For:			1000.00			
	Senate	Primary Other (anal	General		Contribution			
	State: District:	Other (spec	city) 🔻		Memo Item			
_	Full Name (Last, First, Middle Initial)							
В.	Bryan Hughes Campaign				Date of Disbursement			
	Mailing Address PO Box 450		09 18 2017					
	City Mineola	State TX	Zip Code 75773		FEC Identification Number			
	Purpose of Disbursement Contribution	17	13113		С			
	Candidate Name			011	Transaction ID : 41315742			
	Hughes, Bryan, , TX Rep.,			Category/ Type	Amount of Each Disbursement this Period			
		ement For:		туре	1000.00			
	Senate	Primary	General		Contribution			
	President	Other (spec	cify)		Memo Item			
	State: District:	_						
C.	Full Name (Last, First, Middle Initial) Charles Perry Campaign				Date of Disbursement			
	Mailing Address P.O. Box 94806				09 / 18 / Y Y Y Y 2017			
	City	State TX	Zip Code		FEC Identification Number			
	Lubbock Purpose of Disbursement Contribution		79493		С			
	Candidate Name	011 Category/	Transaction ID : 41315743 Amount of Each Disbursement this Period					
	Perry, Charles, , TX Sen.,	mont Fam		Туре	1000.00			
	Office Sought: House Disburse Senate	ement For: Primary	General					
	President	Other (spec			Contribution			
	State: District:				Memo Item			
s	UBTOTAL of Disbursements This Page (optional).			••••••	3000.00			
Т	OTAL This Period (last page this line number only	/)		•••••	, ,			

SCHEDULE B (FEC Form 3X)			FC	DR L	NE	NUMBER: PAGE 300 OF 318			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			neck	only	y one)			
		Summary Page			21b 28a	22         23         26         27           28b         28c         x         29         30b			
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may me and add	not be sold or use ress of any politica	ed by a al com	any p	oerso	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)				_					
UnitedHealth Group Incorporated	PAC (Ur	itedHealth G	Fou	р Р.		;)			
Full Name (Last, First, Middle Initial) A. Chris Turner Campaign						Date of Disbursement			
Mailing Address PO Box 182093						09 / 18 / Y Y Y Y 2017			
City	State					FEC Identification Number			
Arlington Purpose of Disbursement	ТХ	76096				0			
Contribution			0	11	11	С			
Candidate Name			Cate	gory	,	Transaction ID : 41315744 Amount of Each Disbursement this Period			
Turner, Christopher, , TX Rep.,				/pe					
	ement For:					1000.00			
Senate President	Primary Other (spe	General				Contribution			
State: District:	Other (spe	City) 🔻				Memo Item			
Full Name (Last, First, Middle Initial)									
B. Cindy Burkett Campaign						Date of Disbursement			
Mailing Address 226 Magic Lane				09 18 2017					
City	State TX	Zip Code				FEC Identification Number			
Sunnyvale Purpose of Disbursement		75182			_	С			
Contribution			0	11		Transaction ID : 41315746			
Candidate Name			Category/			Amount of Each Disbursement this Period			
Burkett, Cindy, , TX Rep.,		Type							
	ment For:					1000.00			
Senate President	Primary Other (spe	General				Contribution			
State: District:		(ily)				Memo Item			
Full Name (Last, First, Middle Initial)						Data of Diaburgament			
c. Committee to Re-Elect Garnet Co	ieman					Date of Disbursement			
Mailing Address PO Box 88140									
City	State	Zip Code				FEC Identification Number			
Houston Purpose of Disbursement	ТХ	77288							
Contribution			0	11	11	С			
Candidate Name			Cate	gory	,	Transaction ID : 41315751 Amount of Each Disbursement this Period			
Coleman, Garnet, , TX Rep.,									
	ment For:					1000.00			
Senate	Primary	General				Contribution			
State: District:	Other (spe	city) 🔻				Memo Item			
District.									
SUBTOTAL of Disbursements This Page (optional).					•	3000.00			
TOTAL This Period (last page this line number only	/)								

S	CHEDULE B (FEC Form 3X)			FOI	R LINE	NUMBER: PAGE 301 OF 318						
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		eck only	y one)						
			Summary Page		210 28a	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$						
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or use ress of any politica	ed by a al comr	ny pers nittee to	on for the purpose of soliciting contributions						
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Foup		<i>;</i> )						
Α.	Full Name (Last, First, Middle Initial) Dennis Paul Campaign					Date of Disbursement						
	Mailing Address 626 1/2 Barringer Ln., Ste. A											
	City	State	Zip Code									
	Webster	TX	77598			FEC Identification Number						
	Purpose of Disbursement Contribution			01	1	С						
	Candidate Name			Cateo	norv/	Transaction ID : 41315768 Amount of Each Disbursement this Period						
	Paul, Dennis, , TX Rep.,			Тур								
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼			Contribution						
	State: District:		., .			Memo Item						
В.	Full Name (Last, First, Middle Initial) Donna Howard Campaign					Date of Disbursement						
	Mailing Address 2005 Lakeshore Dr	09 18 2017										
	City Austin	State TX			FEC Identification Number							
	Purpose of Disbursement Contribution			01	1	C Transaction ID : 41315771						
	Candidate Name			Categ	gory/	Amount of Each Disbursement this Period						
	Howard, Donna, , TX Rep.,		Туре		4000.00							
	Office Sought: House Disburse	ement For:	Ganaral			1000.00						
	State: District:	Primary Other (spe	Cify) General			Contribution Memo Item						
_	Full Name (Last, First, Middle Initial)											
C.	Friends of Brandon Creighton					Date of Disbursement						
	Mailing Address 2257 N Loop 336 Ste 140-366					09 18 2017						
	City Conroe	State TX	Zip Code 77304			FEC Identification Number						
	Purpose of Disbursement Contribution		11304	01	1	С						
	Candidate Name			01 Categ		Transaction ID: 41315773 Amount of Each Disbursement this Period						
	Creighton, Brandon, , ,			Тур								
		ement For:				1000.00						
	President	Primary Other (spe	General			Contribution						
	State: District:	Other (spe	city) 🔻			Memo Item						
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s	UBTOTAL of Disbursements This Page (optional).				···· <b>&gt;</b>	3000.00						
т	OTAL This Period (last page this line number only	/)			🕨							

SCHEDULE B (FEC Form 3X)			FO	R LINF	NUMBER: PAGE 302 OF 318						
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	-	21b 28a							
Any information copied from such Reports and State or for commercial purposes, other than using the nar											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth G	Group	PAC	;)						
Full Name (Last, First, Middle Initial) A. Friends of Dr. Greg Bonnen					Date of Disbursement						
Mailing Address 405 David					09 18 2017						
Friendswood	State TX	Zip Code 77546			FEC Identification Number						
Purpose of Disbursement Contribution Candidate Name			01		C Transaction ID : 41315775						
Bonnen, Greg, , TX Rep.,	ment For:		Cate Ty		Amount of Each Disbursement this Period						
State: District:	Primary Other (spec	General cify) ▼			Contribution Memo Item						
Full Name (Last, First, Middle Initial) B. Friends of John Zerwas Mailing Address PO Box 852	Date of Disbursement										
City Fulshear Purpose of Disbursement			FEC Identification Number								
Contribution Candidate Name Zerwas, John, , TX Rep., Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General Cify)	011 Category/ Type		Transaction ID : 41315777 Amount of Each Disbursement this Period						
Full Name (Last, First, Middle Initial) C. Friends of Larry Taylor					Date of Disbursement						
Mailing Address PO Box 1208					09 18 2017						
City Friendswood Purpose of Disbursement Contribution Candidate Name	State TX	Zip Code 77549	01		FEC Identification Number C Transaction ID : 41315780 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item						
Taylor, Larry, , TX Sen.,	ment For: Primary Other (spec	General cify) ▼	Cate Ty								
SUBTOTAL of Disbursements This Page (optional)					3000.00						

S	CHEDULE B (FEC Form 3X)			F	OR L		NUMBER: PAGE 303 OF 318						
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(C	heck	c only 21b	one) 22 23 26 27						
		Detailed	Summary Page			28a	28b 28c <b>x</b> 29 30b						
Aı or	ny information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or us ress of any politic	ed by al cor	any nmitt	perso tee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
$\mathbb{N}$	NAME OF COMMITTEE (In Full)			_	_								
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (	Grou	p F	PAC	)						
Α.	Full Name (Last, First, Middle Initial) Giovanni Capriglione Campaign						Date of Disbursement						
	Mailing Address 1352 Ten Bar Trail						09 18 2017						
	City	State	Zip Code				FEC Identification Number						
	Southlake Purpose of Disbursement	ТХ	76092				$\mathbf{C}$						
	Contribution			C	)11		C Transaction ID : 41315782						
	Candidate Name			Cat	egor	y/	Amount of Each Disbursement this Period						
	Capriglione, Giovanni, , TX Rep.,				ype		1000.00						
	Office Sought: House Disburse Senate	ement For: Primary	General				1000.00						
	President	Other (spe					Contribution						
	State: District:		- ,, .				Memo Item						
в.	Full Name (Last, First, Middle Initial) Hubert Vo Campaign						Date of Disbursement						
							M M / D D / Y Y Y						
	Mailing Address 11360 Bellaire Blvd Suite 880		09 18 2017										
	City Houston				FEC Identification Number								
	Purpose of Disbursement	ТХ	77072	-	-		С						
	Contribution		(	011		Transaction ID : 41315783							
	Candidate Name				egor	y/	Amount of Each Disbursement this Period						
	Vo, Hubert, , TX Rep., Office Sought: House Disburse	ement For:	1	ype		1000.00							
	Senate	Primary	General				Contribution						
	President	Other (spec	cify)				Memo Item						
	State: District:												
C.	Full Name (Last, First, Middle Initial) James Frank Campaign						Date of Disbursement						
							M M / D D / Y Y Y Y						
	Mailing Address 1206 Hatton Rd						09 18 2017						
	City Wishita Falla	State TX	Zip Code 76302				FEC Identification Number						
	Wichita Falls Purpose of Disbursement		10302	_	_		С						
	Contribution			C	)11		Transaction ID : 41315785						
	Candidate Name			Cat	egor	y/	Amount of Each Disbursement this Period						
	Frank, James, , Mr., Office Sought: House Disburse	ement For:		Т	уре								
	Senate	Primary	General				Contribution Memo Item						
	President	Other (spe											
	State: District:	۔ 											
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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 304 OF 318					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a						
Any information copied from such Reports and State or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group PAC	)					
Full Name (Last, First, Middle Initial) A. Jessica Farrar Campaign				Date of Disbursement					
Mailing Address PO Box 30099				09 18 2017					
Houston	State TX	Zip Code 77249		FEC Identification Number					
Purpose of Disbursement Contribution			011	C Transaction ID : 41315787					
Candidate Name Farrar, Jessica, , TX Rep.,			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼		Contribution Memo Item					
Full Name (Last, First, Middle Initial) B. Jose Menendez Campaign Mailing Address PO Box 100833	Date of Disbursement								
City San Antonio Purpose of Disbursement Contribution		FEC Identification Number							
Candidate Name Menendez, Jose, , TX Sen.,	ment For: Primary Other (spec	General	011 Category/ Type	Transaction ID : 41315823 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item					
Full Name (Last, First, Middle Initial) C. Juan Hinojosa Campaign				Date of Disbursement					
Mailing Address PO Box 1421				09 18 2017					
City Austin Purpose of Disbursement Contribution	State TX	Zip Code 78767	011	FEC Identification Number					
Candidate Name Hinojosa, Juan, , TX Sen., Office Sought: House Disburse	ment For:		Category/ Type	Transaction ID : 41315846 Amount of Each Disbursement this Period 1000.00					
State: District:	President Other (specify)								
SUBTOTAL of Disbursements This Page (optional)			F	3000.00					

SC	CHEDULE B (FEC Form 3X)			F	OR L	INE I	NUMBER: PAGE	305 OF 318						
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(C		only 21b	one) 22 23 26	27						
			Summary Page			210 28a	22 23 20 28b 28c <b>x</b> 29	27 30b						
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or use ress of any politica	ed by al con	any nmitte	persc ee to	n for the purpose of soliciting co	ntributions ommittee.						
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)			_	_									
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Grou	p P									
Α.	Full Name (Last, First, Middle Initial) Kirk Watson Campaign	Date of Disbursement												
	Mailing Address PO Box 2004						)17							
	City	State	Zip Code				FEC Identification Number							
	Austin Purpose of Disbursement	ТХ	78768			_	0	-						
	Contribution			0	)11		С	_						
	Candidate Name			Cate	egory	/	Transaction ID : 41315849 Amount of Each Disbursement							
	Watson, Kirk, , TX Sen.,				ype									
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼				1000.00 Contribution Memo Item							
	State: District:													
B.	Full Name (Last, First, Middle Initial) Lance Gooden Campaign						Date of Disbursement							
	Mailing Address PO Box 2125		09 18 20	017										
	City Terrell				FEC Identification Number									
	Purpose of Disbursement Contribution	C	)11											
	Candidate Name			Cate	egory	/	Transaction ID : 41315851 Amount of Each Disbursement							
	Gooden, Lance, , TX Rep.,					, 								
		ment For:						000.00						
	Senate President	Primary Other (spe	General				Contribution							
	State: District:	Other (spec	city)				Memo Item							
с.	Full Name (Last, First, Middle Initial) Lois Kolkhorst for Texas Senate						Date of Disbursement							
•								YY						
	Mailing Address PO Box 2546						09 18 20	)17						
	City Brenham	State TX	Zip Code 77834				FEC Identification Number							
	Purpose of Disbursement Contribution		11034	-	-		С							
	Candidate Name			Cate	911 egory	/	Transaction ID : 41315854 Amount of Each Disbursement this Period							
	Kolkhorst, Lois, , TX Sen., Office Sought: House Disburse	ment For:		Ţ	уре		1000.00							
	Office Sought: House Disburse Senate	Primary	General											
	President	Other (spe					Contribution Memo Item							
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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 306 OF 318						
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a							
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (Un	itedHealth G	iroup PAC	)						
Full Name (Last, First, Middle Initial) A. Oscar Longoria Campaign				Date of Disbursement						
Mailing Address PO Box 4224				09 / 18 / Y Y Y Y 2017						
Mission	State TX	Zip Code 78573		FEC Identification Number						
Purpose of Disbursement Contribution Candidate Name			011	C Transaction ID : 41315857						
Candidate Name Longoria, Oscar, , Mr., Office Sought: House Disburser	ment For:		Category/ Type	Amount of Each Disbursement this Period						
Senate President State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item						
Full Name (Last, First, Middle Initial)         B. Robert Nichols Campaign         Mailing Address       PO Box 2347	Robert Nichols Campaign									
City Jacksonville Purpose of Disbursement		FEC Identification Number								
Contribution Candidate Name Nichols, Robert, , TX Sen., Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General	011 Category/ Type	Transaction ID : 41315858 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item						
Full Name (Last, First, Middle Initial) C. Rodney Anderson Campaign				Date of Disbursement						
Mailing Address 548 Edgeview Drive				09 18 2017						
Grand Prairie Purpose of Disbursement Contribution	State TX	Zip Code 75052	011	FEC Identification Number C Transaction ID : 41315860 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item						
Candidate Name Anderson, Rodney, , TX Rep., Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General Cify) ▼	Category/ Type							
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				3000.00						

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER PAGE 307 OF 318						
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a							
	y information copied from such Reports and State for commercial purposes, other than using the na										
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		ча. на те <b>н</b> е		,						
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	iroup PAC	)						
A.	Full Name (Last, First, Middle Initial) Sarah Davis Campaign	Date of Disbursement									
	Mailing Address 4203 Tennyson Street				09 / 18 / Y Y Y Y 2017						
	City	State	Zip Code		FEC Identification Number						
	Houston Purpose of Disbursement	ТХ	77005		0						
	Contribution			011	С						
	Candidate Name				Transaction ID : 41315863						
	Davis, Sarah, , TX Rep.,			Category/ Type	Amount of Each Disbursement this Period						
		ement For:			1000.00						
	Senate	Primary	General		Contribution						
	President	Other (spec	cify) 🔻		Memo Item						
	State: District:										
В.	Full Name (Last, First, Middle Initial) Scott Sanford for State Represent	ative			Date of Disbursement						
	Mailing Address 5100 El Dorado Pkwy Suite 102-805		09 18 2017								
	City McKinney Purpose of Disbursement	State TX	Zip Code 75070		FEC Identification Number						
	Contribution Candidate Name			011	C Transaction ID : 41315865						
	Sanford, William, Scott, TX Rep.,			Category/ Type	Amount of Each Disbursement this Period						
		ement For:		турс	1000.00						
	Senate	Primary	General		Contribution						
	State: District:	Other (spec	cify)		Memo Item						
C.	Full Name (Last, First, Middle Initial) Senfronia Thompson Campaign				Date of Disbursement						
	Mailing Address 4828 Loop Central Dr #600				09 / 18 / Y Y Y 2017						
	City Houston	State TX	Zip Code 77081		FEC Identification Number						
	Purpose of Disbursement Contribution			011	C						
	Candidate Name			Category/	Transaction ID : 41315871 Amount of Each Disbursement this Period						
	Thompson, Senfronia, , TX Rep.,			Type							
		ement For:			1000.00						
	Senate	Primary	General		Contribution						
	State: District:	Other (spec	city) 🔻		Memo Item						
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	y information copied from such Reports and State for commercial purposes, other than using the na									of solici					
$\land$	NAME OF COMMITTEE (In Full)	// .		_	_										
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Grou	p F		:)								
A.	Full Name (Last, First, Middle Initial) Sergio Munoz Jr. Campaign						Date of Disbursement								
	Mailing Address 1110 S. Closner Blvd														
	City	State	Zip Code				FEC lo	dentif	icatior	n Numb	er				
	Edinburg Purpose of Disbursement	ТХ	78539		_	_	C					-			
	Contribution			0	11			ansa	ction	ID • 41	31600				
	Candidate Name			Cate	•	у/									
	Munoz, Sergio, , TX Rep., Jr. Office Sought: House Disburse	ement For:		Ty	ype							1000.00			
	Senate	Primary	General							,					
	President	Other (spe	cify) 🔻				Me	Contribution Memo Item							
	State:     District:       Full Name (Last, First, Middle Initial)						1								
В.	Stephanie Klick Campaign							Date of Disbursement							
	Mailing Address P.O. Box 7592														
	City Fort Worth	Zip Code 76111				FEC lo	dentif	icatior	n Numb	er					
	Purpose of Disbursement Contribution	nt			011					C Transaction ID : 41316101					
	Candidate Name			egor	у/	Amount of Each Disbursement this Period									
	Klick, Stephanie, , TX Rep., Office Sought: House Disburse	ement For:	Ŋ	ype							1000.00				
	Senate	Primary	General				Contribution								
	State: District:	Other (spe	cify)				Me	emo	Item						
	Full Name (Last, First, Middle Initial)						Date o	of Dis	hurse	ment					
0.	Tan Parker Campaign										Y	Y Y Y			
	Mailing Address 4024 Pruett Ln						09		1	В		2017			
	City Argyle	State TX	Zip Code 76226				FEC lo	dentif	icatior	n Numb	er				
	Purpose of Disbursement Contribution		10220				С								
	Candidate Name				11										
	Parker, Tan, , TX Rep.,			Cate Ty	egor ype	y/	Amount of Each Disbursement this Period								
	•	ment For:						1000.00							
	Senate President	Primary Other (and	General				Contribution								
	State: District:	Other (spe	city) 🔻				Me	emo	Item						
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SCHEDULE B (FEC Form 3X)			FOR LINE 1	NUMBER: PAGE 309 OF 318						
ITEMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	(check only 21b 28a							
Any information copied from such Reports and States or for commercial purposes, other than using the nar										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth G	iroup PAC)	)						
Full Name (Last, First, Middle Initial) A. Texans for Charles Schwertner				Date of Disbursement						
Mailing Address PO Box 2448				09 18 2017						
Georgetown	State TX	Zip Code 78627-2448		FEC Identification Number						
Purpose of Disbursement Contribution			011	C Transaction ID : 41316118						
Candidate Name Schwertner, Charles, , TX Sen., M			Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Disburse Senate President District:	ment For: Primary Other (spec	General cify) ▼		Contribution Memo Item						
Full Name (Last, First, Middle Initial) B. Texans for Joan Huffman Mailing Address 3375 WestPark Dr. Ste 135				Date of Disbursement						
City Houston Purpose of Disbursement	Zip Code 77005		FEC Identification Number							
Contribution Candidate Name Huffman, Joan, , TX Sen.,	ment For: Primary Other (spec	General	011 Category/ Type	C Transaction ID : 41316139 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item						
Full Name (Last, First, Middle Initial) C. Texans for Kelly Hancock SPAC				Date of Disbursement						
Mailing Address 4908 Dory Court				09 18 2017						
City North Richland Hills Purpose of Disbursement Contribution Candidate Name	State TX	Zip Code 76180	011 Category/	FEC Identification Number C Transaction ID : 41316141 Amount of Each Disbursement this Period						
Hancock, Kelly, , TX Sen., Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General Gify) ▼	Туре	1000.00 Contribution Memo Item						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				3000.00						

SCHEDULE B (FEC Form 3X)			FC	DR L	INE	NUMBER: PAGE 310 OF 318							
ITEMIZED DISBURSEMENTS	Use separation Use separation Use separation use for each		heck	only	/ one)								
		Summary Page			21b 28a	22         23         26         27           28b         28c         x         29         30b							
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may me and add	not be sold or user ress of any politica	d by al corr	any	pers	on for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	irou	рР	AC	2)							
Full Name (Last, First, Middle Initial) <b>A. Texans for Trent Ashby</b>						Date of Disbursement							
Mailing Address PO Box 412						09 / 18 / Y Y Y Y 2017							
City Lufkin	State TX	Zip Code 75902				FEC Identification Number							
Purpose of Disbursement Contribution		10002	0	11	1	С							
Candidate Name			Cate	gory	1	Transaction ID : 41316142 Amount of Each Disbursement this Period							
Ashby, Trenton, , Mr.,				/pe	, 								
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼				Contribution Memo Item							
State: District:	-												
Full Name (Last, First, Middle Initial)         B. The Campaign To Elect Walter ('F         Mailing Address       2606 S Lipscomb St	Four') Pri	our') Price				Date of Disbursement 09 18 2017							
City	y State Zip Code												
Amarillo				FEC Identification Number									
Purpose of Disbursement Contribution						C							
Candidate Name				011	Transaction ID : 41316144								
Price, Walter, Four, TX Rep.,	Category Type					Amount of Each Disbursement this Period							
· · · ·	ement For:	I				1000.00							
Senate	Primary	General				Contribution							
State: District:	Other (spe	city)				Memo Item							
Full Name (Last, First, Middle Initial)						Date of Disbursement							
C. Todd Hunter Campaign													
Mailing Address 445 Cape Henry						09 18 2017							
City Corpus Christi	State TX	Zip Code 78412				FEC Identification Number							
Purpose of Disbursement Contribution		10412				С							
Candidate Name				11 egory	/	Transaction ID: 41316161 Amount of Each Disbursement this Period							
Hunter, Todd, , TX Rep.,			Ту	ype		1000.00							
Office Sought: House Disburse Senate	ement For: Primary	General				1000.00							
President	Other (spe					Contribution							
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER:	PAGE 311 OF 318				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		23 26 27 28c <b>x</b> 29 30b				
Any information copied from such Reports and Staten or for commercial purposes, other than using the name		by any person for the purpo	ose of soliciting contributions				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (UnitedHealth G	oup PAC)					
Full Name (Last, First, Middle Initial) Tom Oliverson Campaign Mailing Address 1 E. Greenway Plz., Ste. 225		Date of Dist	D D / Y Y Y Y 18 / 2017				
City Houston	State Zip Code TX 77046	FEC Identific	cation Number				
Purpose of Disbursement Contribution		011 C Transac	tion ID : 41316163				
Candidate Name Oliverson, Tom, , TX Rep., Office Sought: House Disburser	nent For:	Category/ Amount of E	ach Disbursement this Period				
Senate State: District:	Primary General Other (specify) ▼	Memo It	Contribution				
Full Name (Last, First, Middle Initial)		Date of Dist					
Mailing Address 1419 W 4th Street	09	25 / Y Y Y Y 2017					
City Joplin Purpose of Disbursement	State Zip Code MO 64801		cation Number				
Ron Richard, STATE SENATE 32nd MO Candidate Name			tion ID : 41341579 Each Disbursement this Period				
Richard, Ron, , MO Sen., Office Sought: House Disbursen Senate President	nent For: Primary General Other (specify)	Type	2400.00 Ron Richard, STATE SENATE 32 MO				
State:     District:       Full Name (Last, First, Middle Initial)		Memo It	em				
• Greitens for Missouri		Date of Disk	Date of Disbursement				
Mailing Address PO Box 144		09	25 2017				
Jefferson City Purpose of Disbursement	State Zip Code MO 65102	FEC Identific	cation Number				
Eric Greitens, GOVERNOR MO Candidate Name Greitens, Eric, , ,		011 Transac	tion ID : 41341580 ach Disbursement this Period				
Office Sought: House Disburser	nent For: Primary General Other (specify) ▼	Memo It	2600.00 Eric Greitens, GOVERNOR MO em				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			6000.00				

SC	HEDULE B (FEC Form 3X)			FC	DR I I	NE N	IUMBER	:		F	PAGE	312 OF 318	
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			Summary Page			1b 8a	22 28b	$\mid$	23 28c	× 29		27 30b	
	y information copied from such Reports and State for commercial purposes, other than using the na									of solici	ting c		
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporated	PAC (Ur	litedHealth G	srou	р Р	4C)							
	Full Name (Last, First, Middle Initial) Wieland Now								burse	ement			
	Mailing Address 1015 Castleman Dr						09 / 25 / Y Y Y Y						
	City Imperial	State MO	Zip Code 63052				FEC Identification Number						
	Purpose of Disbursement Paul Wieland, STATE SENATE 22nd MO		00002	0	11	T	С						
	Candidate Name			Cate	gory	11				ID: 41 Disburg		1 11 this Period	
	Wieland, Paul, , MO Sen.,				-	-			coo oo				
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe								Paul Wi 22nd M		600.00 , STATE SENAT	
	State: District:	1					IVIE		item -				
в.	Full Name (Last, First, Middle Initial) Bradley for Arizona						Date o	_		ement	Y	YYYY	
	Mailing Address 5909 E 3rd St						09	ĺ		7		2017	
	City State Zip Code Tucson AZ 85711						FEC lo	lentifi	icatio	n Numb	er		
	Tucson     AZ     85711       Purpose of Disbursement     Contribution						С						
	Candidate Name	Category/ Type					Transaction ID : 41345643 Amount of Each Disbursement this Period						
	Bradley, David, , AZ Sen.,							500.00					
	Office Sought: House Disburse Senate	ment For: Primary	General						_	Contrib		500.00	
	State: District:	Other (spe					Me	emo		Contrib	ution		
<u>с</u>	Full Name (Last, First, Middle Initial)						Date o	f Dis	burse	ment			
0.	Kate Brophy McGee AZ - Senate						M M	/		D /	Y	Y Y Y	
	Mailing Address 42 E Butler Dr						09		2			2017	
	City	State AZ	Zip Code 85020				FEC lo	lentifi	icatio	n Numb	er		
	Phoenix Purpose of Disbursement Contribution	-		С									
	Contribution 011									ID : 41			
	McGee, Kate, Brophy, , Type								Each	Dispurs	semer	nt this Period	
	Office Sought: House Disburse	-		L.		-			2500.00				
	Senate President	Primary Other (spe	General cify) ▼				Contribution Memo Item						
	State: District:	」、、 		IN INE	0111	nem							
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SC	HEDULE B (FEC Form 3X)			F	OR LI	NE NUN	MBER: PAGE 313 OF 318							
ITEMIZED DISBURSEMENTS			arate schedule(s) category of the	(C		only one	e) ] 22							
		Detailed	Summary Page			8a	22 23 20 27 28b 28c <b>x</b> 29 30b							
	y information copied from such Reports and State for commercial purposes, other than using the na				any p	erson fo	or the purpose of soliciting contributions							
$\backslash$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	PAC (Un	nitedHealth G	Grou	p P/	AC)								
	Full Name (Last, First, Middle Initial) Kate Brophy McGee AZ - Senate						Date of Disbursement							
	Mailing Address 42 E Butler Dr						09 27 2017							
	City	State	Zip Code			F	EC Identification Number							
	Phoenix Purpose of Disbursement	AZ	85020											
	Contribution			0	11	1   Ľ								
	Candidate Name						<b>Transaction ID : 41345646</b> Amount of Each Disbursement this Period							
	McGee, Kate, Brophy, ,				egory/ ype									
		ment For:					1500.00							
	Senate	Primary	General											
	President District	Other (spe	cify) 🔻				Memo Item							
	State: District: Full Name (Last, First, Middle Initial)					_								
	Lela Alston AZ Senate 2018		Date of Disbursement											
	Mailing Address 69 West Willetta Street		09 27 2017											
	City Phoeniz	State AZ	Zip Code 85003			F	EC Identification Number							
	Purpose of Disbursement Contribution			C	011		C							
	Candidate Name			Cate	egory/	A	Transaction ID : 41345647 Amount of Each Disbursement this Period							
	Alston, Lela, , AZ Rep.,				ype									
	Ŭ	ment For:					500.00							
	President	Primary Other (anot	General				Contribution							
	State: District:	Other (spec	city)			11	Memo Item							
_	Full Name (Last, First, Middle Initial)													
U.	Pratt for Arizona Senate 2018		Date of Disbursement											
	Mailing Address PO Box 10526					٦ ۱	09 27 2017							
	City	State	Zip Code			F	EC Identification Number							
	Casa Grande Purpose of Disbursement Contribution	AZ	85130	_	11		С							
	Contribution Candidate Name					A	Transaction ID : 41345652 Amount of Each Disbursement this Period							
	Pratt, Frank, , ,	· •		Ty	ype		1000.00							
	Office Sought: House Disburse Senate	ment For: Primary	General			-   L	1000.00							
	President	Other (spe					Contribution							
	State: District:		(inj)			14	Memo Item							
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S	SCHEDULE B (FEC Form 3X)					LINE N	NUMBER: PAGE 314 OF 318								
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		Dotallou	eaninary rage			28a	28b 28c <b>x</b> 29 30b								
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or use ress of any politic	ed by al con	any nmitt	perso tee to	on for the purpose of soliciting contributions solicit contributions from such committee.								
$\setminus$	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (	Grou	рF	PAC)	)								
Α.	Full Name (Last, First, Middle Initial) Re-Elect Debbie Lesko for Senate		Date of Disbursement												
	Mailing Address PO Box 5292						09 / 27 / Y Y Y 2017								
	City Peoria	State AZ	Zip Code 85385				FEC Identification Number								
	Purpose of Disbursement Contribution	,,,		C	)11		С								
	Candidate Name			Cate	egor	v/	Transaction ID : 41345653 Amount of Each Disbursement this Period								
	Lesko, Debbie, , ,				ype	<i>y</i> ,									
	Office Sought: House Disburse Senate President	ement For: Primary	General				2000.00 Contribution								
	State: District:	Other (spe	city) 🔻				Memo Item								
в.	Full Name (Last, First, Middle Initial) Rebecca Rios 2018 Meiling Address, 2019 5 Descrift Live						Date of Disbursement								
	Mailing Address 3136 E Beautiful Ln		2017												
	City Phoenix	State AZ	Zip Code 85042				FEC Identification Number								
	Purpose of Disbursement Contribution		011			C Transaction ID : 41345654									
	Candidate Name	Disbursement For:			egor	y/	Amount of Each Disbursement this Period								
	Rios, Rebecca, , ,				ype										
	Office Sought: House Disburse	Primary	General												
	State: District:	Other (spe					Contribution Memo Item								
<u>с.</u>	Full Name (Last, First, Middle Initial)						Date of Disbursement								
							M M / D D / Y Y Y Y								
	Mailing Address PO Box 1230	1					09 27 2017								
	City Coolidge	State AZ	Zip Code 85128				FEC Identification Number								
	Purpose of Disbursement Contribution			C	)11	٦	C								
	Candidate Name Shope, T.J., , AZ Rep.,		egor ype	y/	Transaction ID : 41345655 Amount of Each Disbursement this Period										
		ement For:				2000.00									
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	CHEDULE B (FEC Form 3X)		arate schedule(s)				NUMBER: PAGE 315 OF 318									
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$\setminus$	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (	Grou	рF	PAC	)									
Α.	Full Name (Last, First, Middle Initial) VOTE Heather Carter Senate						Date of Disbursement									
							M M / D D / Y Y Y Y									
	Mailing Address 29455 N Cave Creek St 118 #299						09		2	27		20	)17			
	City Cave Creek	State AZ	Zip Code				FEC lo	denti	ficatio	n Nun	nber					
	Purpose of Disbursement		85331			-+	С						-			
	Contribution			0	)11			or - 1	otio:		1945	657				
	Candidate Name			Cate	eaor	v/				Disbu			this Period			
	Carter, Heather, , ,				ype							-				
		ement For:							,		-		2500.00			
	Senate President	Primary Other (spe	General							Contri	butio	n				
	State: District:		uny) ▼				M	emo	Item							
_	Full Name (Last, First, Middle Initial)															
В.	VOTE Heather Carter Senate						Date of Disbursement									
	Marthan Address and a							/	D		Y		Y Y			
	Mailing Address 29455 N Cave Creek St 118 #299						09 27 2017									
	City Cave Creek	State AZ	Zip Code 85331				FEC Identification Number									
	Purpose of Disbursement			_	_		С									
	Contribution	0° Cate		011	11	Transaction ID : 41345657										
	Candidate Name			Cate	egor	y/	Amount of Each Disbursement this Period									
	Carter, Heather, , ,			Ty	уре		4500.00									
	Office Sought: House Disburse Senate	ement For: Primarv	General	rol			1500.00									
	President	Other (spe								Contr	ibutic	n				
	State: District:						M	emo	Item							
	Full Name (Last, First, Middle Initial)															
C.	Vote Mesnard						Date of	of Di	sburse	ement						
	Mailing Addross 1427 W Llamaster d Ot						09 27 2017									
	Mailing Address 1427 W. Homestead Ct.						09			'		20				
	City	State	Zip Code				FEC Identification Number									
	Chandler	AZ	85286				_					-	-			
	Purpose of Disbursement Contribution				)11		С			_		_				
	Candidate Name	-		Transaction ID : 41345658												
	Mesnard, Javan, , AZ Rep.,		egor ype	y/	Amount of Each Disbursement this Per											
	· · · · · ·	ement For:									-	1	500.00			
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ITEMIZED DISBURSEMENTS			arate schedule(s) category of the		heck o	nly one)					
			Summary Page		21						
	y information copied from such Reports and State for commercial purposes, other than using the nar				any pe	erson for the purpose of soliciting contributions					
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		·/ ··· ··· -								
	UnitedHealth Group Incorporated	PAC (Un	nitedHealth G	Grou	p PA	SC)					
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Edward J Can	field				Date of Disbursement					
	Mailing Address 933 East Main Street					09 27 2017					
	5	State	Zip Code			FEC Identification Number					
	Sebewaing Purpose of Disbursement	MI	48759								
	Contribution			0	11	C					
	Candidate Name			Cate	egory/	Transaction ID : 41345659 Amount of Each Disbursement this Period					
	Canfield, Edward, , MI Rep.,				ype						
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼			Contribution Memo Item					
	State: District:	1									
B.	Full Name (Last, First, Middle Initial) Committee to Elect Dr. John Bizor	Date of Disbursement									
	Mailing Address 114 Castle Ridge Dr										
		State	Zip Code			FEC Identification Number					
	Battle Creek Purpose of Disbursement	MI	49015			С					
	Contribution			C	011						
	Candidate Name	ate Name			egory/	Transaction ID : 41345660 Amount of Each Disbursement this Period					
	Bizon, John, , ,				/pe						
		ment For:				400.00					
	Senate President	Primary Other (spe	General			Contribution					
	State: District:	Other (spec	city)			Memo Item					
<u>с</u> .	Full Name (Last, First, Middle Initial)					Date of Disbursement					
	Mailing Address 22 E 29th Street		09 27 2017								
	City Holland	State MI	Zip Code 49423			FEC Identification Number					
	Purpose of Disbursement	IVII	49423	-		С					
	Contribution Candidate Name	11 egory/	Transaction ID : 41345662 Amount of Each Disbursement this Period								
	Garcia, Daniela, , MI Rep.,	ype j	250.00								
	Office Sought: House Disburse Senate	ment For:	General			250.00					
	President	Primary Other (spe	General cifv) ▼			Contribution					
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	NAME OF COMMITTEE (In Full)			_													
$\angle$	UnitedHealth Group Incorporated	PAC (Un	nitedHealth C	Grou	p F	PAC	)										
Α.	Full Name (Last, First, Middle Initial) Friends of Terry Moulton				Date of Disbursement												
	Mailing Address 2863 S. Prairie View Road						09 / 27 / Y Y Y Y 2017										
	City	State	Zip Code				FEC Id	entifi	catior	Numb	er						
	Chippewa Falls Purpose of Disbursement	WI	54729									-					
	Contribution			0	11		С										
	Candidate Name			Cate		×/				ID: 41: Disburs							
	Moulton, Terry, , WI Sen.,				ype	y/	Anoun	Amount of Each Disbursement this Period									
	Office Sought: House Disburse	ment For:										500.00					
	Senate	Primary	General					,	(	Contribu	ition						
	State: District:	Other (spe	сіту) 🔻				Me	emo l	tem								
	Full Name (Last, First, Middle Initial)																
В.	Ducey 2018						Date o	f Disl	burse	ment							
							M M										
	Mailing Address PO Box 12558								09 28 2017								
	City	State	Zip Code				FEC Identification Number										
	Tempe Purpose of Disbursement	AZ	85284				C					-					
	Contribution			C	011		C Transaction ID : 41346915										
	Candidate Name		Category/			v/		5 nt this Period									
	Ducey, Doug, , Gov.,			ype	<b>J</b> .	Amount of Each Disburschient this Feriod											
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_	Full Name (Last, First, Middle Initial)																
С.	Ducey 2018						Date of Disbursement										
	Mailing Address PO Box 12558					09 / 28 / Y Y Y Y 09 28 2017											
	City	State	Zip Code				FEC Id	entifi	catior	Numb	er						
	Tempe Purpose of Disbursement	AZ	85284														
	Contribution			0	11		С				_						
	Candidate Name					n / /	Transaction ID : 41346916 Amount of Each Disbursement this Period										
	Ducey, Doug, , Gov.,		Cate Ty	egor ype	y/	Amoun		_0011	Sisbuis	SINE							
	Office Sought: House Disburse										2500.00						
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S	HEDULE B (FEC Form 3X)			FC	DR I	INE	NUMBER: PAGE 318 OF 318								
ITEMIZED DISBURSEMENTS			Use separate schedule(s) for each category of the				y one)								
			Summary Page			21b 28a	22 23 26 27 28b 28c <b>x</b> 29 30b								
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso	son for the purpose of soliciting contributions								
$\backslash$	NAME OF COMMITTEE (In Full)														
Ĺ	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	irou	p P	AC	;)								
Α.	Full Name (Last, First, Middle Initial) Mark for AZ						Date of Disbursement								
	Mailing Address 3217 E Shea Blvd						M M / D D / Y Y Y Y 09 28 2017								
	City Phoenix	State AZ	Zip Code 85028				FEC Identification Number								
	Purpose of Disbursement Contribution			0	11	٦	C								
	Candidate Name			Cate	egory	/	Transaction ID : 41346917 Amount of Each Disbursement this Period								
	Brnovich, Mark, , Aty Gen, Office Sought: House Disburse	ement For:		Ту	ype		1100.00								
	Senate President	Primary Other (spe	General cify) ▼				Contribution								
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B.	Full Name (Last, First, Middle Initial) Mark for AZ						Date of Disbursement								
	Mailing Address 3217 E Shea Blvd		09 28 2017												
	City Phoenix	State AZ	Zip Code 85028				FEC Identification Number								
	Purpose of Disbursement Contribution Candidate Name			0	)11										
	Brnovich, Mark, , Aty Gen,	ark, , Aty Gen, House Disbursement For: Senate Primary Genera			egory vpe	/	Amount of Each Disbursement this Period 1500.00 Contribution								
	Office Sought: House Disburse				,										
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с.	Full Name (Last, First, Middle Initial)						Date of Disbursement								
	Mailing Address														
	City	State	Zip Code				FEC Identification Number								
	Purpose of Disbursement	<b>—</b>	C												
	Candidate Name Category						Amount of Each Disbursement this Period								
	Office Sought: House Disbursement For: Senate Primary General														
_	State: District:	Other (spe	cify) ▼				Memo Item								
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