

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
 UnitedHealth Group Incorporated Political Fund

ADDRESS (number and street) 9900 Bren Road East  
 Check if different than previously reported. (ACC) Minnetonka MN 55343

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00274431 3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)  
 (a) Quarterly Reports:  
 X April 15 Quarterly Report(Q1) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)  
 July 15 Quarterly Report(Q2) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)  
 October 15 Quarterly Report(Q3) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)  
 January 31 Quarterly Report(YE) Election on in the State of  
 (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)  
 Convention (12C) Special (12S)  
 July 31 Mid-Year Report(Non-election Year Only) (MY) (d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)  
 Termination Report (TER) Election on in the State of

5. Covering Period 01 01 2002 through 03 31 2002

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Patrick J. Erlandson  
 Signature of Treasurer Electronically Filed by Patrick J. Erlandson Date 04 12 2002

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name  
UnitedHealth Group Incorporated Political Fund

Report Covering the Period: From: <sup>K</sup> 0 1 <sup>D</sup> 0 1 <sup>Y</sup> 2 0 0 2 To: <sup>K</sup> 0 3 <sup>D</sup> 3 1 <sup>Y</sup> 2 0 0 2

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2 0 0 2		20128.94
(b) Cash on Hand at Beginning of Reporting Period .....	20128.94	
(c) Total Receipts (from Line 19) .....	29735.66	29735.66
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	49864.60	49864.60
7. Total Disbursements (from Line 30) .....	41000.00	41000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8864.60	8864.60
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated Political Fund

Report Covering the Period: From: <sup>W</sup>01 <sup>D</sup>01 <sup>Y</sup>2002 To: <sup>W</sup>03 <sup>D</sup>31 <sup>Y</sup>2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	19422.14	
(ii) Unitemized .....	10313.52	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	29735.66	29735.66
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) .....	29735.66	29735.66
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	29735.66	29735.66
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	29735.66	29735.66

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	41000.00	41000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	41000.00	41000.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	41000.00	41000.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	29735.66	29735.66
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	29735.66	29735.66
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. John P. Anton**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
2970 Clairmont Rd Suite 650 GA010-3380  
City State Zip Code  
Atlanta GA 30329-1634

Amount of Each Receipt this Period  
269.22

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Senior Vice President

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)  
Primary General Other (specify) ▼ 269.22

Transaction ID: 1000000502480002

Full Name (Last, First, Middle Initial)  
**B. Richard J. Migliori**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
12125 Technology Drive MN002-0145  
City State Zip Code  
Eden Prairie MN 55344

Amount of Each Receipt this Period  
538.44

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Senior VP Ingenix Employer Group

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$76.82 Biweekly)  
Primary General Other (specify) ▼ 538.44

Transaction ID: 10000005035300003

Full Name (Last, First, Middle Initial)  
**C. Jeannie M. Rivel**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
9900 Bren Road E. MN008-W315  
City State Zip Code  
Minnetonka MN 55345

Amount of Each Receipt this Period  
700.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. COO of Health Plans

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)  
Primary General Other (specify) ▼ 700.00

Transaction ID: 10000005035400004

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1507.66**

**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 28

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

**A.** Full Name (Last, First, Middle Initial)  
R. Channing Wheeler

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
450 Columbus Blvd CTD30-12BB

City State Zip Code  
Hartford CT 06115-0450

Amount of Each Receipt this Period  
1280.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Uniprise CEO

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$180.00 Biweekly)  
Primary General Other (specify) ▼ 1280.00

Transaction ID: 10000005043100005

**B.** Full Name (Last, First, Middle Initial)  
Ronald S. Franzese

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
Terrace Plaza, 250 Morris Ave MID13-3250

City State Zip Code  
Muskegon MI 49440-1143

Amount of Each Receipt this Period  
280.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. CEO, PHP of West MI

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)  
Primary General Other (specify) ▼ 280.00

Transaction ID: 10000005029800008

**C.** Full Name (Last, First, Middle Initial)  
Gary Gehutz

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
19621 N.W. 12 Street FL075-1000

City State Zip Code  
Sunrise FL 33325

Amount of Each Receipt this Period  
280.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. CEO - South Florida

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)  
Primary General Other (specify) ▼ 280.00

Transaction ID: 10000005039800007

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1820.00**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. Robert Hussey**

Mailing Address  
8330 Boone Blvd Ste 300 VA30-1030  
City State Zip Code  
Vienna VA 22182-2624

Date of Receipt  
M / D / Y Y Y Y

Amount of Each Receipt this Period  
269.22

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. VP, Public Policy & Comm Ovations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.46 Biweekly)  
Primary General Other (specify) ▼ 269.22

Transaction ID: 10000005031800008

Full Name (Last, First, Middle Initial)  
**B. Saul Feldman**

Mailing Address  
405 Market Street CA035-2701  
City State Zip Code  
San Francisco CA 94105

Date of Receipt  
M / D / Y Y Y Y

Amount of Each Receipt this Period  
538.44

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. CEO United Behavioral Health

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$76.82 Biweekly)  
Primary General Other (specify) ▼ 538.44

Transaction ID: 10000005029500009

Full Name (Last, First, Middle Initial)  
**C. Elise Anne Gemelhardt**

Mailing Address  
1620 L St. NY #800 DC030-1000  
City State Zip Code  
Washington DC 20036

Date of Receipt  
M / D / Y Y Y Y

Amount of Each Receipt this Period  
269.22

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. VP Federal Affairs

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.46 Biweekly)  
Primary General Other (specify) ▼ 269.22

Transaction ID: 10000005030100010

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1076.88**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. Eugene Cavanaugh**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
450 Columbus Blvd CTD30-12NB-BB  
City State Zip Code  
Hartford CT 06115

Amount of Each Receipt this Period  
269.22

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. CFO Uniprise

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)  
Primary General Other (specify) ▼ 269.22

Transaction ID: 10000005027400011

Full Name (Last, First, Middle Initial)  
**B. David S. Wichmann**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
8900 Bren Road East MN008-W/304  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
840.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. SVP - Corporate Development

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$120.00 Biweekly)  
Primary General Other (specify) ▼ 840.00

Transaction ID: 10000005043500012

Full Name (Last, First, Middle Initial)  
**C. L. Robert Depper**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
9900 Bren Road East MN008-T902  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
538.44

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group Senior Vice President Human Capital

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$78.92 Biweekly)  
Primary General Other (specify) ▼ 538.44

Transaction ID: 10000005028400013

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1647.66**

**TOTAL** This Period (last page this line number only) ..... ▶



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

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

FOR LINE NUMBER: PAGE 9 / 28

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)

A. Susan L. Roberts

Mailing Address

9800 Bren Road East

MN008-W130

City

State

Zip Code

Minnetonka

MN

55343

Date of Receipt

MM / DD / YYYY

FEC ID number of contributing  
federal political committee.

Amount of Each Receipt this Period

269.22

Name of Employer  
UnitedHealth Group

Occupation

Senior VP, Business Develop - Everc

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Payroll Deduction (\$38.48  
Biweekly)

Transaction ID: 1000005038500014

Full Name (Last, First, Middle Initial)

B. Mary Guthrie

Mailing Address

4350 Cypress St. Suite 540

FL002-1004

City

State

Zip Code

Tampa

FL

33607

Date of Receipt

MM / DD / YYYY

FEC ID number of contributing  
federal political committee.

Amount of Each Receipt this Period

210.00

Name of Employer  
UnitedHealth Group

Occupation

Executive Director Evercare Florida

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Payroll Deduction (\$30.00  
Biweekly)

Transaction ID: 1000005038800015

Full Name (Last, First, Middle Initial)

C. William P. Whitsy

Mailing Address

One South Wacker

IL014-0910

City

State

Zip Code

Chicago

IL

60606

Date of Receipt

MM / DD / YYYY

FEC ID number of contributing  
federal political committee.

Amount of Each Receipt this Period

538.44

Name of Employer  
UnitedHealth Group, Inc.

Occupation

CEO, United HealthCare of Illinois

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

538.44

Payroll Deduction (\$78.92  
Biweekly)

Transaction ID: 1000005043400016

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

**1017.66**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. Mark F. Lindsay**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
1225 New York Ave DC030-1000  
City State Zip Code  
Washington DC 20005

Amount of Each Receipt this Period  
269.22

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group Director Business Development

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)  
Primary General Other (specify) ▼ 269.22

Transaction ID: 10000005033900017

Full Name (Last, First, Middle Initial)  
**B. Stephn C. Spurgeon**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
13655 Riverport Drive  
City State Zip Code  
Maryland Heights MO 63043

Amount of Each Receipt this Period  
201.95

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Physician

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$28.85 Biweekly)  
Primary General Other (specify) ▼ 201.95

Transaction ID: 10000005041100018

Full Name (Last, First, Middle Initial)  
**C. Ken L. Hoveman**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
3650 Olentangy River Rd OH020-9010  
City State Zip Code  
Columbus OH 43214-1138

Amount of Each Receipt this Period  
210.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. COO UHC Ohio

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$30.00 Biweekly)  
Primary General Other (specify) ▼ 210.00

Transaction ID: 10000005031800019

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **681.17**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. Ronald B. Colby**

Date of Receipt  
M / M / D D C C / Y Y Y Y

Mailing Address  
9900 Bren Rd East MN00B-E211  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
1225.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Senior VP, Insurance & Product Mgmt

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$175.00 Biweekly)  
Primary General Other (specify) ▼ 1225.00

Transaction ID: 1000000502800020

Full Name (Last, First, Middle Initial)  
**B. Robert J. Sheehy**

Date of Receipt  
M / M / D D C C / Y Y Y Y

Mailing Address  
9900 Bren Road East MN00B-W/301  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
1330.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Executive Management

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$180.00 Biweekly)  
Primary General Other (specify) ▼ 1330.00

Transaction ID: 10000005040400021

Full Name (Last, First, Middle Initial)  
**C. Michael J. Koehler**

Date of Receipt  
M / M / D D C C / Y Y Y Y

Mailing Address  
106 Farmers Alley, Suite 400 MI012-S200  
City State Zip Code  
Kalamazoo MI 49005-0271

Amount of Each Receipt this Period  
280.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. CEO PHP Southwest Michigan

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)  
Primary General Other (specify) ▼ 280.00

Transaction ID: 10000005033200022

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2835.00**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. John S. Persham**

Date of Receipt  
M / D / Y

Mailing Address  
9900 Bren Road East MN008-8082  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
280.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. VP Investor Relations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)  
Primary General Other (specify) ▼ 280.00

Transaction ID: 10000005037100023

Full Name (Last, First, Middle Initial)  
**B. Leonard A. Farr**

Date of Receipt  
M / D / Y

Mailing Address  
9900 Bren Road East MN008-8310  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
420.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Corporate Vice President

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$60.00 Biweekly)  
Primary General Other (specify) ▼ 420.00

Transaction ID: 10000005029400024

Full Name (Last, First, Middle Initial)  
**C. Lois Quam**

Date of Receipt  
M / D / Y

Mailing Address  
9900 Bren Road East MN008-T300  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
1085.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. CEO, Ovations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$155.00 Biweekly)  
Primary General Other (specify) ▼ 1085.00

Transaction ID: 10000005037700025

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1785.00**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 / 28	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. John Elingboe**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
9900 Bren Road East MN00B-T300  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
403.83

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Senior VP Ovations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$57.69 Biweekly)  
Primary General Other (specify) ▼ 403.83

Transaction ID: 1000000502900026

Full Name (Last, First, Middle Initial)  
**B. Patrick Erlanson**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
9900 Bren Road E MN00B-8315  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
700.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. VP Corporate Controller

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)  
Primary General Other (specify) ▼ 700.00

Transaction ID: 10000005029200027

Full Name (Last, First, Middle Initial)  
**C. Tracy L. Bahl**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
450 Columbus Blvd Uniprise Towers, 12NB  
City State Zip Code  
Hartford CT 06115

Amount of Each Receipt this Period  
269.22

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. President, Strategic Services Group

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.46 Biweekly)  
Primary General Other (specify) ▼ 269.22

Transaction ID: 10000005025300028

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1373.05**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. Robert J. Backes**

Date of Receipt  
M / D / Y

Mailing Address  
9900 Bren Road E MN00B-8317  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
700.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Vice President - Human Resources

Receipt For: Aggregate Year-to-Date  
Primary General Other (specify) 700.00

Payroll Deduction (\$100.00 Biweekly)

Transaction ID: 10000005025200029

Full Name (Last, First, Middle Initial)  
**B. William A. Munsell**

Date of Receipt  
M / D / Y

Mailing Address  
9900 Bren Road E MN00B-W/301  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
700.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Chief Operating Officer

Receipt For: Aggregate Year-to-Date  
Primary General Other (specify) 700.00

Payroll Deduction (\$100.00 Biweekly)

Transaction ID: 10000005035800030

Full Name (Last, First, Middle Initial)  
**C. David Lubben**

Date of Receipt  
M / D / Y

Mailing Address  
9900 Bren Rd East  
City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
1346.11

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. General Counsel

Receipt For: Aggregate Year-to-Date  
Primary General Other (specify) 1346.11

Payroll Deduction (\$192.31 Biweekly)

Transaction ID: 10000005034000031

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2746.11**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. Daniel J. Mcathie**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
9800 Bren Road E. MN00B-W318

City State Zip Code  
Minnetonka MN 55343

Amount of Each Receipt this Period  
700.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. Senior VP Finance & HealthCare Econ

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)  
Primary General Other (specify) ▼ 700.00

Transaction ID: 10000005034800032

Full Name (Last, First, Middle Initial)  
**B. Kevin Pearson**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
5225 Wiley Post Way, Suite 500 UTD15-D500

City State Zip Code  
Salt Lake City UT 84116

Amount of Each Receipt this Period  
525.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group, Inc. CEO Ingenix Health Intelligence

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$75.00 Biweekly)  
Primary General Other (specify) ▼ 525.00

Transaction ID: 10000005036900033

Full Name (Last, First, Middle Initial)  
**C. Amy K. Knapp**

Date of Receipt  
M M / D D / Y Y Y Y

Mailing Address  
Two Penn Plaza, 7th Floor NY036-1000

City State Zip Code  
New York NY 10121

Amount of Each Receipt this Period  
807.66

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UnitedHealth Group Regional President, Eastern Region,

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$115.98 Biweekly)  
Primary General Other (specify) ▼ 807.66

Transaction ID: 10000005033100034

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2032.66**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 / 28	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)  
**A. Eric Bergen**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
5801 Lincoln Drive MN012-S249  
City State Zip Code  
Edina MN 55436

Amount of Each Receipt this Period  
FEC ID number of contributing federal political committee. 280.00

Name of Employer Occupation  
UnitedHealth Group, Inc. HealthCare Svcs Ops Sr Mgmt

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)  
Primary General Other (specify) ▼ 280.00

Transaction ID: 10000005025900035

Full Name (Last, First, Middle Initial)  
**B. R. Edward Bergmark**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
6300 Olson Memorial Hwy MN01D-S203  
City State Zip Code  
Golden Valley MN 55427

Amount of Each Receipt this Period  
FEC ID number of contributing federal political committee. 269.29

Name of Employer Occupation  
UnitedHealth Group, Inc. Vice President CEO IHR (OPTUM)

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.47 Biweekly)  
Primary General Other (specify) ▼ 269.29

Transaction ID: 10000005026000036

Full Name (Last, First, Middle Initial)  
**C. Michael H. Davis**

Date of Receipt  
M / D / Y Y Y Y

Mailing Address  
12125 Technology Drive MN002-0135  
City State Zip Code  
Eden Prairie MN 55344

Amount of Each Receipt this Period  
FEC ID number of contributing federal political committee. 350.00

Name of Employer Occupation  
UnitedHealth Group CIO Ingenix Information Technology

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$50.00 Biweekly)  
Primary General Other (specify) ▼ 350.00

Transaction ID: 10000005026800037

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **899.29**

**TOTAL** This Period (last page this line number only) ..... ▶ **19422.14**



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Tom Feeney Congressional Exploratory Committee</b>			Date of Disbursement 01 / 22 / 2002	
Mailing Address 101 East College Avenue City: Tallahassee State: FL Zip Code: 32301			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Tom Feeney, U.S. HOUSE FL			24K Category/ Type	
Candidate Name Tom Feeney				
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 10000005002300002	
State: FL District: 2				

Full Name (Last, First, Middle Initial) <b>B. Richard Burr Committee</b>			Date of Disbursement 02 / 04 / 2002	
Mailing Address P.O. Box 5928 City: Winston-Salem State: NC Zip Code: 27113			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Richard M. Burr, U.S. HOUSE			24K Category/ Type	
Candidate Name Richard M. Burr				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 10000005002400003	
State: NC District: 5				

Full Name (Last, First, Middle Initial) <b>C. DOOLEY FOR CONGRESS</b>			Date of Disbursement 02 / 05 / 2002	
Mailing Address POST OFFICE BOX 1367 City: VISALIA State: CA Zip Code: 93279			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Cal Dooley, U.S. HOUSE 20th			24K Category/ Type	
Candidate Name Cal Dooley				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 10000005002600004	
State: CA District: 20				

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Devin Nunes For Congress 2002</b>		Date of Disbursement 02 / 05 / 2002	
Mailing Address PO Box 891 City Pixley State CA Zip Code 93256		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Devin Nunes, U.S. HOUSE 21s		24K Category/ Type	
Candidate Name Devin Nunes			
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10000005002700005	
State: CA District: 21			

Full Name (Last, First, Middle Initial) <b>B. RE-ELECT NANCY JOHNSON TO CONGRESS COMMITTEE</b>		Date of Disbursement 02 / 08 / 2002	
Mailing Address P.O. Box 1986 City New Britain State CT Zip Code 06050		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$2000.00 Nancy L. Johnson, U.S. HOUS		24K Category/ Type	
Candidate Name Nancy L. Johnson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10000005002800006	
State: CT District: 6			

Full Name (Last, First, Middle Initial) <b>C. Pioneer PAC</b>		Date of Disbursement 02 / 08 / 2002	
Mailing Address 1212 North Vernon St. City Arlington State VA Zip Code 22201		Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement YTD:\$2000.00 Support for Republican Cand		24K Category/ Type	
Candidate Name			
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10000005002900007	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. America's Majority Trust</b>		Date of Disbursement 02 / 25 / 2002	
Mailing Address 1615 L Street NW Ste 1215 City Washington State DC Zip Code 20036		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Support for Republican Cand		24K Category/ Type	
Candidate Name		Transaction ID: 10000005003000008	
Office Sought: House Senate President	Disbursement For: 2002 Primary      General X Other (specify) ▼		
State:            District:			

Full Name (Last, First, Middle Initial) <b>B. The Reed Committee</b>		Date of Disbursement 02 / 25 / 2002	
Mailing Address P.O. Box 8628 City Cranston State RI Zip Code 02920		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Jack Reed, U.S. SENATE RI		24K Category/ Type	
Candidate Name Jack Reed		Transaction ID: 10000005003100009	
Office Sought: House X Senate President	Disbursement For: 2002 X Primary      General Other (specify) ▼		
State: RI        District:			

Full Name (Last, First, Middle Initial) <b>C. Mike Bilirakis for Congress</b>		Date of Disbursement 02 / 25 / 2002	
Mailing Address P.O. Box 1077 City Tarpon Springs State FL Zip Code 34688		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Michael Bilirakis, U.S. HOU		24K Category/ Type	
Candidate Name Michael Bilirakis		Transaction ID: 10000005003200010	
Office Sought: X House Senate President	Disbursement For: 2002 X Primary      General Other (specify) ▼		
State: FL        District: 8			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Georgians for Isakson</b>		Date of Disbursement 02 / 25 / 2002	
Mailing Address Post Office Box 71955 City Marietta State GA Zip Code 30007		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Johnny Isakson, U.S. HOUSE		24K Category/ Type	
Candidate Name Johnny Isakson			
Office Sought: House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼	Transaction ID: 10000005003300011	
State: GA District: 8			

Full Name (Last, First, Middle Initial) <b>B. Tim Johnson For South Dakota</b>		Date of Disbursement 02 / 28 / 2002	
Mailing Address PO Box 1858 City Sioux Falls State SD Zip Code 57101		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Tim Johnson, U.S. SENATE SD		24K Category/ Type	
Candidate Name Tim Johnson			
Office Sought: House X Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼	Transaction ID: 10000005003400012	
State: SD District:			

Full Name (Last, First, Middle Initial) <b>C. Mark Kennedy '02</b>		Date of Disbursement 02 / 28 / 2002	
Mailing Address 507 Capitol Court NE #100 City Washington State DC Zip Code 20002		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Mark Kennedy, U.S. HOUSE 2n		24K Category/ Type	
Candidate Name Mark Kennedy			
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼	Transaction ID: 10000005003500013	
State: MN District: 2			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. The Freedom Project</b>		Date of Disbursement 02 / 28 / 2002
Mailing Address 111 E Street SE City: Washington State: DC Zip Code: 20003		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement YTD:\$1000.00 Support for Republican Cand		24K Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 10000005003800014
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dole 2002 Committee</b>		Date of Disbursement 02 / 28 / 2002
Mailing Address Post Office Box 2109 City: Salisbury State: NC Zip Code: 28146		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement YTD:\$1000.00 Elizabeth Dole, U.S. SENATE		24K Category/ Type
Candidate Name Elizabeth Dole		
Office Sought: House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: 10000005003700015
State: NC District:		

Full Name (Last, First, Middle Initial) <b>C. Ramstad Volunteer Committee</b>		Date of Disbursement 02 / 28 / 2002
Mailing Address 8100 Penn Avenue South Suite #104 City: Bloomington State: MN Zip Code: 55431		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement YTD:\$1000.00 Jim Ramstad, U.S. HOUSE 3rd		24K Category/ Type
Candidate Name Jim Ramstad		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: 10000005003800016
State: MN District: 3		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. McCollum for Congress</b>		Date of Disbursement 02 / 28 / 2002	
Mailing Address 2464 Burke Ave E City State Zip Code North St Paul MN 55109		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Betty McCollum, U.S. HOUSE		24K Category/ Type	
Candidate Name Betty McCollum			
Office Sought: House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005003900017	
State: MN      District: 4			

Full Name (Last, First, Middle Initial) <b>B. Friends Of Max Cleland</b>		Date of Disbursement 02 / 28 / 2002	
Mailing Address 3148 Northeast Expressway      P O Box 7843 City State Zip Code Atlanta CA 30341		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Max Cleland, U.S. SENATE GA		24K Category/ Type	
Candidate Name Max Cleland			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005004000018	
State: GA      District:			

Full Name (Last, First, Middle Initial) <b>C. Friends Of Roy Blunt</b>		Date of Disbursement 02 / 28 / 2002	
Mailing Address Po Box 278 City State Zip Code Strafford MO 65757		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Roy Blunt, U.S. HOUSE 7th M		24K Category/ Type	
Candidate Name Roy Blunt			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005004100019	
State: MO      District: 7			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b 26	<input type="checkbox"/> 22 27	<input checked="" type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input type="checkbox"/> 29
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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Mike Ross for Congress</b>		Date of Disbursement 02 / 28 / 2002
Mailing Address 227 Massachusetts Ave N.E. Ste 101 City State Zip Code Washington DC 20002		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement YTD:\$1000.00 Michael Avery Ross, U.S. HO		24K Category/ Type
Candidate Name Michael Avery Ross		
Office Sought: House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: 1000005004200020
State: AR District: 4		

Full Name (Last, First, Middle Initial) <b>B. Keep Our Majority PAC</b>		Date of Disbursement 03 / 06 / 2002
Mailing Address 1275 Pennsylvania Ave, NW 10th Floor City State Zip Code Washington DC 20004		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement YTD:\$5000.00 Support for Republican Cand		24K Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 1000005004300021
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jean Camahan for Missouri Committee</b>		Date of Disbursement 03 / 06 / 2002
Mailing Address PO Box 23388 City State Zip Code St. Louis MO 63158		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement YTD:\$1000.00 Jean Camahan, U.S. SENATE		24K Category/ Type
Candidate Name Jean Camahan		
Office Sought: House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: 1000005004400022
State: MO District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Kolbe 2002 Committee</b>		Date of Disbursement 03 / 06 / 2002	
Mailing Address P.O. Box 23593 City: Alexandria State: VA Zip Code: 22304		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Jim Kolbe, U.S. HOUSE 5th A		24K Category/ Type	
Candidate Name Jim Kolbe			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005004500023	
State: AZ      District: 5			

Full Name (Last, First, Middle Initial) <b>B. Kind for Congress</b>		Date of Disbursement 03 / 07 / 2002	
Mailing Address P.O. Box 184 City: La Crosse State: WI Zip Code: 55460-1		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Ron Kind, U.S. HOUSE 3th WI		24K Category/ Type	
Candidate Name Rep Ron Kind			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005179300024	
State: WI      District:			

Full Name (Last, First, Middle Initial) <b>C. Torricelli For U S Senate</b>		Date of Disbursement 03 / 07 / 2002	
Mailing Address 1300 Connecticut Avenue Nw Ste 600 City: Washington State: DC Zip Code: 20036		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Robert G. Torricelli, U.S.		24K Category/ Type	
Candidate Name Robert G. Torricelli			
Office Sought:      House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005179400025	
State: NJ      District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 29
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Collins For Senate</b>		Date of Disbursement 03 / 06 / 2002
Mailing Address PO Box 1096 City: Bangor State: ME Zip Code: 04402		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement YTD:\$1000.00 Susan Collins, U.S. SENATE		24K Category/ Type
Candidate Name Susan Collins		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: 10000005179500028
State: ME District:		

Full Name (Last, First, Middle Initial) <b>B. John Comyn For Senate</b>		Date of Disbursement 03 / 14 / 2002
Mailing Address 807 Brazos Street Suite 800 City: Austin State: TX Zip Code: 78701		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement John Comyn, TX		24K Category/ Type
Candidate Name John Comyn		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: 10000005179600027
State: TX District:		

Full Name (Last, First, Middle Initial) <b>C. Fletcher for Congress</b>		Date of Disbursement 03 / 14 / 2002
Mailing Address P.O. Box 4703 City: Lexington State: KY Zip Code: 40544		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement YTD:\$1000.00 Ernest (Ernie) Fletcher, U.		24K Category/ Type
Candidate Name Ernest (Ernie) Fletcher		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: 10000005179700028
State: KY District: 8		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b 26	<input type="checkbox"/> 22 27	<input checked="" type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input type="checkbox"/> 29
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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Linder For Congress</b>		Date of Disbursement 03 / 14 / 2002	
Mailing Address 2821 Greystone Cove South City Atlanta State GA Zip Code 30341		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 John Linder, U.S. HOUSE 11t		24K Category/ Type	
Candidate Name John Linder			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005179800029	
State: GA      District: 11			

Full Name (Last, First, Middle Initial) <b>B. Anne Northup for Congress</b>		Date of Disbursement 03 / 14 / 2002	
Mailing Address 3340 LEXINGTON ROAD City LOUISVILLE State KY Zip Code 40208		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Anne M. Northup, U.S. HOUSE		24K Category/ Type	
Candidate Name Anne M. Northup			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005179800030	
State: KY      District: 3			

Full Name (Last, First, Middle Initial) <b>C. Hutchinson For Senate</b>		Date of Disbursement 03 / 14 / 2002	
Mailing Address PO Box 898 City Rogers State AR Zip Code 72757		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Tim Hutchinson, U.S. SENATE		24K Category/ Type	
Candidate Name Tim Hutchinson			
Office Sought:      House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: 10000005180000031	
State: AR      District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Nancy Jahnsan for Congress</b>		Date of Disbursement 03 / 15 / 2002	
Mailing Address P.O. Box 1986 City State Zip Code New Britain CT 06050		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$2000.00 Nancy L. Johnson, U.S. HOUS		24K Category/ Type	
Candidate Name Nancy L. Johnson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: CT      District: 8	Transaction ID: 10000005180100032		

Full Name (Last, First, Middle Initial) <b>B. Friends Of Senator Rockefeller</b>		Date of Disbursement 03 / 20 / 2002	
Mailing Address 236 Massachusetts Avenue #310 City State Zip Code Washington DC 20002		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 John D. Rockefeller, U.S. S		24K Category/ Type	
Candidate Name John D. Rockefeller IV			
Office Sought:    House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: WV      District:	Transaction ID: 10000005180200033		

Full Name (Last, First, Middle Initial) <b>C. Earl Pomeroy for Congress</b>		Date of Disbursement 03 / 22 / 2002	
Mailing Address P.O. Box 75214 City State Zip Code Washington DC 20013-5214		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Earl Pomeroy, U.S. HOUSE AL		24K Category/ Type	
Candidate Name Earl Pomeroy			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: ND      District:	Transaction ID: 10000005180300034		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) <b>A. Friends of Max Baucus</b>			Date of Disbursement 03 / 22 / 2002	
Mailing Address P.O. Box 586 City: Helena State: MT Zip Code: 59624			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Max Baucus, U.S. SENATE MT			24K Category/ Type	
Candidate Name Max Baucus				
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		Transaction ID: 10000005180400035	
State: MT      District:				

Full Name (Last, First, Middle Initial) <b>B. Friends of Jennifer Dunn</b>			Date of Disbursement 03 / 22 / 2002	
Mailing Address P.O. Box 40110 City: Bellevue State: WA Zip Code: 98015			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Jennifer Dunn, U.S. HOUSE 8			24K Category/ Type	
Candidate Name Jennifer Dunn				
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		Transaction ID: 10000005180500036	
State: WA      District: 8				

Full Name (Last, First, Middle Initial) <b>C. Chabot For Congress</b>			Date of Disbursement 03 / 22 / 2002	
Mailing Address 331 E. 4th Street City: Cincinnati State: OH Zip Code: 45211			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Steve Chabot, U.S. HOUSE 1s			24K Category/ Type	
Candidate Name Steve Chabot				
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		Transaction ID: 10000005180600037	
State: OH      District: 1				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>41000.00</b>