Image# 10992461263					PAGE 1 / 174
	EPORT OF IND DISBUR	SEMENT	S	Office Use	e Only
1. NAME OF TYL COMMITTEE (in full)	PE OR PRINT ▼	Example: If typin over the lines.	ng, type 12F	E4M5	
UnitedHealth Group Inco	rporated PAC (Unit	ed for Health)			
ADDRESS (number and street)	9900 Bren Road East				
Check if different than previously reported. (ACC)	∐		MN	55343	
2. FEC IDENTIFICATION NUME		< ▲	STATE	▲ Z	
C C00274431	3. IS RE		NEW OR X	AMENDED (A)	
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) X January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) 	Report Due On: Mar 2	20 (M3)		unoff (30R)	 Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) Runoff (12R) Special (30S) in the State of
5. Covering Period 07	Report and to the best of r Sherwood, Susan, , ,	through	12 31		9
	I, Susan, , ,		Date	12 / 06	D / Y Y Y Y Y 2010
NOTE: Submission of false, erroneous Office Use Only	s, or incomplete information	may subject the pers	son signing this Repo	FEC	s of 52 U.S.C. § 30109 FORM 3X ev. 05/2016

04/01/2025 13 : 04

Image# 10992461264

_	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS
FEC Form 3X (Rev. 05/2016)	
Write or Type Committee Name	
UnitedHealth Group Incorporated	PAC (United for Health)

Page 2

R	eport Covering the Period: From: 07	/ 01 / 2009 To	b: 12 / D D / Y Y Y Y Y 31 2009
	-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2009		224784.14
	(b) Cash on Hand at Beginning of Reporting Period	203536.48	
	(c) Total Receipts (from Line 19)	212188.35	414615.69
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	415724.83	639399.83
7.	Total Disbursements (from Line 31)	238075.00	461750.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	177649.83	177649.83
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	

X

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

FEC Form 3X (Rev. 05/2016) Pa Write or Type Committee Name Pa	age 3
United Health Crown Incornerated DAC (United for Health)	
UnitedHealth Group Incorporated PAC (United for Health)	
Report Covering the Period: From: M M / D D / Y Y Y Y Y To: 12 31	2009
I. Receipts COLUMN A COLUMN B Total This Period Calendar Year-to-	Date
11. Contributions (other than loans) From:	
(a) Individuals/Persons Other Than Political Committees	
	364130.31
	40005-00
(ii) Unitemized 15286.99 (iii) TOTAL (add	46695.32
	410825.63
	0.00
(b) Political Party Committees	0.00
(c) Other Political Committees (such as PACs)	190.06
(d) Total Contributions (add Lines	
11(a)(iii), (b), and (c)) (Carry Totals to Line 23, page 5) 208588.35	411015.69
Totals to Line 33, page 5)	
Party Committees	0.00
12 All Loope Received	0.00
13. All Loans Received	0.00
14. Loan Repayments Received	0.00
15. Offsets To Operating Expenditures	
(Refunds, Rebates, etc.)	0.00
(Carry Totals to Line 37, page 5)	0.00
to Federal Candidates and Other	
Political Committees	3600.00
17. Other Federal Receipts	0.00
(Dividends, Interest, etc.)	0.00
(a) Non-Federal Account	
(from Schedule H3) 0.00	0.00
(b) Levin Funds (from Schedule H5) 0.00	0.00
(b) Levin Funds (from Schedule H5)	
(c) Total Transfers (add 18(a) and 18(b))	0.00
19. Total Receipts (add Lines 11(d),	
12, 13, 14, 15, 16, 17, and 18(c)) ≥ 212188.35	14615.69
20. Total Federal Receipts	
	14615.69

Image# 10992461265

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 336500.00 158500.00 and Other Political Committees... 24. Independent Expenditures (use Schedule E)..... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 19 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 29. Other Disbursements (Including 125250.00 Non-Federal Donations)..... 79575.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share 0.00 0.00 (ii) "Levin" Share..... 0.00 0.00 (b) Federal Election Activity Paid Entirely With Federal Funds 0.00 0.00 Total Federal Election Activity (add (C) Lines 30(a)(i), 30(a)(ii) and 30(b)) 0.00 0.00 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 238075.00 461750.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 238075.00 461750.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC	Form	3X	(Rev.	05/2016))
1 20		0/1	(1101.	00/2010	,

III. Net Contributions/ Operating Expenditures

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

(subtract Line 37 from Line 36)

	Ţ	-			-	208588.35
	-				,	
		-			-	0.00
						208588.35
		-7			-1	1 1 28
						0.00
	÷	-	÷	÷	-	
I .					-	0.00
	-		-	-	,	
		-7-			-7-	0.00

411015.69 0.00 411015.69 0.00 7 0.00 0.00 0.00

COLUMN B

Calendar Year-to-Date



:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F3XA Transaction ID :

This amendment is to correct a clerical error regarding designation of election.

Form/Schedule: Transaction ID:

FOR LINE NUMBER:

PAGE 7 OF

		Use separate schedule(s)	(check only one)					
II EIVIIZED RECEIPIO		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 see to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (Jnited for Health)						
Full Name of Individual (Last, First, Middle Sommer, Judah, C., ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 701 Pennsylvania Ave NW Suite 530/650			12 / D D / Y Y Y Y Y 12 17 2009					
City Washington	State DC	Zip Code 20004-2606	Transaction ID : 31055122 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C Put	olic Affairs	5000.00					
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item					
Receipt For:		Year-to-Date V	15					
Primary General	Aggregate		-					
Other (specify)		5000.00						
Full Name of Individual (Last, First, Middle B. GROSS, MICHAEL R, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9900 Bren Road East			12 31 2009					
City	State	Zip Code	Transaction ID : PR1159789623217					
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C Act	uarial Director	100.00					
Name of Employer (for Individual)		upation (for Individual) ted HealthCare Corporation	Memo Item					
Receipt For:		Year-to-Date ▼	15					
Other (specify) ▼		, 212.00						
Full Name of Individual (Last, First, Middle C. CHAPMAN, MOLLIE, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009					
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159790523217 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C Ass	soc Dir Network Contra	130.00					
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify)		270.00						
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			5230.00					

FOR LINE NUMBER:

PAGE 8 OF

	e	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPT	3	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from s or for commercial purposes, c	such Reports and Statements n ther than using the name and	L nay not be sold or used by any p address of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (I	n Full)							
UnitedHealth Grou	up Incorporated PAC	(United for Health)						
Full Name of Individual (La A. HOVERMAN, KEN L, ,	st, First, Middle Initial) or Full	Organization Name	Date of Receipt					
Mailing Address 9900 Brer	Road East		12 31 Y Y Y Y 2009					
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159790923217 Amount of Each Receipt this Period					
FEC ID number of contribution federal political committee.	ting C VI	P Marketing	130.00					
Name of Employer (for Ind	,	cupation (for Individual) itedHealth Group, Inc.	Memo Item					
Receipt For: Primary Ge Other (specify) ▼	Aggregate	e Year-to-Date ▼ 410.00						
Full Name of Individual (La B. TULUMELLO, PAMEL Mailing Address 9900 Brer		Organization Name	Date of Receipt					
City	State	Zip Code 55343-9664	12 31 2009 Transaction ID : PR1159793123217					
FEC ID number of contributed federal political committee.	Iting	r Claims Quality	Amount of Each Receipt this Period					
Name of Employer (for Inc	,	cupation (for Individual) hitedHealth Group, Inc.	Memo Item					
Receipt For: Primary Ge Other (specify) ▼	Aggregate	e Year-to-Date ▼ 270.00]					
Full Name of Individual (La C. STREB, DEBORAH	st, First, Middle Initial) or Full S, , ,	Organization Name	Date of Receipt					
Mailing Address 9900 Brer	n Road East		12 / D D / Y Y Y Y 12 31 2009					
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159794123217 Amount of Each Receipt this Period					
FEC ID number of contribution federal political committee.	iting C D	ir Project Management	130.00					
Name of Employer (for Ind		cupation (for Individual) itedHealth Group, Inc.	Memo Item					
Receipt For: Primary Ge Other (specify)	neral Aggregate	e Year-to-Date ▼ 270.00]					
SUBTOTAL of Receipts This	Page (optional)		390.00					
TOTAL This Period (last pag	e this line number only)							

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PAGE

9 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			person for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (United for Health)						
Full Name of Individual (Last, First, Middle	Initial) or Full O	organization Name						
A. KAZLAUSKAS, ANTHONY J, , ,			Date of Receipt					
Mailing Address 9900 Bren Road East			12 31 2009					
City	State	Zip Code	Transaction ID : PR1159794623217					
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C Sr I	Medical Director	260.00					
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	13					
Other (specify) ▼		540.00	1					
Other (specify) V			1					
Full Name of Individual (Last, First, Middle B. MUGGIO, CARLA M, , ,	Initial) or Full O	Prganization Name	Date of Receipt					
Mailing Address 9900 Bren Road East			12 31 2009					
City	State	Zip Code	Transaction ID : PR1159798223217 Amount of Each Receipt this Period					
Minnetonka	MN	55343-9664						
FEC ID number of contributing federal political committee.	C Net	work Contract Director	249.99					
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		519.21]					
Full Name of Individual (Last, First, Middle C. WHETSTINE, HERBERT L, , ,	Initial) or Full O	Prganization Name	Date of Receipt					
Mailing Address 9900 Bren Road East			12 31 2009					
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159803623217 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C Dir	Aviation & Corp Pilots	124.93					
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15					
Receipt For:	Aggregate	Year-to-Date V						
Other (specify)		259.47]					
SUBTOTAL of Receipts This Page (optional)			634.92					
TOTAL This Period (last page this line numb	er only)	······						

FOR LINE NUMBER:

PAGE 10 OF

17			Use separate schedule(s)	(check only one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
$\overline{)}$	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporated	d PAC (l	Jnited for Health)						
Α.	Full Name of Individual (Last, First, Middle Initia BELLOWS, BRIAN R, , ,	l) or Full O	rganization Name	Date of	Receipt				
Mailing Address 9900 Bren Road East				12 ^M	/ D D D 31	/ Y	y y 2009	Y	
	City Minnetonka	State MN	Zip Code 55343-9664		ction ID : Pl of Each Rec			7	
	FEC ID number of contributing federal political committee.	C Dir	Bus Dvlp			-9-	195.0	00	
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15	mo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 405.00						
в.	Full Name of Individual (Last, First, Middle Initia NOBLITT, KEITH W, , ,	l) or Full O	rganization Name	Date of	Receipt				
	Mailing Address 9900 Bren Road East		^M ^M 12	/ D D 31	/ Y	y y 2009	Y		
	City Minnetonka	State MN	Zip Code 55343-9664		ction ID : Pf of Each Rec			7	
	FEC ID number of contributing federal political committee.	C Stra	trategic Client Exec-Unic					00	
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Me	mo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00						
— С.	Full Name of Individual (Last, First, Middle Initia ELLISTON, JAMES S, , ,	ll) or Full O	rganization Name	Date of	Receipt				
	Mailing Address 9900 Bren Road East		12	/ D D 31	/ Y	2009 [°]	Y		
	City Minnetonka	State MN	Zip Code 55343-9664		of Each Rec			7	
	FEC ID number of contributing federal political committee.	C Ass	soc Dir Finance				130.0	00	
	Name of Employer (for Individual)	upation (for Individual) edHealth Group, Inc.	15	mo Item					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						
	Other (specify)	235.00							
s	UBTOTAL of Receipts This Page (optional)		•••••		,	9	585.0	00	
т	OTAL This Period (last page this line number or	ıly)	•••••			-			

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PAGE 11 OF

	EIVITZED RECEIPIS		for each category of the	X 11a 11b 11c 12						
			Detailed Summary Page							
	for commercial purposes, other than using the			berson for the purpose of soliciting contributions be to solicit contributions from such committee.						
\backslash	NAME OF COMMITTEE (In Full)									
$\Big $	UnitedHealth Group Incorporate									
A.	Full Name of Individual (Last, First, Middle In WATSON III, JAMES S, , ,	Date of Receipt								
	Mailing Address 9900 Bren Road East			12 31 Y Y Y Y 12 31 2009						
	City	State	Zip Code	Transaction ID : PR1159806023217						
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C Gov	vt Rel Assoc Dir	325.00						
	Name of Employer (for Individual)	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		634.61]						
В.	Full Name of Individual (Last, First, Middle In NEVIN, MARILYN C, , ,	itial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 9900 Bren Road East	12 31 2009								
	City	State	Zip Code	Transaction ID : PR1159807423217						
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C VP	Finance	130.00						
	Name of Employer (for Individual)		upation (for Individual) iedHealth Group, Inc.	Memo Item						
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify)		270.00]						
C.	Full Name of Individual (Last, First, Middle In ABELMANN, NANCY C, , ,	Date of Receipt								
	Mailing Address 9900 Bren Road East	12 12 1 1 2009								
	City	State	Zip Code	Transaction ID : PR1159809123217						
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C Dir	Tax	174.98						
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item						
	Receipt For:		Year-to-Date ▼							
	Primary General		-							
	Other (specify)		346.14							
s	UBTOTAL of Receipts This Page (optional)			629.98						
Т	OTAL This Period (last page this line number	only)								

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(check only one)

PAGE 12 OF

	EIVIZED RECEIPIS		Detailed Summary Page			11a		11	1b 🗌	1	1c		12				
						13		14	4	1	5		16	17			
	y information copied from such Reports and Stat for commercial purposes, other than using the na																
\backslash	NAME OF COMMITTEE (In Full)																
$\Big\rangle$	UnitedHealth Group Incorporated	PAC (l	Un	ited for Health)													
A.	Full Name of Individual (Last, First, Middle Initial WHITELY, WILLIAM P, , ,) or Full O	rgar	nization Name		Date of	f Re	ece	eipt								
	Mailing Address 9900 Bren Road East					12 ^M	1	E	D D 31	/	Y	ү 20	09	Y			
	City Minnetonka	State MN		Zip Code 55343-9664	Transaction ID : PR1159812623217 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	C Ser	nior	Vice President													
	Name of Employer (for Individual)		•	ion (for Individual) lealth Group, Inc.	1		emo	o It	em								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 4999.80													
В.	Full Name of Individual (Last, First, Middle Initial COOK, WAYNE F, , ,) or Full O	rgai	nization Name		Date of	f Re	ece	eipt								
	Mailing Address 9900 Bren Road East					12	/	ľ	D D 31	/	Y	y 200)9 09	Ŷ			
	City Minnetonka	State MN		Zip Code 55343-9664		Trans								,			
	FEC ID number of contributing federal political committee.	C Pres		780.00													
	Name of Employer (for Individual)		•	ion (for Individual) HealthGroup	1		emo	o It	em								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1426.14													
с.	Full Name of Individual (Last, First, Middle Initial CAROLAN, WILLIAM J, , ,) or Full O	rgai	nization Name		Date of	f Re	ece	eipt								
	Mailing Address 9900 Bren Road East					^M 12	/	ſ	D D D 31	/	Y	y 200	09	Ŷ			
	City Minnetonka	State MN		Zip Code 55343-9664		Trans Amoun		-				-	-	7			
	FEC ID number of contributing federal political committee.	C Stra	ateg	ic Client Exec-Unip				,			, ,		99.9	7			
	Name of Employer (for Individual)		•	ion (for Individual) ealth Group, Inc.	1	М 5	emc	o It	tem								
	Receipt For:	Aggregate	Yea	r-to-Date ▼													
	Primary General Other (specify)		- -	207.63													
s	UBTOTAL of Receipts This Page (optional)			•••••	•			,	-	_	9	3	187.5	7			
Т	OTAL This Period (last page this line number on	ly)		••••••	•			-			-	_	-	_			

FOR LINE NUMBER:

PAGE 13 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)										
I LEIVIIZED RECEIPIS		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)												
ight angle UnitedHealth Group Ir	ncorporated PAC (l	Jnited for Health)											
Full Name of Individual (Last, Fi A. WICHMANN, DAVID S, , ,	rst, Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road	l East		12 31 / Y Y Y Y 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159814723217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	CEVE	P & Pres UHG Operatio	2307.60										
Name of Employer (for Individua	,	upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For:		Year-to-Date ▼	15										
Primary General	Aggregate		-										
Other (specify) ▼		4999.10											
Full Name of Individual (Last, Fi B. ERLANDSON, PATRICK J,		rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road			12 31 2009										
City	State	Zip Code	Transaction ID : PR1159815923217										
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C SVF	P Business Operations	2307.60										
Name of Employer (for Individua	,	upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		4999.80]										
Full Name of Individual (Last, Fi C. SAURO, PATRICIA R, , ,	rst, Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road	d East		12 31 Y Y Y Y 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159816423217										
FEC ID number of contributing federal political committee.	C Bus	siness Segment CAO	Amount of Each Receipt this Period										
Name of Employer (for Individua		upation (for Individual) ed HealthGroup, Inc.	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1900.00]										
SUBTOTAL of Receipts This Page TOTAL This Period (last page this			5395.20										

FOR LINE NUMBER:

PAGE 14 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 berson for the purpose of soliciting contributions a to collicit contributions from such committee										
NAME OF COMMITTEE (In Full)	ng the name and a	doress of any political committe	e to solicit contributions from such committee.										
UnitedHealth Group Incorp	orated BAC (I	Inited for Health)											
Full Name of Individual (Last, First, Mid MUNSELL, WILLIAM A, , ,	dle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159816623217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	CEVI	P UnitedHealth Group	1300.00										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2700.00]										
Full Name of Individual (Last, First, Mid PENSHORN, JOHN S, , ,	dle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East	State	Zip Code	12 / D D / Y Y Y Y 12 31 2009										
Minnetonka	MN	55343-9664	Transaction ID : PR1159816923217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C SVF	P UnitedHealth Group	1300.00										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2700.00]										
Full Name of Individual (Last, First, Mid C. KALLMEYER, PAUL D, , ,	dle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159817423217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Dep	outy General Counsel (650.00										
Name of Employer (for Individual)		upation (for Individual) ed HealthGroup	15										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1170.00]										
SUBTOTAL of Receipts This Page (option	nal)		3250.00										
TOTAL This Period (last page this line nu	mber only)												

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PAGE 15 OF

			for each category of the Detailed Summary Page											
	y information copied from such Reports and St for commercial purposes, other than using the			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporate	d PAC (I	Jnited for Health)											
۹.	Full Name of Individual (Last, First, Middle Initi RYAN, TIMOTHY F, , ,	ial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 9900 Bren Road East			12 D D / Y Y Y Y 12 31 2009										
	City	State MN	Zip Code	Transaction ID : PR1159817923217										
	Minnetonka		55343-9664	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Bus	siness Segment Gen C	247.00										
	Name of Employer (for Individual)		upation (for Individual) edHealth Group	Memo Item										
	Receipt For:	Aggregate	Year-to-Date V											
	Other (specify) ▼		513.00]										
В.	Full Name of Individual (Last, First, Middle Initi QUIRK, THOMAS J, , ,	ial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
	City	State	Zip Code	Transaction ID : PR1159819123217										
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	СНеа	alth Plan CEO	499.98										
	Name of Employer (for Individual)		upation (for Individual) iedHealth Group	Memo Item										
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General Other (specify) ▼		1038.42											
с.	Full Name of Individual (Last, First, Middle Initi ROSE, BRIAN H, , ,	ial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y 12 31 2009										
	City	State	Zip Code	Transaction ID : PR1159819423217										
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Sr I	Medical Director	99.97										
	Name of Employer (for Individual)		upation (for Individual) edHealthGroup	Memo Item										
	Receipt For:		Year-to-Date ▼											
	Primary General			1										
	Other (specify)	L	207.63											
s	UBTOTAL of Receipts This Page (optional)			846.95										
т	OTAL This Period (last page this line number of	only)												

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	EMIZED RECEIPTS		Detailed Summary Page					-	1b	11c		12				
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	for commercial purposes, other than using the															
\backslash	NAME OF COMMITTEE (In Full)															
]	UnitedHealth Group Incorporate	d PAC (I	Un	ited for Health)												
Α.	Full Name of Individual (Last, First, Middle Initi TUCKSON, REED V, , , M.D.	al) or Full O	rga	nization Name	[Date o	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East					[™] 12	1		D D 31	1		2009	Y			
	City	State MN		Zip Code 55343-9664						PR115			7			
	Minnetonka		-	00040-0004	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	CEV	PC	onsumr Health & M	1499.94											
	Name of Employer (for Individual)		•	tion (for Individual) lealth Group			lemc	o It	tem							
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻		-										
	Primary General Other (specify) ▼		-	3115.26]											
В.	Full Name of Individual (Last, First, Middle Initi FALK, DAVID J, , ,	al) or Full O	orga	nization Name		Date o	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East				12 31 Y Y Y Y Y 12 31 2009											
	City	State		Zip Code		Transaction ID : PR1159820223217										
	Minnetonka	MN		55343-9664	/	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	СМе	dica	I Director		162.50										
	Name of Employer (for Individual)		•	tion (for Individual) Health Group, Inc.	15	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 337,50	1											
С.	Full Name of Individual (Last, First, Middle Initi OBERMAN, DEBRA A, , ,	al) or Full O	rga	nization Name		Date o	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East					^M 12	/	I	D D D 31	/		009	Y			
	City Minnetonka	State MN		Zip Code 55343-9664						PR115			7			
	FEC ID number of contributing federal political committee.	С ир	Go	v't Relations		unoun				550ipt		249.9	99			
	Name of Employer (for Individual)		•	tion (for Individual) lealth Group, Inc.		Memo Item										
	Receipt For:	Aggregate	Yea	ar-to-Date V	"	-										
	Other (specify)		-	519.21												
s	UBTOTAL of Receipts This Page (optional)				•							1912.4	13			
т	OTAL This Period (last page this line number o	nly)										1.4				

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
\backslash	NAME OF COMMITTEE (In Full)			
$\Big\rangle$	UnitedHealth Group Incorporated	PAC (l	Jnited for Health)	
A.	Full Name of Individual (Last, First, Middle Initial TRACY, WILLIAM C, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East	1		12 / D D / Y Y Y Y Y 12 31 2009
	City	State MN	Zip Code	Transaction ID : PR1159821523217
	Minnetonka		55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С Неа	alth Plan CEO	750.10
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1557.90]
В.	Full Name of Individual (Last, First, Middle Initial HAWKINS, MICHAEL M, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y 12 31 2009
	City	State	Zip Code	Transaction ID : PR1159822023217
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C Sr M	Nedical Director	150.02
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		311.58]
с.	Full Name of Individual (Last, First, Middle Initial SCHNEEWEIS, CAROL M, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y Y 12 31 2009
	City	State	Zip Code	Transaction ID : PR1159823523217
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C Dir	Medical & Clinical Ops	325.00
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
	Receipt For:		Year-to-Date ▼	
	Primary General	riggrogato		1
	Other (specify)		710.00	
s	UBTOTAL of Receipts This Page (optional)			1225.12
т	OTAL This Period (last page this line number on	ly)	••••••	

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			Detailed Summary Page			11a 13		11b 14		11c 15		12 16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r					for the		oose (oliciting		ntributi	ons			
$\overline{)}$	NAME OF COMMITTEE (In Full)															
\rangle	UnitedHealth Group Incorporated	d PAC (I	Un	ited for Health)												
A.	Full Name of Individual (Last, First, Middle Initia MIGLIORI, RICHARD J, , ,	ll) or Full O	Orga	nization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East					^M 12	1	3		/ Y	Y 20	009	Y			
	City Minnetonka	State MN		Zip Code 55343-9664	Transaction ID : PR1159827423217 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C sv	'P Bi	us Initiatives & Clin	999.96											
	Name of Employer (for Individual)		•	tion (for Individual) lealth Group, Inc.	1	М 5	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2076.84	1											
B.	Full Name of Individual (Last, First, Middle Initia BUENEMANN, BARBARA C, , ,	ll) or Full O	Orga	nization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East			1	12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y											
	City Minnetonka	State MN		Zip Code 55343-9664						R11598 ceipt th			,			
	FEC ID number of contributing federal political committee.	C Dir	Cus	tomer Service		150.02										
	Name of Employer (for Individual)		•	tion (for Individual) Health Group, Inc.	1		emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ , 311.58]											
C.	Full Name of Individual (Last, First, Middle Initia RIVET, JEANNINE M, , ,	l) or Full O	Orga	nization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East			1		^M 12	1	- Li	1	/ Y	20)09 [°]				
	City Minnetonka	State MN		Zip Code 55343-9664						R1159			7			
	FEC ID number of contributing federal political committee.	CEV	/P U	nitedHealth Group				y		y	2	2307.6	0			
	Name of Employer (for Individual)		•	tion (for Individual) ealth Group, Inc.	1	М 5	emo	ltem								
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ur-to-Date ▼ 4999.80]											
s	UBTOTAL of Receipts This Page (optional)				•			,		9	3	3457.5	8			
т	OTAL This Period (last page this line number or	וy)			•			-		-						

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Re	ports and Statements ma	l ay not be sold or used by any p	13 14 15 16 17 verson for the purpose of soliciting contributions										
1	an using the name and a	ddress of any political committee	e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Inc	corporated PAC (United for Health)											
Full Name of Individual (Last, Firs A. SHUFF, JACK E, , ,	t, Middle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road I	East		12 31 / Y Y Y Y Y 12 31 2009										
City	State	Zip Code	Transaction ID : PR1159830523217										
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С ѕв	RVP	249.99										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		519.21]										
Full Name of Individual (Last, Firs B. STEVENSON, JOHN F, , ,	t, Middle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road B	East		12 / D D / Y Y Y Y 12 31 2009										
City	State	Zip Code	Transaction ID : PR1159839323217										
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Sr /	Associate General Cou	127.40										
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item										
Receipt For:	Aggregate	Year-to-Date V											
Other (specify)		264.60	1										
Full Name of Individual (Last, Firs C. WINTERS, JILL, , ,	t, Middle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road			12 / D D / Y Y Y Y Y 12 31 2009										
City	State	Zip Code	Transaction ID : PR1159840423217										
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C VP	General Management	702.00										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For:	Agaregate	Year-to-Date ▼											
Primary General			1										
Other (specify)		1458.00	1										
SUBTOTAL of Receipts This Page	(optional)		1079.39										
TOTAL This Period (last page this li	ne number only)	,											

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			Detailed Summary Page		11a 13		11b	11c		12 16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the		oose of s			ntribut					
	NAME OF COMMITTEE (In Full)						-								
\rangle	UnitedHealth Group Incorporated	I PAC (l	Jnited for Health)												
Α.	Full Name of Individual (Last, First, Middle Initial BURTON, THOMAS E, , ,	l) or Full O	rganization Name	[Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East				м м 12	/	D D D 31	/ Y	ү 20) 009	Y				
	City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1159841623217 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C VP	Actuary	108.29											
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 224.91												
в.	Full Name of Individual (Last, First, Middle Initial WELTERS, ANTHONY, , Mr.,	l) or Full O	rganization Name	[Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
	City Minnetonka	State MN	Zip Code 55343-9664				on ID : P Each Re				,				
	FEC ID number of contributing federal political committee.	CEVE	P UnitedHealth Group		2499.90										
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.			emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.80												
C.	Full Name of Individual (Last, First, Middle Initial KIRCHNER, JOHN, , ,	l) or Full O	rganization Name	[Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East				м м 12	/	D D D 31	/ Y		009	Ŷ				
	City Minnetonka	State MN	Zip Code 55343-9664				i on ID : P Each Re				7				
	FEC ID number of contributing federal political committee.	C Exe	ecutive Director		_		,	y		499.9	8				
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emo	Item								
		Aggregate	Year-to-Date 🔻												
	Other (specify)		1038.42												
	UBTOTAL of Receipts This Page (optional)			• -	-		9		:	3108.1	7				

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	EMIZED RECEIPTS		Detailed Summary Page			11a		11	- H	11c		12	<u> </u>				
	y information copied from such Reports and Sta for commercial purposes, other than using the r								se of a								
	NAME OF COMMITTEE (In Full)		200165		, 10 501	icit CO	UID	Jun	11 611	on suc	11 00						
\rangle	UnitedHealth Group Incorporated	d PAC (Unit	ed for Health)													
A.	Full Name of Individual (Last, First, Middle Initia DUGGIN, THELMA, , ,	al) or Full C	Organi	zation Name	[Date of	f Re	ecei	ipt								
	Mailing Address 9900 Bren Road East					12 / D D / Y Y Y Y 12 31 2009											
	City Minnetonka	State MN		Zip Code 55343-9664	Transaction ID : PR1530799223217 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	C sv	/P Uni	tedHealth Group	2307.72												
	Name of Employer (for Individual)		•	on (for Individual) alth Group, Inc.	1:		emo	o Ite	em								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	to-Date ▼ 4999.90													
В.	Full Name of Individual (Last, First, Middle Initia BOHNENKAMP, ROBERT J, , ,	al) or Full C	Organi	zation Name		Date of	f Re	ecei	ipt								
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y												
	City Minnetonka	State MN		Zip Code 55343-9664	A					PR1551 eceipt t			,				
	FEC ID number of contributing federal political committee.	C Bus	siness		2307.60												
	Name of Employer (for Individual)		•	on (for Individual) ealth Group, Inc.		Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year														
с.	Full Name of Individual (Last, First, Middle Initia BRESOLIN, MICHAEL J, , ,	al) or Full C	Drgani	zation Name		Date of	f Re	ecei	ipt								
	Mailing Address 9900 Bren Road East					^M 12	1	Г	31	/ Y)09 [°]	Y				
	City Minnetonka	State MN		Zip Code 55343-9664	A					PR1551							
	FEC ID number of contributing federal political committee.	C Dir	r Care	Advocacy				y		,	_	260.0	0				
	Name of Employer (for Individual)		•	on (for Individual) alth Group, Inc.	1		emo	o Ite	em								
	Receipt For: Primary General Other (specify)	Aggregate	Year	to-Date ▼ 540.00	1												
s	UBTOTAL of Receipts This Page (optional)							9		. ,	4	4875.3	2				
т	OTAL This Period (last page this line number or	nly)						-									

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NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorp	porated PAC (United for Health)												
Full Name of Individual (Last, First, Mi DONOVAN, RITA T, T, ,	iddle Initial) or Full O	rganization Name	Da	ate of	Ree	ceipt								
Mailing Address 9900 Bren Road East			_ L	12	/	31		Y	2009					
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		JJJJ-JJUU4	An	nount	of	⊢ach F	Receip	ot this	Period					
FEC ID number of contributing federal political committee.	C Dir	Network Contracting						,	99.	97				
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15	Me	emo	tem								
Receipt For:		Year-to-Date ▼	CI											
Primary General Other (specify) ▼		207.63]											
Full Name of Individual (Last, First, Mi B. HEADY, TIMOTHY J, , ,	iddle Initial) or Full O	rganization Name	Da	ate of	Ree	ceipt								
Mailing Address 9900 Bren Road East				12	/	, 31		Y	y y 2009	Y				
City	State	Zip Code		Transaction ID : PR1551122523217										
Minnetonka	MN	55343-9664							Period					
FEC ID number of contributing federal political committee.	C SVF	ວ Pharmacy Benefit Mເ		520.00 Memo Item										
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	15											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1080.00]											
Full Name of Individual (Last, First, Mi C. HOCK, CHRISTOPHER R, , ,	ddle Initial) or Full O	rganization Name	Da	ate of	Ree	ceipt								
Mailing Address 9900 Bren Road East				12	/	31			y y 2009	Y				
City Minnetonka	State MN	Zip Code 55343-9664							2 892321 Period	7				
FEC ID number of contributing federal political committee.	C Dir	General Management			_	,		,	150.	02				
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15		emo	tem								
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify)		311.58]											
SUBTOTAL of Receipts This Page (optic			<u> </u>		_				769.	99				
TOTAL This Period (last page this line r	umber only)	······						, ,						

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	EMIZED RECEIPTS		Detailed Summary Page			11a		-	1b	11c		12	<u> </u>			
	y information copied from such Reports and Sta								se of							
or	for commercial purposes, other than using the r	name and a	addre	ess of any political committee	e to sol	icit co	ntrib	outi	ions fr	om suc	h co	ommitte	e.			
	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporated	d PAC (Un	ited for Health)												
Α.	Full Name of Individual (Last, First, Middle Initia HOLUBEC, LISA G, G, ,	al) or Full C	Orgar	nization Name		Date o	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East					12 31 Y Y Y Y Y 2009										
	City	State		Zip Code		Trans	acti	ior	ו ID : I	PR1551	129	22321	7			
	Minnetonka	MN		55343-9664	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C Ass	soc [Dir Med & Clinical (190.00											
	Name of Employer (for Individual)		•	ion (for Individual) lealth Group, Inc.			emo	o It	tem							
	Receipt For:	Aggregate	Yea	r-to-Date ▼	- '`	5										
	Primary General Other (specify) V		-7-	309.21]											
<u></u> В.	Full Name of Individual (Last, First, Middle Initia KAGAN, JEFFREY W, , ,	al) or Full C	Drgar	nization Name		Date o	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y 12 31 2009											
	City	State		Zip Code		Trans	acti	ion	n ID : F	PR1551	1323	323217	,			
	Minnetonka	MN		55343-9664	A	Amoun	t of	Ea	ach Re	eceipt t	his F	Period				
	FEC ID number of contributing federal political committee.	C VP		260.00												
	Name of Employer (for Individual)		•	ion (for Individual) lealth Group, Inc.		Memo Item										
	Receipt For:	Aggregate	Yea	r-to-Date ▼												
	Other (specify) ▼		,	540.00												
С.	Full Name of Individual (Last, First, Middle Initia KNUTSON, GERALD JOHN, , ,	al) or Full C	Orgar	nization Name		Date o	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East			-		^M 12	/	l	31	/ Y) 009	Y			
	City Minnetonka	State MN		Zip Code 55343-9664	-			-		PR1551	-		7			
	FEC ID number of contributing federal political committee.	СВи	sine	ss Segment CFO				ŋ		,		260.0	0			
	Name of Employer (for Individual)		•	ion (for Individual) ealth Group, Inc.			emc	o It	tem							
	Receipt For:	Aggregate	Yea	r-to-Date ▼												
	Other (specify)		-7-	706.14]											
s	UBTOTAL of Receipts This Page (optional)				•							710.0	0			
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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information conied from such Deports on	d Statemonte m		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 Incorport	ated PAC (United for Health)	
Full Name of Individual (Last, First, Middle	Initial) or Full O	organization Name	
A. MATTEO, MICHAEL C, , ,			Date of Receipt
Mailing Address 9900 Bren Road East			12 31 2009
City	State	Zip Code	Transaction ID : PR1551133423217
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C CE	O National Accounts	249.99
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
·	Unit	tedHealth Group, Inc.	15
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		519.21	1
			-
Full Name of Individual (Last, First, Middle B. MORAGA, DANIEL, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 31 2009
City	State	Zip Code	Transaction ID : PR1551134223217
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C Ass	soc Dir General Manag	99.97
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item
Receipt For:		Year-to-Date ▼	15
Primary General			
Other (specify)	L	, 207.63	
Full Name of Individual (Last, First, Middle C. OWENS, DAWN M, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 31 2009
City	State MN	Zip Code	Transaction ID : PR1551160323217
Minnetonka	IVIIN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C Bus	siness Segment CEO	249.99
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify)		519.21]
SUPTOTAL of Possista This Page (antised)			599.95
SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page this line numb	er only)		

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			Detailed Summary		X	11a		11b	11c		12	
An	y information copied from such Reports and S	statements ma	av not be sold or use	d by any pe	rson fr	13 or the		14 ose of s	15 olicitinc		16 ntribut	17 ions
	for commercial purposes, other than using the											
\backslash	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (United for Heal	th)								
A.	Full Name of Individual (Last, First, Middle Ini ROGERS, ERIKA A, , ,	tial) or Full C	rganization Name			ate of	Rec	eipt				
	Mailing Address 9900 Bren Road East					^M 12	/	D D D 31	/ Y		009	Y
	City	State	Zip Code			Trans	actio	on ID : P	R1551 ⁻	1607	23217	7
	Minnetonka	MN	55343-9664		_ A	mount	of E	Each Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	C Stra	ategic Client Exec-Unip					-	-	_	130.0	0
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.)	15		emo	Item				
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		7 7	270.00								
В.	Full Name of Individual (Last, First, Middle Ini VALERIUS, THOMAS J, , ,	tial) or Full C	rganization Name			Date of	Rec	eipt				
	Mailing Address 9900 Bren Road East] [^M 12	/	D D D 31	/ Y	20	09 09	Ŷ
	City	State	Zip Code			Trans	actio	n ID : P	R15511	1613	23217	,
	Minnetonka	MN	55343-9664		A	mount	of E	Each Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С ИР	Recruitment Svcs						-	_	999.9	6
	Name of Employer (for Individual)		upation (for Individual tedHealth Group, Inc.)	15		emo	Item				
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify) ▼		, 20	076.84								
с.	Full Name of Individual (Last, First, Middle Ini WEIHRAUCH, LOIS T, , ,	tial) or Full C	rganization Name			ate of	Rec	eipt				
	Mailing Address 9900 Bren Road East					^M 12	/	D D D 31	/ Y		009	Y
	City	State	Zip Code			Trans	actic	on ID : P	R1551	1614	123217	7
	Minnetonka	MN	55343-9664		A	mount	of E	Each Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С ИР	General Management				,		y	_	702.0	0
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.)	- 15		emo	ltem				
	Receipt For:	Aggregate	Year-to-Date V		- ``							
	Primary General			159.00								
	Other (specify)		14 	458.00								
s	UBTOTAL of Receipts This Page (optional)			····· ►			,		9	1	1831.9	6
Т	OTAL This Period (last page this line number	only)			[-			

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				Detailed Summary Page		11a 13		11b		11c 15		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r					or the		pose		oliciting		ntribut	ions
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	d PAC (Uni	ited for Health)									
Α.	Full Name of Individual (Last, First, Middle Initia ENDERLE, JOHN O, , ,	al) or Full C	Drgar	nization Name	[Date of	Re	ceip	t				
	Mailing Address 9900 Bren Road East					^M 12	/		31	/ Y)09	Y
	City Minnetonka	State MN		Zip Code 55343-9664						R15543 ceipt th			7
	FEC ID number of contributing federal political committee.	C Re	egiona	al Executive				,				715.0	0
	Name of Employer (for Individual)			ion (for Individual) ealth Group, Inc.	1		emo	lter	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1485.00									
B.	Full Name of Individual (Last, First, Middle Initia HARRIS, CHRISTINE MCCARTNEY, , ,	al) or Full C	Drgar	nization Name	[Date of	Re	ceip	t				
	Mailing Address 9900 Bren Road East					^M 12	/		31	/ Y	ү 20	9 09	Y
	City Minnetonka	State MN		Zip Code 55343-9664	4					R15543 ceipt th			,
	FEC ID number of contributing federal political committee.	C Dir	Clair	ms		_		,		-11-	_	130.0	0
	Name of Employer (for Individual)		•	ion (for Individual) lealth Group, Inc.	15		emo	lter	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 270.00		-							
с.	Full Name of Individual (Last, First, Middle Initia JELINEK, RICK M, , ,	al) or Full C	Drgar	nization Name		Date of	Re	ceip	t				
	Mailing Address 9900 Bren Road East					^M 12	/		31	/ Y		09 [°]	Ŷ
	City Minnetonka	State MN		Zip Code 55343-9664	-					R15543 ceipt th			7
	FEC ID number of contributing federal political committee.	СВи	isines	ss Segment CEO				y		, ,		2307.6	0
	Name of Employer (for Individual)		•	ion (for Individual) ealth Group, Inc.			emo	lter	n				
	Receipt For:	Aggregate	Yea	r-to-Date ▼	- ''	5							
	Primary General Other (specify)		-	4999.80									
s	UBTOTAL of Receipts This Page (optional)							7		,	3	3152.6	0
т	OTAL This Period (last page this line number or	nly)						-		- J -			

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•••			Detailed Summary Page		11a		11b	11c		12	<u> </u>
An	y information copied from such Reports and Sta	atements ma	w not be sold or used by any n	erson f	13 for the	DUrr	14 bose of s	15 olicitina	CO	16 htributi	17 ons
	for commercial purposes, other than using the										
\backslash	NAME OF COMMITTEE (In Full)										
/	UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)								
^	Full Name of Individual (Last, First, Middle Initia RADU, MICHAEL, , ,	al) or Full O	rganization Name		Date of	Po	coint				
Α.	Mailing Address 9900 Bren Road East			-					V	V	V
	9900 BIEII ROAU EASI				12	ľ	31	, ,	20	009	·
	City	State	Zip Code		Trans	acti	on ID : P	R15543	3245	23217	,
	Minnetonka	MN	55343-9664	/	Amount	of	Each Red	ceipt thi	is P	eriod	
	FEC ID number of contributing federal political committee.	C VP	Operations				,	-9		667.2	3
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.		Ме 5	emo	Item				
	Receipt For:	Aggregate	Year-to-Date ▼	'	5						
	Primary General Other (specify) V		936.45	1							
В.	Full Name of Individual (Last, First, Middle Initia SPILLANE, CATHERINE E, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 9900 Bren Road East				^M 12	/	D D D 31	/ Y	ү 20	09 [°]	Ŷ
	City	State	Zip Code		Trans	acti	on ID : Pl	R15543	246	23217	,
	Minnetonka	MN	55343-9664		Amount	of	Each Red	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	C Dir	Business Process				7	-9	_	249.9	9
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emo	ltem				
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify) ▼		519.21								
с.	Full Name of Individual (Last, First, Middle Initia STAPLETON, KIRK E, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 9900 Bren Road East				^M 12	/	D D D 31	/ Y	20	09 [°]	
	City	State MN	Zip Code 55343-9664		Trans	acti	on ID : P	R15543	3247	23217	7
	Minnetonka	IVIIN	55343-9004	_	Amount	of	Each Red	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	C VP	Network Programs			_	y		_	650.0	0
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1	5 M	emo	Item				
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify)		1350.00								
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o		· · · ·				5	5	1	567.2	2

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			for each category of the	X 11a 11b 11c 12
_			Detailed Summary Page	13 14 15 16 17
or	for commercial purposes, other than using the r			berson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\overline{)}$	UnitedHealth Group Incorporated	d PAC (l	United for Health)	
A.	Full Name of Individual (Last, First, Middle Initia WEIMERSKIRCH, AMY E, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East			12 31 / Y Y Y Y 12 31 2009
	City	State	Zip Code	Transaction ID : PR1554324923217
-	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C Mgr	r Product Research	99.97
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼		207.63]
	Full Name of Individual (Last, First, Middle Initia ERICKSON, KAREN L, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East			12 31 2009
	City	State	Zip Code	Transaction ID : PR1575957623217
-	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	P Corporate Controller	2307.60	
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item
Ì	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		4999.80]
с.	Full Name of Individual (Last, First, Middle Initia MONFILETTO, ERNEST, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009
	City	State	Zip Code	Transaction ID : PR1575958123217
-	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C Pla	n President	999.96
l	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
i	Receipt For:		Year-to-Date ▼	15
	Primary General	Ayyreyale		
	Other (specify)	<u> </u>	2076.84	
รเ	JBTOTAL of Receipts This Page (optional)			3407.53
тс	OTAL This Period (last page this line number or	nly)		

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				I Summary Page		11a 13		11b		11c		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the					or the		pose d		oliciting		ntribut	ions
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporate	ed PAC (United f	or Health)									
A.	Full Name of Individual (Last, First, Middle Ini VALENTA, LEE D, , ,	itial) or Full C	Organization	Name		Date of	Re	eceipt					
	Mailing Address 9900 Bren Road East					^M 12	/	D 3		/ Y		Y 009	Y
	City Minnetonka	State MN	Zip Co 5534	ode 13-9664						R15759 ceipt th			7
	FEC ID number of contributing federal political committee.	C Bus	siness Segr	nent COO		_		-		- -		2307.6	60
	Name of Employer (for Individual)		upation (for tedHealth G	^r Individual) iroup, Inc.	1;		emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	te ▼ 4999.80	1								
в.	Full Name of Individual (Last, First, Middle Ini OSTLER, DAVID B, , ,	itial) or Full C	Organization	Name		Date of	Re	eceipt					
	Mailing Address 9900 Bren Road East					^M 12	/	D 3		/ Y)09	Y
	City	State	Zip Co			Trans	acti	on ID	: P	R15808	3646	623217	7
	Minnetonka	MN	5534	3-9664	A	mount	t of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	C sv	P IBS			_		-		-9-	_	130.0	00
	Name of Employer (for Individual)		upation (fo tedHealth 0	r Individual) Group, Inc.			emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	te ▼ 270.00]								
с.	Full Name of Individual (Last, First, Middle Ini PAUL, THOMAS S, , ,	tial) or Full C	Organization	Name		Date of	Re	eceipt					
	Mailing Address 9900 Bren Road East					^M 12	/	D 3	D 1	/ Y		009	Y
	City Minnetonka	State MN	Zip Co 5534	ode 3-9664						R1580			7
	FEC ID number of contributing federal political committee.	СВи	siness Segi	ment COO				, ,		,	_	499.9	98
	Name of Employer (for Individual)		upation (for edHealth G	^r Individual) roup, Inc.			emo	ltem					
	Receipt For:	Aggregate	Year-to-Da	te 🔻									
	Primary General Other (specify)			1038.42]								
s	UBTOTAL of Receipts This Page (optional)					į		,		y	2	2937.5	8
т	OTAL This Period (last page this line number	only)		••••••	.			-		-y-	_		

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporate	a PAC (l	United for Health)	
Α.	Full Name of Individual (Last, First, Middle Initia WEBB, ROBERT THOMAS, , , Mailing Address 9900 Bren Road East	al) or Full O	rganization Name	Date of Receipt
	City	State	Zip Code	12 31 2009 Transaction ID : PR1580865323217
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Ссе	O Care Solutions	2307.60
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.80]
	Full Name of Individual (Last, First, Middle Initia HUGHES, RICHARD J, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East			12 31 / Y Y Y Y Y 12 31 2009
	City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596304123217 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C VP	Human Capital Dvlpmt	130.00
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00	
C.	Full Name of Individual (Last, First, Middle Initia JOHNSON, THAD C, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 9900 Bren Road East	1		12 ^D ^D ¹ ^Y
	City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596304323217 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C Sr [Deputy General Couns	195.00
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00	
s	UBTOTAL of Receipts This Page (optional)		······	2632.60
T	OTAL This Period (last page this line number o	nly)	•••••	

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	EMIZED RECEIPTS		Detailed Summary Page		11a		1	1b	11c		12	
					13			4	15		16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
\backslash	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	PAC (United for Health)									
A.	Full Name of Individual (Last, First, Middle Initia KING, JOHN, , ,	l) or Full O	rganization Name		Date o	of Re	ece	eipt				
	Mailing Address 9900 Bren Road East	0.1			[™] 12		/	D D 31	/ Y	20)09 009	
	City Minnetonka	State MN	Zip Code 55343-9664						PR1596			7
	FEC ID number of contributing federal political committee.		Sales - Uniprise	/	Amoui	nt of	r Ea	ach Re	eceipt th		eriod 130.0	00
	Name of Employer (for Individual)		upation (for Individual) redHealth Group, Inc.			/lemo	o l	tem				
	Receipt For:		Year-to-Date V	1	5							
	Primary General Other (specify) ▼		270.00									
в.	Full Name of Individual (Last, First, Middle Initia MASSEY, GAYE ADAMS, , ,	l) or Full O	rganization Name		Date of	of Re	ece	eipt				
	Mailing Address 9900 Bren Road East				M 12	VI /	′	D D D 31	/ Y	20	09 09	Y
	City Minnetonka	State MN	Zip Code 55343-9664						R1596: ceipt th			7
	FEC ID number of contributing federal political committee.	C Sr [Deputy General Couns				-			1	499.9	94
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.			/lemo	o l	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3115.26		-							
с.	Full Name of Individual (Last, First, Middle Initia MATUSHAK, JAY S, , ,	l) or Full O	rganization Name		Date of	of Re	ece	eipt				
	Mailing Address 9900 Bren Road East				[™] 12		/	D D D 31	/ Y	20	09 [°]	Y
	City Minnetonka	State MN	Zip Code 55343-9664						PR1596			7
	FEC ID number of contributing federal political committee.	С ИР	Healthcare Econ				9		y		150.0	
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		Vem	οI	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 311.58	1								
s	UBTOTAL of Receipts This Page (optional)		•	•			9		, j	1	779.9	6
т	OTAL This Period (last page this line number or	ıly)					-					

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	EINIZED RECEIPTS		Detailed Summary Page		11a 13		11b		11c		12 16	17
	ny information copied from such Reports and Sta for commercial purposes, other than using the r				or the		pose			g con		
$\overline{\}$	NAME OF COMMITTEE (In Full)								-			
\rangle	UnitedHealth Group Incorporated	d PAC (l	United for Health)									
Α.	Full Name of Individual (Last, First, Middle Initia MIKAN III, GEORGE L, , ,	al) or Full O	organization Name		Date of	f Re	eceipt					
	Mailing Address 9900 Bren Road East				^M 12	/		а В1	/ Y	ү 20	09 09	Y
	City	State MN	Zip Code		Trans	acti	ion IC) : P	PR1596	3048	23217	,
	Minnetonka		55343-9664	/	Amoun	t of	Each	Re	ceipt th	is Pe	eriod	_
	FEC ID number of contributing federal political committee.	CEV	P CFO			_	-			2	307.6	0
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.			emo	Item	1				
	Receipt For:	Aggregate	Year-to-Date ▼	''	5							
	Primary General Other (specify) ▼		4999.80									
В.	Full Name of Individual (Last, First, Middle Initia MORNESS, CAROL B, , ,	al) or Full O	Prganization Name		Date of	f Re	eceipt					
	Mailing Address 9900 Bren Road East				M M 12	/		D 31	/ Y	200)9	Y
	City	State	Zip Code		Trans	acti	ion ID) : P	R1596	3049;	23217	
	Minnetonka	MN	55343-9664	A	Amount	t of	Each	Re	ceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	C Dir	Underwriting				-				499.9	8
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.			emo	ltem	1				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1038.42									
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia SCHUMACHER, DANIEL J, , ,	al) or Full O	Prganization Name	[Date of	f Re	eceipt					
	Mailing Address 9900 Bren Road East				^M 12	/		^р 31	/ Y	200	09 [°]	Y
	City Minnetonka	State MN	Zip Code 55343-9664						PR1596			,
	FEC ID number of contributing federal political committee.	СМа	rket Group CFO				y		,		99.9	7
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emc	lterr	1				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 207.63]								
s	UBTOTAL of Receipts This Page (optional)			▶			9		,	2	907.5	5
т	OTAL This Period (last page this line number or	nly)					-		- 45-			

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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 se to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpor	ated PAC (United for Health)	
Full Name of Individual (Last, First, Middle		•	
A. SPARKMAN, DAVID LYNN, , ,			Date of Receipt
Mailing Address 9900 Bren Road East			12 31 2009
City	State	Zip Code	Transaction ID : PR1596305523217
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	СМа	rket Group CAO	99.97
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		207.63	
Other (specify)		207.05	
Full Name of Individual (Last, First, Middle B. THEISEN, SCOTT E, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 31 2009
City	State	Zip Code	Transaction ID : PR1596305623217
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C svi	P Product Developmen	249.99
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		519,21]
Full Name of Individual (Last, First, Middle C. LEWIS, THOMAS D, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 31 Y Y Y Y 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596306923217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С не	alth Plan CEO	499.98
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15
Receipt For:	Aggregate	Year-to-Date 🔻	
Other (specify)		1038.42]
SUBTOTAL of Receipts This Page (optional)		849.94
TOTAL This Period (last page this line num	ber only)		

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ITEMIZED RECEIPTS		Detailed Summary Page		11a		11	b	11c	12	
		, , ,		13		14		15	16	17
Any information copied from such Reports a or for commercial purposes, other than usin										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorport	orated PAC (United for Health)								
Full Name of Individual (Last, First, Mide OBERRENDER, ROBERT W, , ,	dle Initial) or Full C	rganization Name	D	ate of	Re	eceij	pt			
Mailing Address 9900 Bren Road East				^M 12	1		31	/ Y	2009	Y
City	State MN	Zip Code		Trans	acti	ion	ID : P	R1596	30702321	7
Minnetonka	IVIIN	55343-9664	A	mount	t of	Ead	ch Re	ceipt th	nis Period	
FEC ID number of contributing federal political committee.	C sv	P Treasurer				-			419.	00
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	15		emo) Ite	em			
Receipt For:	Aggregate	Year-to-Date ▼		,						
Other (specify) ▼		825.00	1							
Full Name of Individual (Last, First, Mido B. ANDERSON, KENNETH J, , ,	dle Initial) or Full C	Prganization Name		ate of	Re	eceij	pt			
Mailing Address 9900 Bren Road East				^M 12	/		31	/ Y	y y 2009	Y
City	State	Zip Code		Trans	acti	ion	ID : P	R15963	30922321	7
Minnetonka	MN	55343-9664	A	mount	t of	Ead	ch Re	ceipt th	nis Period	
FEC ID number of contributing federal political committee.	C Bus	siness Development Di				-		- 45-	99.	97
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	15		emo) Ite	em			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.63]							
Full Name of Individual (Last, First, Mido C. FLYNN, DIANE BEDNAR, , ,	dle Initial) or Full C	Prganization Name		ate of	Re	eceij	pt			
Mailing Address 9900 Bren Road East				^M 12	/		31	/ Y	2009	Y
City Minnetonka	State MN	Zip Code 55343-9664	A						30972321 nis Period	
FEC ID number of contributing federal political committee.	С ир							,	325.	_
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15		emo	o Ite	əm			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 640.00]							
SUBTOTAL of Receipts This Page (option	al)					,		5	843.	97
TOTAL This Period (last page this line num	mber only)					-	_			

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PAGE 35 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12						
		13 14 15 16 17						
or for commercial purposes, other than using	nd Statements may not be sold or used by any po g the name and address of any political committee							
NAME OF COMMITTEE (In Full)								
/ UnitedHealth Group Incorpor	rated PAC (United for Health)							
Full Name of Individual (Last, First, Middle A. COOK, JEFFREY S, , ,	e Initial) or Full Organization Name	Date of Receipt						
Mailing Address 9900 Bren Road East		12 / D D / Y Y Y Y Y 12 31 2009						
City Minnetonka	State Zip Code MN 55343-9664	Transaction ID : PR1596311323217						
		Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C Health Plan CEO	103.86						
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	Memo Item						
Receipt For:	Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼	265.42	1						
Full Name of Individual (Last, First, Middle 3. COTO, RAMON E, , ,	e Initial) or Full Organization Name	Date of Receipt						
Mailing Address 9900 Bren Road East								
City	State Zip Code	Transaction ID : PR1596311523217						
Minnetonka	MN 55343-9664	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C VP General Management	249.99						
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	Memo Item						
Receipt For:	Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼	519.21	1						
Full Name of Individual (Last, First, Middle). DAVIDSON, TRACY L, , ,	e Initial) or Full Organization Name	Date of Receipt						
Mailing Address 9900 Bren Road East		12 / D D / Y Y Y Y 12 31 2009						
City	State Zip Code	Transaction ID : PR1596311623217						
Minnetonka	MN 55343-9664	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C Dir Network Contracting	99.97						
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	Memo Item						
Receipt For:	Aggregate Year-to-Date ▼							
Primary General								
Other (specify)	207.63							
SUBTOTAL of Receipts This Page (optional	l)	453.82						
	iber only)							

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
ight angle UnitedHealth Group Incorp	orated PAC (I	Jnited for Health)	
Full Name of Individual (Last, First, Mid DOOLEY, JEFFREY P, , ,	Date of Receipt		
Mailing Address 9900 Bren Road East			12 31 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596312123217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C KA VP Sales and Account		150.02
		upation (for Individual) edHealth Group, Inc.	15
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 311.58	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DUNLOP, RICHARD G, , , Mailing Address 9900 Bren Road East			Date of Receipt
City Minnetonka	State	Zip Code 55343-9664	12 31 2009 Transaction ID : PR1596312323217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C Chief of Staff		
Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc. UnitedHealth Group, Inc.			Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		
Full Name of Individual (Last, First, Mid C. FOUCRE, JILLIAN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 / D / Y Y Y Y 12 31 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596312723217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Ссо	0	325.00
Name of Employer (for Individual)	for Individual) Occupation (for Individual) UnitedHealth Group, Inc.		15
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 630.00		
SUBTOTAL of Receipts This Page (option	,		► 605.02
TOTAL This Period (last page this line nu	mber only)		
FOR LINE NUMBER:

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PAGE 37 OF

			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11									
	y information copied from such Reports and Statem for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions									
\setminus	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated P	PAC (U	nited for Health)										
۹.	Full Name of Individual (Last, First, Middle Initial) o GARCIA, STEVAN D, , ,	r Full Org	ganization Name	Date of Receipt									
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009									
	5	tate /N	Zip Code 55343-9664	Transaction ID : PR1596312923217 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.		Seneral Management	249.99									
	Name of Employer (for Individual)		pation (for Individual) dHealth Group, Inc.	Memo Item									
	Receipt For: Age Primary General Other (specify) ▼	gregate Y	ear-to-Date ▼ 519.21										
	Full Name of Individual (Last, First, Middle Initial) o HAWLEY, EDWARD J, , ,	ganization Name	Date of Receipt										
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y 12 31 2009											
	5	tate	Zip Code	Transaction ID : PR1596313623217									
	Minnetonka I	MN	55343-9664	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	SB S	VP National SIs & AN	499.98									
	Name of Employer (for Individual)		oation (for Individual) dHealth Group, Inc.	Memo Item 15									
	Receipt For: Age Primary General Other (specify) ▼	gregate Y	ear-to-Date ▼ 1038.42										
С.	Full Name of Individual (Last, First, Middle Initial) o HEUMANN, KURT A, , ,	r Full Org	ganization Name	Date of Receipt									
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009									
		tate	Zip Code	Transaction ID : PR1596313723217									
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	Dir F	inance	260.00									
	Name of Employer (for Individual)		pation (for Individual) Health Group, Inc.	Memo Item									
	Receipt For: Age	gregate Y	'ear-to-Date ▼										
	Primary General Other (specify)		540.00]									
	UBTOTAL of Receipts This Page (optional)			1009.97									

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PAGE 38 OF

			Use separate schedule(s)	(check only one)								
ITEMIZED RECEI	F13		for each category of the Detailed Summary Page	X 11a	11b	11c 15	12 16	17				
Any information copied fro or for commercial purpose	om such Reports and States, other than using the n	ements may ame and ad	y not be sold or used by any pe Idress of any political committee	erson for the p	ourpose of s	oliciting	contribut	17 ions ee.				
NAME OF COMMITTE	E (In Full)											
ightarrow UnitedHealth G	roup Incorporated	I PAC (L	Inited for Health)									
Full Name of Individua A. HIGGINS, MARY M	(Last, First, Middle Initia) or Full Or	ganization Name	Date of Receipt								
Mailing Address 9900	Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka		State MN	Zip Code 55343-9664	Transaction ID : PR1596313823217 Amount of Each Receipt this Period								
FEC ID number of con federal political commit	U U	С ИР			-95-	7	99.9)7				
Name of Employer (for	Individual)		pation (for Individual) dHealth Group, Inc.	15	mo Item							
Receipt For: Primary Other (specify) ▼	General	Aggregate \	/ear-to-Date ▼ 207.63									
Full Name of Individua B. KAJA, TIMOTHY T	Last, First, Middle Initia) or Full Or	ganization Name	Date of	Pacaint							
	Mailing Address 9900 Bren Road East					/ Y	2009	Y				
City Minnetonka		State MN	Zip Code 55343-9664		ction ID : P of Each Re			,				
FEC ID number of con federal political commit	U U	C SVP			-35-	-7-	99.9	97				
Name of Employer (for	Individual)		pation (for Individual) edHealth Group, Inc.	Memo Item								
Receipt For: Primary Other (specify) ▼	General	Aggregate	Year-to-Date ▼ 207,63									
Full Name of Individua C. NORRIS, JASON	(Last, First, Middle Initia A, , ,) or Full Or	ganization Name	Date of	Receipt							
Mailing Address 9900	Bren Road East			M M 12	/ D D 31	/ Y	2009 Y	Y				
City Minnetonka		State MN	Zip Code 55343-9664		of Each Re			7				
FEC ID number of con federal political commit	0	C Sr U	Inderwriting Consultar		9	y	99.9)7				
Name of Employer (for	Individual)		pation (for Individual) dHealth Group, Inc.	15	emo Item							
Receipt For: Primary Other (specify)	General	Aggregate \	/ear-to-Date ▼ 207.63									
SUBTOTAL of Receipts	This Page (optional)						299.9)1				
TOTAL 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	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports an or for commercial purposes, other than using	d Statements 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 e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	ated PAC (United for Health)									
Full Name of Individual (Last, First, Middle RENNICK JR, JOHN H, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596316823217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	СМе	dical Director	249.99								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		519.21	1								
Full Name of Individual (Last, First, Middle B. RODGERS, STEPHAN S, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596317123217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C svi	P Healthcare Strategie	2307.60								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.80]								
Full Name of Individual (Last, First, Middle C. ROSENTHAL, DANIEL I, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596317323217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	Сне	alth Plan CEO	249.99								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15 Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 519.21]								
SUBTOTAL of Receipts This Page (optional	·)		2807.58								
TOTAL This Period (last page this line numl	per only)										

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				etailed Summary Page		11a		111		11c		12		
Ar	y information copied from such Reports and Sta	atements ma	av no	t be sold or used by any ne	erson f	13 or the	DUrr	14 pose		15 olicitino		16 ntribut	17 ions	
or	for commercial purposes, other than using the	name and a	addres	ss of any political committee	e to sol	icit cor	ntrib	outio	ons fro	m sucl	1 CO	mmitt	e.	
	NAME OF COMMITTEE (In Full)													
]	UnitedHealth Group Incorporate	d PAC (l	Unit	ed for Health)										
A.	Full Name of Individual (Last, First, Middle Initia RUTH, KEVIN J, , ,	al) or Full O		Date of Receipt										
	Mailing Address 9900 Bren Road East					^M 12	/		31	/ Y		y 009	Ŷ	
	City Minnetonka	State MN		Zip Code 55343-9664	Transaction ID : PR1596317423217 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C svi	P Ent	erprise Clinical Al	975.00									
	Name of Employer (for Individual)		•	on (for Individual) ealth Group, Inc.	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 2025.00										
В.	Full Name of Individual (Last, First, Middle Initia SELVA, MANUEL A, , ,	al) or Full O	Organi	zation Name		Date of	Re	eceip	pt					
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
	City Minnetonka	State Zip Code Transaction ID : J MN 55343-9664 Amount of Each Re											,	
	FEC ID number of contributing federal political committee.	Madical Director						-		-9	_	249.9	9	
	Name of Employer (for Individual)	Occi Unit			emo	o Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate												
с.	Full Name of Individual (Last, First, Middle Initia THOMAS, ROXANNE, , ,	al) or Full O	Organi	zation Name	[Date of	Re	eceip	pt					
	Mailing Address 9900 Bren Road East					^M 12	/	D	31	/ Y		009	Y	
	City Minnetonka	State MN		Zip Code 55343-9664	/					R1596			7	
	FEC ID number of contributing federal political committee.	C Pro	oduct	Director				y		y	_	150.0)2	
	Name of Employer (for Individual)		•	on (for Individual) alth Group, Inc.	1:		emo	o Ite	əm					
	Receipt For:	Aggregate	-to-Date ▼ 311.58											
s	UBTOTAL of Receipts This Page (optional)			•••••	.			9		y		1375.0	1	
т	OTAL This Period (last page this line number o	nly)						-		- 40-		1.4		

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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 or for commercial purposes, other than usi	and Statements mang the name and a	ay not be sold or used by any p ddress of any political committe	Person for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpo	prated PAC (I	Jnited for Health)									
Full Name of Individual (Last, First, Mide A. TURNAU, CHRIS B, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596319123217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Dir	Tax	130.00								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]								
Full Name of Individual (Last, First, Mide VIERLING, FRANK M, , , Mailing Address 9900 Bren Road East	dle Initial) or Full O	rganization Name	Date of Receipt								
City	State	Zip Code	12 31 2009 Transaction ID : PR1596319423217								
Minnetonka FEC ID number of contributing federal political committee.	MN Dir	55343-9664 General Management	Amount of Each Receipt this Period								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00									
Full Name of Individual (Last, First, Mide C. WASSERSTEIN, M LAURIE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596319523217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C PS	National VP Account N	249.99								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 519.21]								
SUBTOTAL of Receipts This Page (option	al)		509.99								
TOTAL This Period (last page this line nu	mber only)										

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and Stat for commercial purposes, other than using the na			erson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	UnitedHealth Group Incorporated	PAC (l	Jnited for Health)										
A.	Full Name of Individual (Last, First, Middle Initial WERLEY, MYRON R, , ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y Y 12 31 2009									
	City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1596319623217									
			00040 0004	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C Dir	Underwriting	162.50									
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		337.50]									
В.	Full Name of Individual (Last, First, Middle Initial WILSON, WILLIAM R, , ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 9900 Bren Road East			12 31 2009									
	City	State	Zip Code	Transaction ID : PR1596320023217									
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	Underwriting	130.00										
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item									
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		270.00]									
С.	Full Name of Individual (Last, First, Middle Initial WRIGHT, JANET P, , ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009									
	City	State	Zip Code	Transaction ID : PR1596320123217									
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C Mgr	r IT	130.00									
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15									
	Receipt For:		Year-to-Date ▼										
	Primary General	Aggregate											
	Other (specify)		270.00]									
s	UBTOTAL of Receipts This Page (optional)			422.50									
т	OTAL This Period (last page this line number on	ly)											

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		Detailed Summary P		X	11a		11b	11c		12				
۸						13		14	15		16	17		
	y information copied from such Reports and St for commercial purposes, other than using the													
\setminus	NAME OF COMMITTEE (In Full)													
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (Jnited for Health)										
Α.	Full Name of Individual (Last, First, Middle Init DODDY, JOHN P, , ,	ial) or Full O	rganization Name			Date of Receipt								
	Mailing Address 9900 Bren Road East					^M 12	/	D D D 31	/ Y	ү 20) 009	Y		
	City	State	Zip Code			Trans	acti	on ID : F	R1600	5973	823217	7		
	Minnetonka	MN	55343-9664		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C VP	Information Technolog		260.00									
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.		Memo Item									
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼		54(0.00										
B.	Full Name of Individual (Last, First, Middle Init MICHAUX, MICHAEL D, , ,	ial) or Full O	rganization Name			Date of	Re	ceipt						
	Mailing Address 9900 Bren Road East							D D D 31	/ Y	20	09 09	Ŷ		
	City	State	Zip Code			Trans	acti	on ID : P	R1600	5985	23217	,		
	Minnetonka	MN	55343-9664		A	mount	of	Each Re	ceipt th	nis P	eriod			
	FEC ID number of contributing federal political committee.	V/D Acquistions & Integrati							-9-		150.0	2		
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	15	Memo Item									
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General Other (specify) ▼		31											
с.	Full Name of Individual (Last, First, Middle Init SANDY, LEWIS G, , ,	ial) or Full O	rganization Name			Date of	Re	ceipt						
	Mailing Address 9900 Bren Road East					^M 12	/	D D D 31	/ Y		009	Ŷ		
	City	State MN	Zip Code					on ID : F			-	7		
	Minnetonka	IVIIN	55343-9664	_	A	mount	of	Each Re	ceipt th	nis P	eriod			
	FEC ID number of contributing federal political committee.	C sv	P Clinical Advancemen			_		9	,	_	845.0	0		
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
	Receipt For:	Aggregate	Year-to-Date V		- ``	,								
	Other (specify)		175											
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			for each category of the Detailed Summary Page		11a		11b		11c	12			
	y information copied from such Reports and State for commercial purposes, other than using the na												
\backslash	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	UnitedHealth Group Incorporated	PAC (l	United for Health)										
A.	Full Name of Individual (Last, First, Middle Initial) CAUTIN, MICHAEL P, , ,) or Full O	rganization Name		Date of Receipt								
	Mailing Address 9900 Bren Road East				^M 12	/		31	/ Y	2009			
	City Minnetonka	State MN	Zip Code 55343-9664							6752321			
	FEC ID number of contributing federal political committee.		siness Segment CIO	Amount of Each Receipt this Period									
	Name of Employer (for Individual)		upation (for Individual) redHealth Group, Inc.	Memo Item									
	Receipt For: Primary General Other (specify) ▼	1!	5										
B.	Full Name of Individual (Last, First, Middle Initial) PETERSON, MATTHEW W, , ,) or Full O	rganization Name		Date of	Re	ceipt	t					
	Mailing Address 9900 Bren Road East				12 31 Y Y Y Y Y 12 31 2009								
	City Minnetonka	State MN	Zip Code 55343-9664	A						6992321 is Period			
	FEC ID number of contributing federal political committee.	rket Group CAO				- J -		-	520.	00			
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	15									
	Receipt For: Primary General Other (specify) ▼	General Aggregate Year-to-Date ▼											
C.	Full Name of Individual (Last, First, Middle Initial) MALONEY, JEFFREY W, , ,) or Full O	rganization Name		Date of	Re	ceipt	t					
	Mailing Address 9900 Bren Road East				^M 12	1		31	/ Y	ү ү 2009	Y		
	City Minnetonka	State MN	Zip Code 55343-9664	A						2435232 is Period			
	FEC ID number of contributing federal political committee.	C VP	Operations - Evercare		1249.95								
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.		15 Memo Item								
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify)		2596.05										
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\backslash	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	`	,											
Α.	Full Name of Individual (Last, First, Middle Initia CELLI, PAT, , ,	l) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 9900 Bren Road East				м м 12	/	31	/ Y	2	009	Y			
	City	State	Zip Code		Transaction ID : PR1613243723217									
	Minnetonka	MN	55343-9664	A	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C Pla	n President	99.97										
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
		Aggregate	Year-to-Date 🔻											
	Other (specify)		207.63]										
в.	Full Name of Individual (Last, First, Middle Initial FINKELSTEIN, ALLEN LAWRENCE, , ,	l) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 9900 Bren Road East				12 31 / Y Y Y Y 12 31 2009									
	City	State	Zip Code		Transaction ID : PR1620989023217									
	Minnetonka	MN	55343-9664	A			Each Re							
	FEC ID number of contributing federal political committee.	C Sr M	Medical Director					-		499.9	8			
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.			emo	tem							
		Aggregate	Year-to-Date ▼											
	Other (specify)		1038,42]										
C.	Full Name of Individual (Last, First, Middle Initia CULLEN, LINDA L, , ,	l) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 9900 Bren Road East				^M 12	/	D D D 31	/ Y)09 [°]	Ŷ			
	City	State	Zip Code		Trans	act	ion ID : I	PR1632	3597	723217	7			
	Minnetonka	MN	55343-9664	A	Amount	of	Each Re	eceipt th	nis F	Period				
	FEC ID number of contributing federal political committee.	C Ass	soc Dir Regulatory Affa		_		,	. y		130.0	0			
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15										
		Aggregate	Year-to-Date V											
	Primary General Other (specify)	· · · ·	270.00	1										
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	y information copied from such Reports and Sta for commercial purposes, other than using the n																	
\backslash	NAME OF COMMITTEE (In Full)																	
$\Big/$	UnitedHealth Group Incorporated	DAPAC (Un	ited for Health)														
Α.	Full Name of Individual (Last, First, Middle Initia WALLER, DANIEL S, , ,	l) or Full O)rga	nization Name		Date of Receipt												
	Mailing Address 9900 Bren Road East					^M 12	/	D 31		/ Y		009	Y					
	City Minnetonka	State MN		Zip Code 55343-9664		Transaction ID : PR1632360023217 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	C Dir	Fin	ance		130.00												
	Name of Employer (for Individual)		•	tion (for Individual) Health Group, Inc.		Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 207.00														
В.	Full Name of Individual (Last, First, Middle Initia KENNEDY, WILLIAM F, , ,	l) or Full O)rga	nization Name		Date of	Re	ceipt										
	Mailing Address 9900 Bren Road East					^M 12	/	31	-	/ Y	y 200	09 09	Y					
	City	State		Zip Code		Trans	acti	on ID :	: PR	16534	431;	23217	,					
	Minnetonka	MN		55343-9664		Amount	of	Each I	Rece	eipt thi	s Pe	eriod						
	FEC ID number of contributing federal political committee.	Project Mgmt						-9		260.0	0							
	Name of Employer (for Individual)		•	tion (for Individual) Health Group, Inc.	15 Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 498.51														
	Eull Name of Individual (Last Eirst Middle Initia	I) or Full O		nization Namo	-													
C.	Full Name of Individual (Last, First, Middle Initia KOOREN, STEVE R, , ,		луа	nization Name		Date of	Re	ceipt										
	Mailing Address 9900 Bren Road East					^M 12	/	D 31	1	/ Y	200							
	City Minnetonka	State MN		Zip Code 55343-9664		Trans Amount		ion ID Each I					7					
	FEC ID number of contributing federal political committee.	C Bus	sine	ess Segment CFO				,		9		749.9)7					
	Name of Employer (for Individual)	mployer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.								15 Memo Item								
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻														
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or for commercial purposes, oth	her than using the name and a	ay not be sold or used by any p address of any political committee											
NAME OF COMMITTEE (In	Full)												
/ UnitedHealth Group	o Incorporated PAC (United for Health)											
A. BELLAMY, THOMAS J, ,		organization Name	Date o	Date of Receipt									
Mailing Address 9900 Bren F			12		31		Y Y 2009						
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1653444323217										
		00040-0004	Amount of Each Receipt this Period										
FEC ID number of contributi federal political committee.	ng C SB	VP Sales and Account	750.10 Memo Item										
Name of Employer (for Indiv	, , , , , , , , , , , , , , , , , , ,	upation (for Individual) tedHealth Group, Inc.											
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		1557.90]										
Full Name of Individual (Las B. HOLMAN, ROBERT L, ,	t, First, Middle Initial) or Full C	Organization Name	Date o	of Re	eceipt								
Mailing Address 9900 Bren F	Road East		M 12	/	31	/ Y	y y 2009	Y					
City	State	Zip Code	Tran	sacti	ion ID :	PR16534	4502321	7					
Minnetonka	MN	55343-9664	Amour	nt of	Each R	eceipt th	is Period						
FEC ID number of contributi federal political committee.	ng C Dir			-	-	130.	00						
Name of Employer (for Indiv	,	upation (for Individual) tedHealth Group, Inc.	15	1emc	tem								
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ 270.00											
Full Name of Individual (Las C. SULLIVAN, DANIEL T	t, First, Middle Initial) or Full C	Prganization Name	Date o	of Re	eceipt								
Mailing Address 9900 Bren F	Road East		12	1 /	31	/ Y	2009 Y	Y					
City	State	Zip Code	Tran	sact	ion ID :	PR16534	4582321	7					
Minnetonka	MN	55343-9664	Amour	nt of	Each R	eceipt th	is Period						
FEC ID number of contributi federal political committee.	ng C Dir	IT Project Mgmt	150.02										
Name of Employer (for Indiv		upation (for Individual) edHealth Group, Inc.	15	lemo	o Item								
Receipt For:	Aggregate	Year-to-Date ▼											
Primary Gene													
Other (specify)		311.58											
SUBTOTAL of Receipts This F	Page (optional)				,	,	1030.	12					
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							
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any puddress of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpor	ated PAC (United for Health)								
Full Name of Individual (Last, First, Middle A. LARKIN, JOYCE A, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1677771623217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Go	vt Rel Dir	999.96							
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2076.84]							
Full Name of Individual (Last, First, Middle B. BELLIS, JOSEPH K, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 9900 Bren Road East										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1711240223217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Sr I	Business Process Anal	99.97							
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.63]							
Full Name of Individual (Last, First, Middle C. SNOWDEN, MILES S, , Mr.,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1746717823217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C sv	P Health Advancement	2307.60							
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.80]							
SUBTOTAL of Receipts This Page (optional)			3407.53							
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 to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	Jnited for Health)	
Full Name of Individual (Last, First, Middle A. KOUTSOUMPAS JR, JOHN T, , , Mailing Address 9900 Bren Road East City Minnetonka	Initial) or Full O State MN	rganization Name Zip Code 55343-9664	Date of Receipt 12 31 2009 Transaction ID : PR1748514523217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Осси	Public Policy upation (for Individual) edHealth Group, Inc.	2307.60 Memo Item 15
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.80	
B. Full Name of Individual (Last, First, Middle DESTWOLINSKI, ANN, , , Mailing Address 9900 Bren Road East	Initial) or Full O	rganization Name	Date of Receipt
City Minnetonka FEC ID number of contributing federal political committee.	State MN C Ass	Zip Code 55343-9664 oc Dir Utilization Mgm	Transaction ID : PR1806441623217 Amount of Each Receipt this Period 143.00
Name of Employer (for Individual) Receipt For: Primary General Other (specify) V	Unit	upation (for Individual) tedHealth Group, Inc. Year-to-Date ▼ 297.00	15 Memo Item
C. Full Name of Individual (Last, First, Middle DUDASH, JASON, , , Mailing Address 9900 Bren Road East City Minnetonka FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State MN C Mg Occu Unite	rganization Name Zip Code 55343-9664 r Applications Dvlpmnt upation (for Individual) edHealth Group, Inc. Year-to-Date ▼ 270.00	Date of Receipt 12 31 2009 Transaction ID : PR1806441923217 Amount of Each Receipt this Period 130.00 Memo Item 15
SUBTOTAL of Receipts This Page (optional).			2580.60

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

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111				category of the Summary Page	X 11a]11b	11c	12	<u> </u>
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full)			y pointear committee						
\rangle	UnitedHealth Group Incorporated	d PAC (l	Jnited fo	r Health)						
Α.	Full Name of Individual (Last, First, Middle Initia LEVINE, JEFF L, , ,	al) or Full O	rganization N	lame	Date	of Re	eceipt			
	Mailing Address 9900 Bren Road East				12		D D D 31	/ Y	y y 2009	Y
	City Minnetonka	State MN	Zip Cod 55343					PR18064 eceipt thi	4322321 is Period	7
	FEC ID number of contributing federal political committee.	C PS	Mgr Acct Mg	mt (FEHB			-yr- 1		260.0	00
	Name of Employer (for Individual)		upation (for li edHealth Gro	,	15	Memo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	540.00						
В.	Full Name of Individual (Last, First, Middle Initia TALAMANTES, WILLIAM, , , Mailing Address 9900 Bren Road East	al) or Full O	rganization N	lame	Date	M /	eceipt	/ Y	2009	Ŷ
	City Minnetonka	State MN	Zip Cod 55343-		Trar	sact	ion ID :	PR18064 eceipt thi	4472321	7
	FEC ID number of contributing federal political committee.	C Six	Sigma Consu	ultant					228.8	80
	Name of Employer (for Individual)		upation (for I edHealth Gro	,	- 1 5	Memo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	475.20						
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia ARCHER, LORI A, , ,	al) or Full O	rganization N	lame	Date	of Re	eceipt			
	Mailing Address 9900 Bren Road East				M 12		31	/ Y	2009 [°]	Y
	City Minnetonka	State MN	Zip Cod 55343-					PR18067 eceipt thi	75012321 is Period	7
	FEC ID number of contributing federal political committee.	C Dir	Provider Svc				y 1	7	150.0	02
	Name of Employer (for Individual)		upation (for li edHealth Gro	,	15	Memo	o Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date	311.58						
s	UBTOTAL of Receipts This Page (optional)								638.8	32
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	y information copied from such Reports and Sta for commercial purposes, other than using the															
\backslash	NAME OF COMMITTEE (In Full)															
$\Big\rangle$	UnitedHealth Group Incorporate	d PAC (I	Un	ited for Health)												
A.	Full Name of Individual (Last, First, Middle Initia BAYER, GREGORY A, , ,	al) or Full O)rgai	nization Name		Date of	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East					12 31 / Y Y Y Y 2009										
	City Minnetonka	State MN		Zip Code 55343-9664	Transaction ID : PR1806750223217 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	Сс	ΟВ	ehavioral Solutions	455.00											
	Name of Employer (for Individual)	•	tion (for Individual) lealth Group, Inc.		5 M	emo	o It	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1120.00												
в.	Full Name of Individual (Last, First, Middle Initia EMERSON, PAUL M, , ,	al) or Full O	rga	nization Name		Date of	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y Y 12 31 2009												
	City Minnetonka	ID number of contributing					Transaction ID : PR1806750323217 Amount of Each Receipt this Period 499.98									
	FEC ID number of contributing federal political committee.															
	Name of Employer (for Individual)		•	tion (for Individual) Health Group, Inc.		М 5	emo	o It	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1038.42		-										
с.	Full Name of Individual (Last, First, Middle Initia PINOTTI, SHERRI C, , ,	al) or Full O)rgai	nization Name		Date of	f Re	ece	eipt							
	Mailing Address 9900 Bren Road East					^M 12	/	ſ	D D D 31			009	Y			
	City Minnetonka	State MN		Zip Code 55343-9664		Trans Amoun				PR1832			7			
	FEC ID number of contributing federal political committee.	C Dir	IT			<u> </u>		y				123.5	50			
	Name of Employer (for Individual)		•	tion (for Individual) lealth Group, Inc.		М 15	emc	o li	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 391.95												
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	BAC (Uni	ted for Health)									
Α	Full Name of Individual (Last, First, Middle Initia LEDELL, MICHELLE D, , , Mailing Address 9900 Bren Road East	l) or Full C	Drgan	ization Name		Date o		_	pt	/ Y	YYY	Ý	
Ō	Dity Minnetonka	State MN		Zip Code 55343-9664							2009 8 5062321		
F	EC ID number of contributing ederal political committee.		man	Capital Partner		Amoun	t of	Ea	ch Re	eceipt th	iis Period 520.	_	
_	Name of Employer (for Individual)		•	on (for Individual) ealth Group, Inc.	Memo Item								
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date 1080.00									
	Full Name of Individual (Last, First, Middle Initia ANDERSON, CATHERINE K, , ,	l) or Full C	Drgan	ization Name	[Date o	f Re	ecei	pt				
_	Nailing Address 9900 Bren Road East					[™] 12	/		31	/ Y	2009	Y	
	City Minnetonka	State MN		Zip Code 55343-9664							55072321 his Period		
	EC ID number of contributing ederal political committee.	C Dir	Mark	eting Bus Dev		_		-			750.	10	
_	Name of Employer (for Individual)		•	on (for Individual) ealth Group, Inc.	1		emo	o Ite	em				
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 1557.90									
	ull Name of Individual (Last, First, Middle Initia BATTAGLINI, KAREN T, , ,	l) or Full C	Drgan	ization Name		Date o	f Re	ecei	pt				
_	Aailing Address 9900 Bren Road East			7. 0.1		12 ^M	J.	L	31	L	ү ү 2009		
	City Minnetonka	State MN		Zip Code 55343-9664							55482321 nis Period		
	EC ID number of contributing ederal political committee.	C Dir	r Fina	nce				y		,	99.		
_	Name of Employer (for Individual)		•	on (for Individual) ealth Group, Inc.	1		emc	o Ite	əm				
Г	Receipt For: Primary General Other (specify)	Aggregate	Year	207.63									
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	information copied from such Reports and Sta or commercial purposes, other than using the n			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.
<u> </u>	AME OF COMMITTEE (In Full)			
ightarrow (UnitedHealth Group Incorporated	I PAC (l	Jnited for Health)	
	ull Name of Individual (Last, First, Middle Initia BISHOP, KATHLEEN L, , ,	l) or Full O	rganization Name	Date of Receipt
N	lailing Address 9900 Bren Road East			12 31 2009
	ity ⁄innetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1903560823217 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C Dir	Finance	260.00
N	lame of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00]
B	ull Name of Individual (Last, First, Middle Initia BOURASSA, ERNEST R, , ,	l) or Full O	rganization Name	Date of Receipt
_	lailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009
	ity ⁄linnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1903562423217 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C Dir I	Network Programs	99.97
N	lame of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.63]
	ull Name of Individual (Last, First, Middle Initia DUFEK, ROBERT J, , ,	l) or Full O	rganization Name	Date of Receipt
N	lailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009
	ity Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1903577123217 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C VP		325.00
	ame of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15
R	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 675.00]
SU	BTOTAL of Receipts This Page (optional)			684.97
то	TAL This Period (last page this line number or	ıly)		

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										
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpor	ated PAC (United for Health)											
Full Name of Individual (Last, First, Middle A. EDBERG, SUSAN B, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 31 / Y Y Y Y 12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1903578123217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С ИР	Customer Service	1300.00										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2700.00]										
Full Name of Individual (Last, First, Middle B. JOHNSON, CHRISTOPHER T, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1903591123217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Dir	General Management	130.00										
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]										
Full Name of Individual (Last, First, Middle C. PRZYGOCKI, BRIAN K, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR1903615123217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Dir	IȚ.	99.97										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 207.63	1										
SUBTOTAL of Receipts This Page (optional			1529.97										
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	WIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
or fo	r commercial purposes, other than using the r			erson for the purpose of soliciting contributions										
	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	d PAC (l	United for Health)											
A.	ull Name of Individual (Last, First, Middle Initia SANTELLI, JOHN C, , , ailing Address 9900 Bren Road East	I) or Full O	Zip Code	Date of Receipt										
 Fi	Innetonka EC ID number of contributing	MN	55343-9664 P & CIO	Amount of Each Receipt this Period										
	deral political committee. ame of Employer (for Individual)	Осси	upation (for Individual) ædHealth Group, Inc.	Memo Item										
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 413.10]										
B\	ull Name of Individual (Last, First, Middle Initia NEYMOUTH, PAUL D, , ,	ll) or Full O	rganization Name	Date of Receipt										
Ci	ailing Address 9900 Bren Road East	Zip Code	12 31 2009 Transaction ID : PR1903636923217 Amount of Each Receipt this Period											
F	linnetonka EC ID number of contributing deral political committee.	number of contributing												
	ame of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item										
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 519.21	1										
C	ull Name of Individual (Last, First, Middle Initia JAMIAN, PAMELA, , , ailing Address 9900 Bren Road East	ll) or Full O	rganization Name	Date of Receipt										
	ity /innetonka	State MN	Zip Code 55343-9664	12 31 2009 Transaction ID : PR1910417423217 Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	C Dir	Customer Service	150.02										
	ame of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15										
	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 311.58	1										
SUE	STOTAL of Receipts This Page (optional)			651.55										
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				Detailed Summary Page		र 11a	ιΓ		11	b	1	11c		12		
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\ NA	ME OF COMMITTEE (In Full)															
∕ U	InitedHealth Group Incorporated	PAC	(Un	ited for Health)												
A /	II Name of Individual (Last, First, Middle Initia	l) or Full	Orga	nization Name		Date	of	Red	cei	pt						
	ailing Address 9900 Bren Road East			1		12 31 Y Y Y Y Y 2009										
Cit	-	State		Zip Code	Transaction ID : PR2119466823217											
IVI	innetonka	MN		55343-9664	_	Amo	unt	of I	Ea	ch Re	ece	ipt thi	s Pe	eriod		
	C ID number of contributing deral political committee.	ociate General Cou					,	_	_	-9		260.	00			
Na	me of Employer (for Individual)		•	tion (for Individual) Iealth Group, Inc.		15	Me	mo	lte	əm						
Re	eceipt For:	Aggregat	e Yea	ar-to-Date 🔻		10										
	Primary General Other (specify) v		-7	540.00												
	∥ Il Name of Individual (Last, First, Middle Initia EATY, JON D, D, ,	l) or Full	Orga	nization Name		Date	of	Red	cei	ipt						
Ma	ailing Address 9900 Bren Road East					M 12		/	ľ	31	/	Y	Y 200	09	Y	
Cit	City State Zip Code							ctio	on	ID : I	PR2	21194	678;	2321	7	
Mi	innetonka	MN		55343-9664	Amount of Each Receipt this Period											
	C ID number of contributing leral political committee.	× Dir Clipical Quality					130.00									
Na	ame of Employer (for Individual)		•	tion (for Individual) Health Group, Inc.	1	15	Me	mo	lte	эm						
Re	eceipt For:	Aggregat	e Yea	ar-to-Date 🔻												
	Primary General Other (specify) ▼		,	270.00												
	II Name of Individual (Last, First, Middle Initia BENNETT, RUSSELL A, , ,	l) or Full	Orga	nization Name		Date	of	Red	cei	pt						
	ailing Address 9900 Bren Road East					M 12		/		^D 31	1	/ Y	20	09 [°]	Y	
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M	innetonka	MN		55343-9664		Amo	unt	of I	Ea	ch Re	ece	ipt thi	s Pe	eriod		
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Na	me of Employer (for Individual)		•	tion (for Individual) lealth Group, Inc.		15	Me	mo	lte	эm						
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	Other (specify)		-9-	540.00												
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Detailed Summary Page			X	11a		11	b	11c		12						
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\backslash	NAME OF COMMITTEE (In Full)															
$\Big)$	UnitedHealth Group Incorporated	PAC (United for Health)													
Α.	Full Name of Individual (Last, First, Middle Initia BERKEL, SUSAN LYNN, , ,	l) or Full C	Organization Name		I	Date of	Re	ecei	pt							
	Mailing Address 9900 Bren Road East				12 31 Y Y Y Y Y 12 31 2009							Y				
	City Minnetonka	State MN	Zip Code 55343-9664	-				-				812321	7			
			33343-9004			Amount	of	Ead	ch Re	eceipt	this I	Period				
	FEC ID number of contributing federal political committee.	P Operations					,			_	2304.	00				
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.		1		emo) Ite	em							
	Receipt For:	Aggregate	Year-to-Date ▼		'	0										
	Other (specify) ▼		4992.00													
в.	Full Name of Individual (Last, First, Middle Initia BOOHER, DAVID N, N, ,	l) or Full C	Organization Name			Date of	Re	ecei	pt							
	Mailing Address 9900 Bren Road East				12 31 Y Y Y Y Y 12 31 2009											
	City	State	Zip Code		Transaction ID : PR2119468623217											
	Minnetonka	MN	55343-9664		Amount of Each Receipt this Period 130.00											
	FEC ID number of contributing federal political committee.	СМд	r Pharmacy Ops													
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.		1:		emo) Ite	em							
		Aggregate	Year-to-Date V													
	Other (specify) ▼		, 270.00													
с.	Full Name of Individual (Last, First, Middle Initia BRYAN, KATHIE L, , , ,	l) or Full C	Organization Name			Date of	Re	ecei	pt							
	Mailing Address 9900 Bren Road East					^M 12	/		31	1		009	Y			
	City	State MN	Zip Code	F				-				942321	7			
	Minnetonka		55343-9664		/	Amount	of	Ead	ch Re	eceipt	this I	Period				
	FEC ID number of contributing federal political committee.	C Ass	soc Dir Mrkting Comm					9		,	_	325.	00			
	Name of Employer (for Individual)		15 Memo Item													
	Receipt For:	Aggregate	Year-to-Date V													
	Primary General Other (specify)		675.00													
s	UBTOTAL of Receipts This Page (optional)							,			_	2759.0	00			
т	OTAL This Period (last page this line number or	ıly)			ĺ			-								

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				Detailed Summary Page		11a		11b	11c		12	□ <i>.</i> -				
	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	d PAC (l	Uni	ted for Health)												
Α.	Full Name of Individual (Last, First, Middle Initia CADRIEL, DANIEL P, , ,	ll) or Full O	rgan	ization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East					12 / D D / Y Y Y Y 12 31 2009										
	City Minnetonka	State MN		Zip Code 55343-9664	Transaction ID : PR2119469823217 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	Strategic Accts	130.00													
	Name of Employer (for Individual)	ion (for Individual) ealth Group, Inc.	1		emo	Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 270.00												
В.	Full Name of Individual (Last, First, Middle Initia CAMPBELL, COLLEEN, , ,	ll) or Full O	rgan	ization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East					^M ^M 12	/	D D D 31		20) 009	Y				
	City Minnetonka	State MN		Zip Code 55343-9664	A			on ID : Each R				,				
	FEC ID number of contributing federal political committee.	C Ass	soc D	Dir Clinical Quality	195.00											
	Name of Employer (for Individual)		•	ion (for Individual) ealth Group, Inc.			emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 405.00]	-										
с.	Full Name of Individual (Last, First, Middle Initia CARDER, ROBIN L, , ,	l) or Full O	rgan	ization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East					^M 12	/	D D D 31			009	Y				
	City Minnetonka	State MN		Zip Code 55343-9664	A			i on ID : Each R				7				
	FEC ID number of contributing federal political committee.	C Sr 1	Netw	vork Pricing Consu		_		y	y	_	130.0	0				
	Name of Employer (for Individual)		•	ion (for Individual) ealth Group, Inc.			emo	ltem								
	Receipt For:	Aggregate	Yea	r-to-Date ▼												
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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 se to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpor	rated PAC (I	Inited for Health)								
	,	,								
Full Name of Individual (Last, First, Middle A. CARLSON, DAVID S, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119470223217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Dir	Marketing Research	260.00							
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00								
Full Name of Individual (Last, First, Middle B. CARTER, LESLIE J, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y Y 12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119470323217							
FEC ID number of contributing federal political committee.		Network Contracting	Amount of Each Receipt this Period							
Name of Employer (for Individual)		upation (for Individual) iedHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2592.00								
Full Name of Individual (Last, First, Middle C. COATS, HAROLD, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119471023217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Nat	l Medical Director/CMC	100.00							
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00]							
SUBTOTAL of Receipts This Page (optional)		▶ 1608.00							
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 person for the purpose of soliciting contributions se to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	g the name and a		
UnitedHealth Group Incorpo	rated PAC (l	Jnited for Health)	
/ Full Name of Individual (Last, First, Middl A. CORREIA, RANDELL J, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 31 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119471323217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C VP	Pharmacy Operations	390.00
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 810.00	
Full Name of Individual (Last, First, Middl CROSS, RICHARD A, , , Mailing Address 9900 Bren Road East	e Initial) or Full O	rganization Name	Date of Receipt
City	State	Zip Code	12 31 2009 Transaction ID : PR2119471823217
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C Dep	outy General Counsel (325.00
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 675.00	
Full Name of Individual (Last, First, Middl C. DAVIS, KENNETH R, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119472523217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	СМе	dical Director	260.00
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 540.00	
SUBTOTAL of Receipts This Page (optiona	l)		975.00
TOTAL This Period (last page this line num	ber only)		

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	EIVIZED RECEIFIS		Detailed Summary Page		〈 11a		11b		11c		12								
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	y information copied from such Reports and Stat for commercial purposes, other than using the n																		
\backslash	NAME OF COMMITTEE (In Full)																		
$\Big)$	UnitedHealth Group Incorporated	`	,																
Α.	Full Name of Individual (Last, First, Middle Initial DAYAN, LINDA M, , ,	l) or Full O	Organization Name		Date of Receipt														
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y 12 31 2009														
	City	State MN	Zip Code		Trans	act	ion I	ID : P	R2119	4726	523217	7							
	Minnetonka		55343-9664	Amount of Each Receipt this Period															
	FEC ID number of contributing federal political committee.	C Chi	ief of Staff		247.00														
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.		M 15	emc	b Iter	m											
		Aggregate	Year-to-Date ▼		-														
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— В.	Full Name of Individual (Last, First, Middle Initial DEMBROSKI, TODD J, , ,		Date of	f Re	eceip	ot													
	Mailing Address 9900 Bren Road East							12 D D / Y Y Y Y Y Y 12 31 2009											
	City	State	Zip Code		Trans	acti	ion I	D : P	R21194	4728	323217	,							
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C.	Full Name of Individual (Last, First, Middle Initial DILWEG, ANDREA E, , ,	l) or Full O	Organization Name		Date of	f Re	eceip	ot											
	Mailing Address 9900 Bren Road East				^M 12		L	31 D	/ Y	20) 009								
	City Minnetonka	State MN	Zip Code 55343-9664						PR2119			7							
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	FEC ID number of contributing federal political committee.	C Go	vt Rel Dir		481.00														
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.		M	emo	o Itei	m											
		Aggregate	Year-to-Date V																
	Other (specify)	999.00																	
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check on	(check only one)									
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	mation copied from such Reports and s mmercial purposes, other than using th				purpose of									
	OF COMMITTEE (In Full)													
) Unit	tedHealth Group Incorporat	ed PAC (l	Jnited for Health)											
	ame of Individual (Last, First, Middle In NGAN, TARA M, , ,	itial) or Full O	rganization Name	Date o	f Receipt									
Mailing	g Address 9900 Bren Road East			M M 12	12 31 2009									
City Minnetonka		State MN	Zip Code 55343-9664		saction ID : t of Each R			7						
	D number of contributing I political committee.	C Mgr	Medical & Clinical Op			 	130.0	0						
Name	of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	— M	emo Item									
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]										
B. FLU	ame of Individual (Last, First, Middle In ITT, BRADLEY M, , , g Address 9900 Bren Road East	Date o	f Receipt	/ Y	YYY	Y								
City		State	Zip Code		31 saction ID :			,						
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Name	of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15	emo Item									
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00]										
	ame of Individual (Last, First, Middle In MBRONE, ANGELO, , ,	itial) or Full O	rganization Name	Date o	f Receipt									
	g Address 9900 Bren Road East	1		12	/ 31) / Y	2009	Ŷ						
City Minne	etonka	State MN	Zip Code 55343-9664		saction ID : t of Each R			7						
	D number of contributing I political committee.	C VP	Network Contracting			. ,	780.0	0						
	of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15	lemo Item									
	ot For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1620.00]										
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	check only one)											
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			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 Incorpo	orated PAC (Jnited for Health)												
/ Full Name of Individual (Last, First, Mido	lle Initial) or Full O	rganization Name												
A. GILDERNICK, AMY J, , ,			Date of Receipt											
Mailing Address 9900 Bren Road East			12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y											
City	State	Zip Code	Transaction ID : PR2119475223217											
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period											
FEC ID number of contributing	C Ass	oc Dir Claims	260.00											
federal political committee.														
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item											
Receipt For:		17	15											
Primary General	Aggregate	Year-to-Date ▼												
Other (specify) v		540.00												
			_											
Full Name of Individual (Last, First, Mido B. GLICKMAN, SANDRA R, , ,	Date of Receipt													
Mailing Address 9900 Bren Road East	Mailing Address 9900 Bren Road East													
City	State	Zip Code	Transaction ID : PR2119475323217											
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C Dir	Case Mgmt	130.00											
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item											
Receipt For:	Aggregate	Year-to-Date ▼												
Other (specify) ▼		270.00												
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Full Name of Individual (Last, First, Mido C. GONZALES, MARIA C, , ,	lle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 9900 Bren Road East			12 31 Y Y Y Y 12 31 2009											
City	State MN	Zip Code	Transaction ID : PR2119475423217											
		55343-9664	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	СМд	r Case Mgmt	130.00											
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item											
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Other (specify)		270.00]											
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PAGE 64 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
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			13 14 15 16 17 berson for the purpose of soliciting contributions be to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpo	rated PAC (United for Health)										
Full Name of Individual (Last, First, Middl A. HANSEN, DAVID M, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9900 Bren Road East			12 31 2009									
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119476723217 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	СНеа	alth Plan CEO	1755.00									
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3645.00]									
Full Name of Individual (Last, First, Middl HARVEY, ANNE P, , ,	Date of Receipt											
Mailing Address 9900 Bren Road East	12 31 Y Y Y Y 2009											
City	State MN	Zip Code 55343-9664	Transaction ID : PR2119477223217									
Minnetonka FEC ID number of contributing federal political committee.		oc Dir Provider Svc	Amount of Each Receipt this Period									
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 270.00	15									
Full Name of Individual (Last, First, Midd C. HAYES, PAULINE M, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9900 Bren Road East			12 31 / Y Y Y Y 12 31 2009									
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119477423217 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C Ass	soc Dir Finance	130.00									
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00]									
SUBTOTAL of Receipts This Page (optional	l)		2015.00									
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			Detailed Summary Page		11a 13		11b	11c		12 16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the na				or the		pose of a	soliciting		ntribut	ions				
	NAME OF COMMITTEE (In Full)	ante anu a		e 10 30				oni suc							
\rangle	UnitedHealth Group Incorporated	I PAC (l	Jnited for Health)												
A.	Full Name of Individual (Last, First, Middle Initial HO, SAMUEL W, , ,	l) or Full O	rganization Name		Date of Receipt										
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y 12 31 2009										
	City Minnetonka	State MN	Zip Code 55343-9664		Transaction ID : PR2119477923217 Amount of Each Receipt this Period										
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emo	ltem								
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 540.00]											
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PAGE 66 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
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			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 (United for Health)									
Full Name of Individual (Last, First, Middle A. HUSER, DONNA L, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119478623217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Spy	vsr Claims	130.00								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]								
Full Name of Individual (Last, First, Middle JEFFREY, BRIAN, , ,	Date of Receipt										
Mailing Address 9900 Bren Road East	12 31 Y Y Y Y 2009										
City	State MN	Zip Code 55343-9664	Transaction ID : PR2119479123217								
Minnetonka FEC ID number of contributing federal political committee.		Network Contracting	Amount of Each Receipt this Period 325.00								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 675.00]								
Full Name of Individual (Last, First, Middle C. JONES, JOHN D, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119479223217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С ИР	Govt Rel	1248.00								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2592.00]								
SUBTOTAL of Receipts This Page (optional)			1703.00								
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SCHEDULE A (FEC Form 3X) _____ _ _ _ _ _

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			Use separate schedule(s)	(check only one)								
	MIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
	information copied from such Reports and Sta r commercial purposes, other than using the r			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.								
<u> </u>	AME OF COMMITTEE (In Full)											
$\langle \rangle$	JnitedHealth Group Incorporated	I PAC (l	Jnited for Health)									
	ull Name of Individual (Last, First, Middle Initia JORDAN, RONALD W, , ,	l) or Full O	rganization Name	Date of Receipt								
M	lailing Address 9900 Bren Road East			M M / D D / Y Y Y Y 12 31 2009								
	ity ⁄linnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119479323217 Amount of Each Receipt this Period								
	EC ID number of contributing deral political committee.	C Dir	Customer Service	65.00								
N	ame of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item								
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00									
B	ull Name of Individual (Last, First, Middle Initia KNUTSON, MARK C, , ,	Date of Receipt										
_	lailing Address 9900 Bren Road East	12 31 2009										
	linnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119480223217 Amount of Each Receipt this Period								
	EC ID number of contributing deral political committee.	C Dir	Customer Service	195.00								
N	ame of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	15								
R	eceipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 405.00									
	ull Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Receipt								
M	ailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
	ity ⁄linnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119481023217 Amount of Each Receipt this Period								
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_	ame of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15 Memo Item								
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		Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$								
or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (United for Health)									
Full Name of Individual (Last, First, Middle LEWIS, CHARLES E, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City	State MN	Zip Code	Transaction ID : PR2119481523217								
Minnetonka	IVIIN	55343-9664	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Sal	es Market Leader - Me	130.00								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item								
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Primary General Other (specify) ▼]										
Full Name of Individual (Last, First, Middle B. LINDE, SUSAN A, , ,	Initial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East	12 31 2009										
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Minnetonka	MN	55343-9664	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	СМд	r Regulatory Affairs	130.00								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	15								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		270.00									
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Mailing Address 9900 Bren Road East	1		12 / D D / Y Y Y Y 12 31 2009								
City	State	Zip Code	Transaction ID : PR2119482123217								
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C As	soc Project Manager	130.00								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15 Memo Item								
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Primary General	33.23310		1								
Other (specify)		270.00									
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	TEMIZED RECEIPTS		Detailed Summary Page		11a		11b		11c		12	_				
	y information copied from such Reports and Sta for commercial purposes, other than using the r									g con						
	NAME OF COMMITTEE (In Full)									1 001		0.				
\rangle	UnitedHealth Group Incorporated	d PAC (I	United for Health)													
A.	Full Name of Individual (Last, First, Middle Initia LUEDKE, SANDY M, , ,	al) or Full O	organization Name		Date of Receipt											
	Mailing Address 9900 Bren Road East				12 31 Y Y Y Y 12 31 2009											
	City	State	Zip Code	_	Trans	acti	ion ID) : P	R2119	48222	23217					
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period												
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	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.			emo	Item									
	Receipt For:	Aggregate	Year-to-Date ▼		,											
	Primary General Other (specify) ▼		405.00]												
В.	Full Name of Individual (Last, First, Middle Initia LUKER, TIMOTHY A, , ,	al) or Full O	Prganization Name		Date of	f Re	eceipt									
	Mailing Address 9900 Bren Road East						12 31 2009									
	City	State	Zip Code		Trans	acti	on ID	: P	R21194	18232	23217					
	Minnetonka	MN	55343-9664	/	mount	t of	Each	Re	ceipt th	nis Pe	eriod					
	FEC ID number of contributing federal political committee.	C Dir				-				104.0	0					
	Name of Employer (for Individual)	Occ Unit	1:	Memo Item 15												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 216.00]												
С.	Full Name of Individual (Last, First, Middle Initia MACE-MEADOR, HEATHER M, , ,	al) or Full O	Prganization Name		Date of	f Re	eceipt									
	Mailing Address 9900 Bren Road East				^M 12	/	3	^D 31	/ Y	200	09 [°]	Y				
	City Minnetonka	State MN	Zip Code 55343-9664						R2119			,				
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PAGE 70 OF

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information conied from such Benerite on	d Statomonto m	av not be sold or used by one of	13 14 15 16 17										
or for commercial purposes, other than using	the name and a	ddress 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 (United for Health)											
Full Name of Individual (Last, First, Middle MASON, JEFFREY S, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
City	State MN	Zip Code	Transaction ID : PR2119483023217										
Minnetonka		55343-9664	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	СМе	dical Director	195.00										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For:	Aggregate	Year-to-Date V											
Other (specify) ▼	Primary General General												
Full Name of Individual (Last, First, Middle B. MILBURN, CHARLEEN M, , ,	Date of Receipt												
Mailing Address 9900 Bren Road East	12 31 2009												
City	State	Zip Code	Transaction ID : PR2119483923217										
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Gov	/t Rel Dir	845.00										
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item										
Receipt For:	Aggregate	Year-to-Date V											
Other (specify) ▼		, 1755.00]										
Full Name of Individual (Last, First, Middle C. MIRANDA, BENITO M, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 31 / Y Y Y Y 12 31 2009										
City	State	Zip Code	Transaction ID : PR2119484223217										
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Co	mmunity Developer - S	156.00										
Name of Employer (for Individual)	Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.												
Receipt For:	Aggregate	15											
Primary General	55 - 5	324.00	1										
Other (specify)													
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				or each category of the Detailed Summary Page		11a 13		-	1b 4	11c 15	12	17				
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\setminus	NAME OF COMMITTEE (In Full)		~	itad far Uaalth)												
	UnitedHealth Group Incorporated	`		,												
Α.	Full Name of Individual (Last, First, Middle Initial MONK, NANCY J, , ,	l) or Full O)rgai	nization Name	[Date of Receipt										
	Mailing Address 9900 Bren Road East				12 31 2009											
	City Minnetonka	State MN		Zip Code 55343-9664							4843232					
	FEC ID number of contributing federal political committee.	C VP	Gov	rt Affairs & Compl	Amount of Each Receipt this Period 650.00											
	Name of Employer (for Individual)		•	tion (for Individual) lealth Group, Inc.	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 1350.00												
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MURRAY, CAROLYN L, ,						of Re	ece	eipt							
	Mailing Address 9900 Bren Road East							12 / D D / Y Y Y Y 12 31 2009								
	City Minnetonka	State MN		Zip Code 55343-9664							4848232 nis Perio					
	FEC ID number of contributing federal political committee.	C Acq Mgr Account Mgmt						,		-9-	130).00				
	Name of Employer (for Individual)		•	tion (for Individual) Health Group, Inc.	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 270.00												
с.	Full Name of Individual (Last, First, Middle Initia NEURURER, SCOTT A, , ,	l) or Full O	rga	nization Name	[Date c	of Re	ece	eipt							
	Mailing Address 9900 Bren Road East	1		1		^M 12			D D D 31	ΙL	ү ү 2009	_				
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
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			13 14 15 16 17 berson for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	ated PAC (United for Health)									
Full Name of Individual (Last, First, Middle A. NYGARD, KEITH E, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119485023217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Ass	soc Dir Compliance	260.00								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00									
Full Name of Individual (Last, First, Middle B. OLLMANN-WAGNER, TRACY L, , ,	Date of Receipt										
Mailing Address 9900 Bren Road East											
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119485223217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Mgr	Traffic/Workforce	195.00								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 405,00]								
Full Name of Individual (Last, First, Middle C. OLSON, WILLIAM H, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119485323217 Amount of Each Receipt this Period								
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Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00]								
SUBTOTAL of Receipts This Page (optional))		585.00								
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			Detailed Summary Page		11a 13		11b 14	11c		12 16	17			
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$\overline{)}$	NAME OF COMMITTEE (In Full)													
$\Big\rangle$	UnitedHealth Group Incorporated	I PAC (l	Jnited for Health)											
A.	Full Name of Individual (Last, First, Middle Initial OTTO, CYNTHIA ANN, , ,	l) or Full O	rganization Name	Date of Receipt										
	Mailing Address 9900 Bren Road East	1			12 31 2009 Transaction ID : PR2119485423217									
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B.		l) or Full O	rganization Name		Date of	Re	ceipt							
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	City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119485823217 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Ser	vice Account Manager				-		_	325.0	00			
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 675.00]										
C.	Full Name of Individual (Last, First, Middle Initial PETE, DIANA S, , ,	l) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 9900 Bren Road East				12 ^M	/	D D D 31	J L	2	009				
	City Minnetonka	State MN	Zip Code 55343-9664				i on ID : Each Re				7			
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1	5 M	emo	ltem							
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	y information copied from such Reports and Stat for commercial purposes, other than using the n														
\backslash	NAME OF COMMITTEE (In Full)														
$\Big/$	UnitedHealth Group Incorporated	I PAC (United	for Health)											
Α.	Full Name of Individual (Last, First, Middle Initia PETERS, MICHELLE LYNN, , ,	l) or Full C	Drganizati	on Name		Date of	Re	ecei	pt						
	Mailing Address 9900 Bren Road East	1				12 / D D / Y Y Y Y 12 31 2009									
	City	State MN		Code		Trans	acti	ion	ID : F	PR2119	4864	123217	7		
	Minnetonka		55	5343-9664	_	Amount	of	Ea	ch Re	eceipt th	nis P	'eriod			
	FEC ID number of contributing federal political committee.	C Ass	soc Dir A	ctuarial Servic	195.00										
	Name of Employer (for Individual)		•	for Individual) Group, Inc.		5 M	emo	o Ite	em						
	Receipt For:	Aggregate	Year-to-I	Date 🔻		0									
	Primary General Other (specify) ▼		-y	405.00											
в.	Full Name of Individual (Last, First, Middle Initia PITTMAN, AUSTIN T, , ,	l) or Full C	Organizati	on Name		Date of	Re	ecei	pt						
	Mailing Address 9900 Bren Road East							ľ	31	/ Y)09	Y		
	City	State	Zip	Code		Transaction ID : PR2119486723217									
	Minnetonka	MN	55	343-9664	Amount of Each Receipt this Period							'eriod			
	FEC ID number of contributing federal political committee.	C Chi	ief Growtl	n Officer	1755.0					0					
	Name of Employer (for Individual)	Occ Uni		<u></u> М	emo	o Ite	em								
		Aggregate	Year-to-l	Date 🔻											
	Primary General Other (specify) ▼		<u>,</u>	3645.00											
с.	Full Name of Individual (Last, First, Middle Initia POLICH, CYNTHIA L, , ,	l) or Full C	Organizati	on Name		Date of	Re	ecei	pt						
	Mailing Address 9900 Bren Road East					^M 12	/		31	/ Y		009	Y		
	City	State MN		Code						PR2119			7		
	Minnetonka		55	343-9664	_	Amount	of	Ea	ch Re	eceipt th	nis P	'eriod			
	FEC ID number of contributing federal political committee.	C Ch	ief Strate	gy Officer				,		y	_	1300.0	0		
	Name of Employer (for Individual)		• •	for Individual) Group, Inc.		5 M	emo	o Ite	əm						
		Aggregate	Year-to-l	Date 🔻											
	Other (specify)		-g= 1	2700.00											
s	UBTOTAL of Receipts This Page (optional)							,			:	3250.0	0		
Т	OTAL This Period (last page this line number on	ly)			-			-							

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			Detailed Summary Page		11a 13		11b 14		11c 15		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the		pose of	f so	liciting		ntributi	ons
	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	d PAC (I	United for Health)									
A.	Full Name of Individual (Last, First, Middle Initia RICCIUTI, SHARON A, , ,	al) or Full O	Organization Name		Date of	Re	ceipt					
	Mailing Address 9900 Bren Road East				^M 12	1	D 31		/ Y	ү 20	009	Y
	City Minnetonka	State MN	Zip Code 55343-9664				i on ID : Each F					,
	FEC ID number of contributing federal political committee.	C Dir	Clinical Quality			_	-		-	_	260.0	0
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	1		emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00]								
B.	Full Name of Individual (Last, First, Middle Initia ROGERS, DEBBIE E, , ,	al) or Full O	Organization Name		Date of	Re	ceipt					
	Mailing Address 9900 Bren Road East				M M 12	/	D 31		/ Y	20)09	Y
	City Minnetonka	State MN	Zip Code 55343-9664				on ID : Each F					,
	FEC ID number of contributing federal political committee.	C Sr F	Project Manager I						-y	_	130.0	0
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.			emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]								
C.	Full Name of Individual (Last, First, Middle Initia SCACCIA, CAROL A, , ,	al) or Full O	Organization Name		Date of	Re	ceipt					
	Mailing Address 9900 Bren Road East				^M 12	/	31		/ Y)09 [°]	Y
	City Minnetonka	State MN	Zip Code 55343-9664				i on ID : Each F		-			7
	FEC ID number of contributing federal political committee.	Ска	New Bus Coord - PAC				, .		y	_	130.0	0
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emc	tem Item					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)	L	270.00									
	UBTOTAL of Receipts This Page (optional)					_	9		9	-	520.0	0
Т	OTAL This Period (last page this line number or	nly)					-		-			_

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 e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpor	ated PAC (United for Health)								
Full Name of Individual (Last, First, Middle SING, MARTIN, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119490123217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Dir	Customer Service	130.00							
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]							
Full Name of Individual (Last, First, Middle B. STETTLER, RONALD R, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119490423217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.		Healthcare Econ								
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]							
Full Name of Individual (Last, First, Middle C. STYERS, MARILYNN D, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119490723217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C VP		260.00							
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 540.00]							
SUBTOTAL of Receipts This Page (optional)			520.00							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
ILEINIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 Derson for the purpose of soliciting contributions ee to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	rated PAC (Jnited for Health)									
Full Name of Individual (Last, First, Middle A TANIGAWA, CHERYL, , , MD	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119491123217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Nat	I Medical Director/CMC	650.00								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1350.00]								
Full Name of Individual (Last, First, Middle B. TEYLAN, MARY R, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East	Address 9900 Bren Road East										
City	State MN	Zip Code	Transaction ID : PR2119491423217								
Minnetonka	IVIN	55343-9664	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	Sr Accounting Concultant										
Name of Employer (for Individual)		upation (for Individual) adHealth Group, Inc.	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		270.00]								
Full Name of Individual (Last, First, Middle THOMSON, CHERYL A, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2119491623217 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Ass	soc Dir Compliance	195.00								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 405.00]								
SUBTOTAL of Receipts This Page (optional	l)		975.00								
TOTAL This Period (last page this line num	ber only)										

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PAGE 78 OF

		Detailed Summary Page		11a		11b	11c		12				
۸n	y information copied from such Reports and S	Statemente m	av not be sold or used by an		13 for the		14	15		16 ntribut	17		
or	for commercial purposes, other than using the	e name and a	ddress of any political commi	ttee to so	licit coi	ntrib	utions fro	om such	h co	mmitte	e.		
\backslash	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (United for Health)										
Α.	Full Name of Individual (Last, First, Middle Ini TUCKER, STEVEN M, , ,	itial) or Full C	rganization Name		Date of Receipt								
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y 12 31 2009								
	City	State MN	Zip Code		Trans	acti	on ID : F	R2119	4920	02321	7		
	Minnetonka		55343-9664		Amount	of	Each Re	ceipt th	nis F	eriod			
	FEC ID number of contributing federal political committee.	C VP	Regulatory Affairs							1248.0	0		
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1	М 5	emo	Item						
	Receipt For:	Aggregate	Year-to-Date ▼		0								
	Primary General Other (specify) ▼		2592.00										
В.	Full Name of Individual (Last, First, Middle Ini VANASTEN, SUSAN, , ,	tial) or Full C	rganization Name		Date of	Re	ceipt						
	Mailing Address 9900 Bren Road East				12 ^M	/	D D D 31	/ Y	20)09 009	Y		
	City	State	Zip Code		Trans	acti	on ID : P	R21194	1926	23217	,		
	Minnetonka	MN	55343-9664		Amount	of	Each Re	ceipt th	nis F	eriod			
	FEC ID number of contributing federal political committee.				-	-		520.0	0				
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	1		emo	Item						
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		1080.00										
С.	Full Name of Individual (Last, First, Middle Ini WESTPHAL, SCOTT B, , ,	itial) or Full C	rganization Name		Date of	Re	ceipt						
	Mailing Address 9900 Bren Road East				^M 12	/	D D D 31	/ Y)09 [°]	Y		
	City Minnetonka	State MN	Zip Code 55343-9664				ion ID : F				7		
			55343-9004		Amount	of	Each Re	ceipt th	nis F	eriod			
	FEC ID number of contributing federal political committee.	C Dir	Actuarial Services				y			150.0)2		
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1	М 5	emo	ltem						
	Receipt For:	Aggregate	Year-to-Date ▼		•								
	Other (specify)		311.58										
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SCHEDULE A (FEC Form 3X)

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			Use separate schedule(s)	(check only	one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	1 7			
	y information copied from such Reports and Sta for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)					in such	commute				
	UnitedHealth Group Incorporate		I Inited for Health)								
/											
Α.	Full Name of Individual (Last, First, Middle Initia DAUGHERTY, LINDA D, , ,	al) or Full O	Organization Name	Date of F	Receipt						
	Mailing Address 9900 Bren Road East			12 31 Y Y Y Y 2009							
	City	State	Zip Code	Transa	ction ID : P	R21194	93523217	7			
	Minnetonka	MN	55343-9664	Amount o	of Each Re	ceipt thi	s Period				
	FEC ID number of contributing federal political committee.	C Ass	sociate General Couns			-1	260.0	0			
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.		no Item						
	Receipt For:		Year-to-Date ▼	15							
	Primary General	riggrogato									
	Other (specify)		540.00								
В.	Full Name of Individual (Last, First, Middle Initia WOLFE, LORI S, , ,	al) or Full O	Organization Name	Date of F	Receipt						
	Mailing Address 9900 Bren Road East			^M 12	/ D D 31	/ Y	2009	Y			
	City	State MN	Zip Code 55343-9664		tion ID : P			,			
	Minnetonka		55545-9004	Amount o	of Each Re	ceipt thi	s Period				
	FEC ID number of contributing federal political committee.	C Mgr	r Claims			-	130.0	0			
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.		no Item						
	Receipt For:		Year-to-Date ▼	15							
	Primary General	Aggregate									
	Other (specify) ▼	<u> </u>	270.00								
с.	Full Name of Individual (Last, First, Middle Initia WRIGHT, GREGORY, , ,	al) or Full O	Organization Name	Date of F	Receipt						
	Mailing Address 9900 Bren Road East			12 ^M	/ D D D 31	/ Y	y y 2009	Y			
	City	State	Zip Code	Transa	ction ID : P	R21194	9412321	7			
	Minnetonka	MN	55343-9664	Amount o	of Each Ree	ceipt thi	s Period				
	FEC ID number of contributing federal political committee.	C Dir	General Management		y	y	325.0	0			
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15	no Item						
	Receipt For:		Year-to-Date ▼								
	Primary General Other (specify)		675.00								
_							715.0	0			
	UBTOTAL of Receipts This Page (optional)		· ·		y	9	113.0	~			
Т	OTAL This Period (last page this line number o	nly)	•••••••								

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			Detailed Summary Page		11a		11b	11c		12	_ 4 - 7
	y information copied from such Reports and Star										
	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	udress of any political committer	ย เปรอ	iicit cor	and	utions fr	UIII SUC		mmute	
\rangle	UnitedHealth Group Incorporated	I PAC (l	Jnited for Health)								
 A.	Full Name of Individual (Last, First, Middle Initia YOUNG, GEORGE M, , ,	l) or Full O	rganization Name	[Date of	Re	ceipt				
	Mailing Address 9900 Bren Road East				M M 12	/	D D 31	/ Y	2	009	Y
	City Minnetonka	State MN	Zip Code 55343-9664				i on ID : I Each Re				7
	FEC ID number of contributing federal political committee.	C Exe	cutive Director						_	195.0	0
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 405.00]							
В.	Full Name of Individual (Last, First, Middle Initia YOUNG, STEVEN C, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 9900 Bren Road East				^M 12	/	D D 31	/ Y	20	009	Y
	City Minnetonka	State MN	Zip Code 55343-9664				on ID : F Each Re				,
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.			emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00]							
с.	Full Name of Individual (Last, First, Middle Initia BURKE, FORREST G, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 9900 Bren Road East				^M 12	/	D D 31	/ Y		009	Y
	City Minnetonka	State MN	Zip Code 55343-9664				ion ID : I Each Re				7
	FEC ID number of contributing federal political committee.	C Pre	sident PS Labor & Tru				y 1	, , ,	_	130.0	00
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emc	ttem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00]							
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	EMIZED RECEIPTS			for each category of the Detailed Summary Page		✓ 11a 13		11b 14	11c 15	12 16	17						
	y information copied from such Reports and State for commercial purposes, other than using the na																
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Un	ited for Health)													
	Full Name of Individual (Last, First, Middle Initial) COLEMAN, WILLIAM R, , , Mailing Address 9900 Bren Road East City Minnetonka FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary	State MN C Ass Occu Unit	soc l upa	Tip Code 55343-9664 Dir Network A&R tion (for Individual) Health Group, Inc.		Amoun	sacti t of	31 on ID :	PR21331 Receipt th		7						
В.	Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) CUMMINGS, DANIEL M, , ,) or Full O	Irga	225.00 nization Name		Date o	f Re	ceipt									
	Mailing Address 9900 Bren Road East City Minnetonka FEC ID number of contributing federal political committee.	onka State Zip Code MN 55343-9664								12 31 2009 Transaction ID : PR2133132623217 Amount of Each Receipt this Period 195.00							
	Name of Employer (for Individual)	Unit	tedł	tion (for Individual) Health Group, Inc. ar-to-Date ▼ 405.00	,	М	emo	Item									
	Full Name of Individual (Last, First, Middle Initial) HANSON, CHARLES W, , , Mailing Address 9900 Bren Road East City Minnetonka FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State MN C VP Occu Unite	Uno	Zip Code 55343-9664 derwriting tion (for Individual) ealth Group, Inc. ar-to-Date ▼ 1393.74		Amoun	sacti	31	PR2133		7						
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T	OTAL This Period (last page this line number onl	y)		••••••	•			,									

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			Detailed Summary Page		11a 13		11b 14	11c 15		12 16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the				or the		oose of s	oliciting		ntributi				
$\overline{)}$	NAME OF COMMITTEE (In Full)		· · · · · · · · · · · · · · · · · · ·											
\rangle	UnitedHealth Group Incorporate	d PAC (I	United for Health)											
A.	Full Name of Individual (Last, First, Middle Initia HULTGREN, BROR O, , ,	al) or Full O	rganization Name		Date of Receipt									
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y 12 31 2009									
	City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2133133223217 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Reg	gional Executive				.	-		499.9	8			
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1038.42	1										
B.	Full Name of Individual (Last, First, Middle Initia MAGILL HANSON, CAROLYN, , ,	al) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 9900 Bren Road East				^M 12	1	D D D 31	/ Y)09	Y			
	City Minnetonka	State MN	Zip Code 55343-9664				on ID : P Each Ree				,			
	FEC ID number of contributing federal political committee.	C Dir	Product		249.99									
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	1		emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 519.21]										
с.	Full Name of Individual (Last, First, Middle Initia MILLER, ALLEN D, , ,	al) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 9900 Bren Road East	1			^M 12	/	D D D 31	/ Y	20)09 [°]				
	City Minnetonka	State MN	Zip Code 55343-9664				i on ID : P Each Red				7			
	FEC ID number of contributing federal political committee.	C Re	gional Executive				y .	9		455.0	0			
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1	5 M	emo	Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 945.00	1										
	UBTOTAL of Receipts This Page (optional)			• -			, ,	, ,		1204.9	7			

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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 Incorpor	ated PAC (United for Health)								
Full Name of Individual (Last, First, Middle MORISATO, SUSAN C, , , Mailing Address 9900 Bren Road East City										
Minnetonka FEC ID number of contributing	MN	55343-9664	Transaction ID : PR2133133823217 Amount of Each Receipt this Period							
federal political committee.	Occ	Federal Prog-UHG Alli upation (for Individual)	1950.00 Memo Item							
Receipt For: Primary General Other (specify) ▼		tedHealth Group, Inc. Year-to-Date ▼ 4050.00	15							
Full Name of Individual (Last, First, Middle NETTLETON, KIMBERLY ALLENE, Mailing Address 9900 Bren Road East		organization Name	Date of Receipt							
City Minnetonka	State MN	Zip Code 55343-9664	12 31 2009 Transaction ID : PR2133133923217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Dir	General Management	195.00							
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00]							
Full Name of Individual (Last, First, Middle PUTNAM, T JEFFREY, , , Mailing Address 9900 Bren Road East	initial) or Full C	organization Name	Date of Receipt							
City Minnetonka	State MN	Zip Code 55343-9664	12 31 2009 Transaction ID : PR2133134223217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C sv	P Financial Plng & Ana								
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.80]							
SUBTOTAL of Receipts This Page (optional))		4452.60							
TOTAL This Period (last page this line numb	ber only)									

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	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			13 14 15 16 17 person for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
ight angle UnitedHealth Group Incorpora	ated PAC (United for Health)								
Full Name of Individual (Last, First, Middle SCHIMMELBUSCH, DIANE M, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y 12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2133134623217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Dir	Medical & Clinical Ops	325.00							
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 675.00]							
Full Name of Individual (Last, First, Middle SHIELS, ANITA W, , , Mailing Address 9900 Bren Road East	Initial) or Full O	rganization Name	Date of Receipt							
			12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2133134723217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Dir	General Management	130.00							
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		270.00]							
Full Name of Individual (Last, First, Middle C. TRIVEDI, AMIT, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009							
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2133134823217 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C Dir	Underwriting	249.99							
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 519.21]							
SUBTOTAL of Receipts This Page (optional)			704.99							
TOTAL This Period (last page this line numb	er only)									

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			Detailed Summary Page		11a		11b	11c		12	_				
	y information copied from such Reports and Sta														
or	for commercial purposes, other than using the n	ame and a	adress of any political committe	e to sol	ICIT COL	ntrib	utions fr	om suc	n co	mmitte	e.				
	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated	I PAC (l	Jnited for Health)												
Α.	Full Name of Individual (Last, First, Middle Initia BARNOWSKI, CYNTHIA A, , ,	l) or Full O	rganization Name		Date of	Re	eceipt								
	Mailing Address 9900 Bren Road East				м м 12	1	D D 31	/ Y	2(009	Y				
	City	State	Zip Code		Transaction ID : PR2145728123217										
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С ИР		260.00											
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.			emo	Item								
	Receipt For:	Aggregate	Year-to-Date ▼		5										
	Primary General Other (specify) ▼		601.95]											
В.	Full Name of Individual (Last, First, Middle Initia COLE, DANIEL M, , ,	l) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East				M M 12	/	31	/ Y	20) 009	Ŷ				
	City	State	Zip Code		Transaction ID : PR2145728323217										
	Minnetonka	MN	55343-9664	4	Amount	of	Each Re	eceipt th	nis P	'eriod					
	FEC ID number of contributing federal political committee.	C Chie	ef of Staff			_		-9-	_	130.0	0				
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15		emo	Item								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify) v		270.00	4											
C.	Full Name of Individual (Last, First, Middle Initia FALKENBERG, ROBERT C, , ,	l) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 9900 Bren Road East	-			^M 12	/	D D D 31	/ Y) 009	Y				
	City Minnetonka	State MN	Zip Code 55343-9664				ion ID : F				7				
		1		/	Amount	of	Each Re	eceipt th	iis P	'eriod					
	FEC ID number of contributing federal political committee.	С Неа	alth Plan CEO			_	, . ,		_	499.9	8				
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1		emc	ttem								
	Receipt For:	Aggregate	Year-to-Date 🔻												
	Primary General		1038.42	11											
	Other (specify)		1030.42												
s	UBTOTAL of Receipts This Page (optional)						,	,		889.9	8				
т	OTAL This Period (last page this line number or	ıly)					-								

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				tailed Summary Page		11a] 11k		11c		12	1 -7			
	y information copied from such Reports and S for commercial purposes, other than using the								e of s							
		name anu a	luures		10 50			Julio		JIII SUC	1 00	mmue				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Unite	ed for Health)												
Α.	Full Name of Individual (Last, First, Middle Init FARAHANI, ROB, , ,	tial) or Full O	rganiz	ation Name		Date of	Re	eceip	pt							
	Mailing Address 9900 Bren Road East					12 ^M	/	D	31	/ Y)09 009	Y			
	City Minnetonka	State MN	Z	ip Code 55343-9664		Transaction ID : PR2145728523217 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Dir	п		499.98											
	Name of Employer (for Individual)		•	n (for Individual) alth Group, Inc.	1		emo) Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-1	to-Date ▼ 1038.42												
В.	Full Name of Individual (Last, First, Middle Init HARR, JEFFREY A, , ,	tial) or Full O	rganiz	ation Name		Date of	Re	eceip	pt							
	Mailing Address 9900 Bren Road East									/ Y		9 09	Y			
	City	State		lip Code		Trans	acti	ion	ID : P	R2145	7286	23217	,			
	Minnetonka	MN		55343-9664	_ /	Amount	t of	Ead	ch Re	ceipt th	is P	eriod				
	FEC ID number of contributing federal political committee.	C Dir	Sales	Ops						-9-	_	99.9	7			
	Name of Employer (for Individual)		•	n (for Individual) alth Group, Inc.	1		emo) Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-1	to-Date ▼ 207.63												
с.	Full Name of Individual (Last, First, Middle Init KIDD, CARL T, , ,	tial) or Full O	rganiz	ation Name		Date of Receipt										
	Mailing Address 9900 Bren Road East					^M 12	/	D	31	/ Y)09 [°]	Ŷ			
	City Minnetonka	State MN		ip Code 55343-9664						R2145			7			
	FEC ID number of contributing federal political committee.	C Dir	Client	Svc Acct Mgt				9		,	_	375.0	5			
	Name of Employer (for Individual)		•	n (for Individual) Ith Group, Inc.	1	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-1	to-Date ▼ 778.95												
s	UBTOTAL of Receipts This Page (optional)			•				9	_	9	-	975.0	0			
т	OTAL This Period (last page this line number of	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 to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	Jnited for Health)											
Full Name of Individual (Last, First, Middle LINDIMORE, NANCY E, , , Mailing Address 9900 Bren Road East	Initial) or Full Or	ganization Name	Date of Receipt										
City	State	Zip Code	12 31 2009 Transaction ID : PR2145728923217										
Minnetonka FEC ID number of contributing federal political committee.	ММ КА	55343-9664 Dir Acct Mgmt	Amount of Each Receipt this Period										
Name of Employer (for Individual)		pation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00											
Full Name of Individual (Last, First, Middle B. LUBY, DAVID S, , ,	Initial) or Full Or	ganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2145729023217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	Ска	/P Sales and Account	99.97										
Name of Employer (for Individual)		ipation (for Individual) edHealth Group, Inc.	Memo Item 15										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.63											
Full Name of Individual (Last, First, Middle MICKLE, WILLIAM Y, , ,	Initial) or Full Or	ganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2145729123217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C VP	General Management	130.00										
Name of Employer (for Individual)		pation (for Individual) dHealth Group, Inc.	15										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 343.84	1										
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			489.97										

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	EWIZED RECEIFIS			Summary Page		(11a		111	b	11c		12				
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	y information copied from such Reports and Sta for commercial purposes, other than using the r															
\backslash	NAME OF COMMITTEE (In Full)															
$\Big\rangle$	UnitedHealth Group Incorporated	d PAC (l	United fo	or Health)												
Α.	Full Name of Individual (Last, First, Middle Initia MILLER, WAYNE, , ,	al) or Full O	rganization	Name		Date of	f Re	eceip	pt							
	Mailing Address 9900 Bren Road East					12 ^M	1	D	31	/ Y) 009	Y			
	City Minnetonka	State MN	Zip Co	de 3-9664		Transaction ID : PR2145729223217										
			5554	5-9004	_	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C VP	Client Svc /	Acct Mgt	260.00											
	Name of Employer (for Individual)		upation (for edHealth G	,		5 M	emo	b Ite	em							
	Receipt For:	Aggregate	Year-to-Dat	e V		0										
	Primary General Other (specify) ▼			645.00]											
в.	Full Name of Individual (Last, First, Middle Initia RUMMEL, LEAH C, , ,	al) or Full O	rganization	Name		Date of	f Re	eceip	pt							
	Mailing Address 9900 Bren Road East					12 / D D / Y Y Y Y 12 31 2009										
	City	State	Zip Co	de		Trans	acti	ion	ID : P	R21457	7295	23217	,			
	Minnetonka	MN	5534	3-9664	_	Amount	t of	Ead	ch Re	ceipt th	is P	eriod				
	FEC ID number of contributing federal political committee.	C Dir				-		-95-	_	195.0	0					
	Name of Employer (for Individual)	Occi Unit		Memo Item 15												
	Receipt For:	Aggregate	Year-to-Dat													
	Primary General Other (specify) ▼															
с.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization	Name		Date of Receipt										
	Mailing Address 9900 Bren Road East					12 ^M	1	D	31	/ Y		009	Y			
	City Minnetonka	State MN	Zip Co 5534	de 3-9664						PR2145			7			
		` `	0004			Amount	t of	Ead	ch Re	ceipt th	iis P	eriod				
	FEC ID number of contributing federal political committee.	C Dir	IT			Ľ.	_	y		9	_	455.0	0			
	Name of Employer (for Individual)	Occu Unite		М 15	emc	o Ite	em									
	Receipt For:	Aggregate	Year-to-Dat	e 🔻												
	Other (specify)]													
s	UBTOTAL of Receipts This Page (optional)				•			7				910.0	0			
т	OTAL This Period (last page this line number or	nly)			→			-		-						

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	EMIZED RECEIPTS		Detailed Summary Page		11a]11b		11c		12				
•					13		14		15		16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the														
\backslash	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporate	d PAC (I	United for Health)												
A.	Full Name of Individual (Last, First, Middle Initia SMITH, DANNETTE L, , ,	al) or Full O	organization Name		Date o	f Re	eceipt	t							
	Mailing Address 9900 Bren Road East				^M 12	/		31	/ Y	ү 20	09	Ŷ			
	City Minnetonka	State MN	Zip Code 55343-9664						R21457			7			
			55545-5004	/	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Sr I	Deputy General Couns		1499.94										
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	1	Memo Item										
	Receipt For:	Aggregate	Year-to-Date V	'	0										
	Primary General Other (specify) ▼		3115.26												
В.	Full Name of Individual (Last, First, Middle Initia SMITH, RANDALL, , ,	al) or Full O	Organization Name		Date o	f Re	eceipt	t							
	Mailing Address 9900 Bren Road East				12 / D D / Y Y Y Y Y 12 31 2009										
	City	State	Zip Code		Trans	acti	ion II) : Pl	R21457	73002	23217	,			
	Minnetonka	MN	55343-9664						ceipt th						
	FEC ID number of contributing federal political committee.	n President		150.02											
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 311.58												
С.	Full Name of Individual (Last, First, Middle Initiative WEAR, MARGARET W, , ,	al) or Full O	Organization Name		Date of Receipt										
	Mailing Address 9900 Bren Road East				^M 12	/		^р 31	/ Y	200	09	Y			
	City Minnetonka	State MN	Zip Code 55343-9664				-		R2145		-	7			
		1			Amoun	t of	Each	n Red	ceipt th	is Pe	əriod				
	FEC ID number of contributing federal political committee.	C VP	Actuarial Services				9				650.0	0			
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	1	5 N	lemo	o Iten	n							
	Receipt For:	Aggregate	Year-to-Date V		-										
	Primary General Other (specify)		1350.00												
s	UBTOTAL of Receipts This Page (optional)									2:	299.9	6			
т	OTAL This Period (last page this line number o	nly)					-		,						

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than			berson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incc	orporated PAC (I	Jnited for Health)										
Full Name of Individual (Last, First, A. DAVIDSON, ARLENE, , , Mailing Address 9900 Bren Road Ea		rganization Name	Date of Receipt									
City	State	Zip Code	12 31 2009 Transaction ID : PR2162867023217									
Minnetonka FEC ID number of contributing	MN C Dir	55343-9664 Marketing Bus Dev	Amount of Each Receipt this Period 249.99									
federal political committee.	Occ	upation (for Individual)	Memo Item									
Receipt For: Primary General Other (specify) ▼	Primary General Agglegate real-to-bate v											
Full Name of Individual (Last, First, SPIVACK, DAVID A, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 9900 Bren Road East											
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2162867623217 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C Bus	iness Segment CFO	2499.90									
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3269.10]									
Full Name of Individual (Last, First, LEWIS, KURT C, , , Mailing Address 9900 Bren Road Ea		rganization Name	Date of Receipt									
City	State	Zip Code	12 31 2009 Transaction ID : PR2203967523217									
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	Ска	VP Sales and Account	150.02									
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 311.58]									
SUBTOTAL of Receipts This Page (or	btional)		2899.91									
TOTAL This Period (last page this line	e 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 be to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpo	rated PAC (I	Jnited for Health)										
Full Name of Individual (Last, First, Middl A. GIBSON, CHRISTINE W, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009									
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2225166723217 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	СМа	rket Grp Chief Mktg Of	1499.94									
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3115.26										
Full Name of Individual (Last, First, Middl B. SLAVITT, ANDREW M, , , Mailing Address 9900 Bren Road East	e Initial) or Full O	rganization Name	Date of Receipt									
City	State	Zip Code	12 31 2009 Transaction ID : PR2225167423217									
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C Bus	iness Segment CEO	3601.00									
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4986.00										
Full Name of Individual (Last, First, Middl C. BEAULE, JEAN-FRANCOIS, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009									
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2225813623217 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C VP	Actuarial Services	750.10									
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1557.90										
SUBTOTAL of Receipts This Page (optiona	l)		5851.04									
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	X 11a 11b 11c 12										
			13 14 15 16 17 person for the purpose of soliciting contributions to collicit contributions										
NAME OF COMMITTEE (In Full)	ig the name and a		ee to solicit contributions from such committee.										
UnitedHealth Group Incorpo	orated PAC (I	Inited for Health)											
	,	,											
Full Name of Individual (Last, First, Mide A. HARRIS, DANIEL M, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 / 31 / 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2225817523217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Dir	Actuarial Services	249.99										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 519.21]										
Full Name of Individual (Last, First, Midd MACK, NANCY S, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East	State	Zip Code	12 31 2009										
Minnetonka	MN	55343-9664	Transaction ID : PR2225818423217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Dir	IT Project Mgmt	195.00										
Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item										
Receipt For:	Aggregate	Year-to-Date 🔻	10										
Other (specify)		394.50]										
Full Name of Individual (Last, First, Mide MARTEL, CHARLES W, , ,	lle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9900 Bren Road East			12 31 Y Y Y Y Y 12 31 2009										
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2225818623217 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C Dir	IT	130.00										
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item 15										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00]										
SUBTOTAL of Receipts This Page (option	al)		574.99										
TOTAL This Period (last page this line nur	mber only)												

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TEMIZED RECEIPTS		ich category of the ed Summary Page	X 11a 11b 11c 12								
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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)											
/ UnitedHealth Group Incor	porated PAC (United	for Health)									
Full Name of Individual (Last, First, M MCGUIRE, MICHAEL, , ,		on Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 31 2009								
City		Code	Transaction ID : PR2225818823217								
Minnetonka	10110 55	343-9664	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C Health Plan	CEO	260.00								
Name of Employer (for Individual)	Occupation (UnitedHealth	,	Memo Item								
Receipt For:	Aggregate Year-to-E	Date 🔻									
Primary General Other (specify) ▼		917.00]								
Full Name of Individual (Last, First, M B. RANGEN, ERIC S, , ,	iddle Initial) or Full Organizatio	on Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 31 2009								
City		Code	Transaction ID : PR2225819323217								
Minnetonka	MN 555	343-9664	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C SVP Chief A	ccounting Off	2307.60								
Name of Employer (for Individual)	Occupation (UnitedHealth	for Individual) I Group, Inc.	Memo Item								
Receipt For:	Aggregate Year-to-E	Date 🔻									
Primary General Other (specify) ▼		4999.80]								
Full Name of Individual (Last, First, M C. RYAN, JOHN D, , ,	iddle Initial) or Full Organizatio	on Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009								
City		Code	Transaction ID : PR2225819623217								
Minnetonka	MN 553	343-9664	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C RVP Client	Mgmt & Svc	499.98								
Name of Employer (for Individual)	Occupation (1	for Individual)	Memo Item								
	UnitedHealth	,	15								
Receipt For:	Aggregate Year-to-E	Date 🔻									
Other (specify)		1038.42]								
		7									
SUBTOTAL of Receipts This Page (opti	onal)		3067.58								
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										
			13 14 15 16 17 berson for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	<u>.</u>	·····										
UnitedHealth Group Incorpo	orated PAC (I	Jnited for Health)										
Full Name of Individual (Last, First, Midd ASAILOR, ROY T, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9900 Bren Road East			12 31 Y Y Y Y Y 2009									
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2225819723217 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C Dir	General Management	999.96									
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2076.84]									
Full Name of Individual (Last, First, Midd DIPALMO, KAREN A, , ,	Date of Receipt											
Mailing Address 9900 Bren Road East			12 31 2009									
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2231347223217 Amount of Each Receipt this Period									
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Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item									
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Full Name of Individual (Last, First, Midd C. DROZDA, JEFFERY A, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9900 Bren Road East			12 31 Y Y Y Y 2009									
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2231347423217 Amount of Each Receipt this Period									
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в.	Full Name of Individual (Last, First, Middle Initia HAMPTON, MICHAEL, , ,	l) or Full O	rganiza	tion Name		Date of	Re	ceipt												
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			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
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City	State	Zip Code	Transaction ID : PR2231351923217								
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С.	Full Name of Individual (Last, First, Middle Initia SNIVELY, AMANDA JANE, , ,	al) or Full O	rganization Name		D	ate of	Re	ecei	pt							
	Mailing Address 9900 Bren Road East	1			L	^M 12	/	L	31	1	Y	ý ý 2009				
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NAME OF COMMITTEE (In Full)											
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City Minnetonka	State MN	Zip Code 55343-9664									
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Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15								
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City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2247625923217 Amount of Each Receipt this Period								
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Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.63									
Full Name of Individual (Last, First, Middle C. GREENE, ANDREA M, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9900 Bren Road East			12 31 2009								
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2247626023217 Amount of Each Receipt this Period								
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۹.	Full Name of Individual (Last, First, Middle In PRINCE, JOHN M, , ,	itial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
	City	State	Zip Code	Transaction ID : PR2259738423217										
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
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	Primary General Other (specify) ▼		1080.00]										
	Full Name of Individual (Last, First, Middle In SIGGETT, DAWN M, , ,	itial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 9900 Bren Road East			12 31 2009										
	City	State	Zip Code	Transaction ID : PR2270335123217										
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	FEC ID number of contributing federal political committee.	C Gov	<i>v</i> t Rel Dir	260.00										
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	Memo Item										
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	Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009										
	City	State	Zip Code	Transaction ID : PR2270522923217										
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Go	vt Rel Dir	499.98										
	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item										
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Unit	ted for Health)									
A. 1 0 1 1 1	Primary General	ENS, SIMON L, , , address 9900 Bren Road East hka State MN bumber of contributing olitical committee. Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc. For: Aggregate Year-to-Date ▼											
B	Full Name of Individual (Last, First, Middle Initial THOMPSON, THELMA L, , , Mailing Address 9900 Bren Road East) or Full O		ization Name		Date of	f Re	ceipt		/ Y	ý 2009	Y	
- I f	City Minnetonka FEC ID number of contributing rederal political committee. Name of Employer (for Individual)	Occi	vt Rel	Zip Code 55343-9664 I Assoc Dir on (for Individual) ealth Group, Inc.		Transaction ID : PR2364863323217 Amount of Each Receipt this Period							
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate		• •		5							
C .	Full Name of Individual (Last, First, Middle Initial ALTER, JEFFREY D, , , Mailing Address 9900 Bren Road East) or Full O		Zip Code		Date of 12 Trans	/	D 3	1		2009 31 52232 1		
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Full Name of Individual (Last, First, Middle DANIEL, JANI H, , , Mailing Address 9900 Bren Road East			Date of Receipt 12 / 31 / 2009 Transaction ID : PR2402315823217										
City Minnetonka	State MN	Zip Code 55343-9664	Amount of Each Receipt this Period										
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Full Name of Individual (Last, First, Middle GROENE, CYNTHIA J, , , Mailing Address 9900 Bren Road East	e Initial) or Full C	rganization Name	Date of Receipt										
City	State	Zip Code	12 31 2009 Transaction ID : PR2402316723217										
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (United for Health)	
Name of Employer (for Individual)	or Full Organization Name State Zip Code MN 55343-9664 C Assoc Dir Case Mgmt Occupation (for Individual) UnitedHealth Group, Inc. vggregate Year-to-Date ▼	Date of Receipt 12 ' 31 ' 2009 Transaction ID : PR2402317723217 Amount of Each Receipt this Period 260.00 Memo Item 15
Other (specify) ▼	400.00	
Name of Employer (for Individual)	or Full Organization Name State Zip Code MN 55343-9664 C Dir Network Programs Occupation (for Individual) UnitedHealth Group, Inc. Aggregate Year-to-Date ▼	Date of Receipt
C. Full Name of Individual (Last, First, Middle Initial) Mailing Address 9900 Bren Road East		Date of Receipt
Name of Employer (for Individual)	State MN Zip Code 55343-9664 C Govt Rel Dir Occupation (for Individual) UnitedHealth Group, Inc. vggregate Year-to-Date ▼	Transaction ID : PR2402318223217 Amount of Each Receipt this Period 325.00 Memo Item 15
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	y information copied from such Reports and St for commercial purposes, other than using the										
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Α.	Full Name of Individual (Last, First, Middle Initi MCCAULEY, MARIA, , ,	ial) or Full C	organization Name		Date of	Re	ceipt				
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Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
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С.	Full Name of Individual (Last, First, Middle Init RIOS, KARA J, , ,	ial) or Full C	Drgar	nization Name		Date o	of Re	ecei	ipt				
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00									
В.	Full Name of Individual (Last, First, Middle Initia JINDAL, SOHINI G, , ,	l) or Full O	rganization Name		Date of	Re	eceip	pt				
	Mailing Address 9900 Bren Road East				^M 12	1	D	31	/ Y)09	Ŷ
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	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	1	5 M	emc	o Ite	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00									
с.	Full Name of Individual (Last, First, Middle Initia PETRELLA, RUSSELL C, , ,	l) or Full O	rganization Name		Date of	Re	eceip	pt				
	Mailing Address 9900 Bren Road East				^M 12	1	D	31	/ Y		009	Y
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.		М 15	emo	o Ite	em				
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	y information copied from such Reports and Stat for commercial purposes, other than using the n											
\backslash	NAME OF COMMITTEE (In Full)											
$\Big)$	UnitedHealth Group Incorporated	I PAC (l	United for Health)									
A.	Full Name of Individual (Last, First, Middle Initial THORNHILL, JOELLE OISHI, , ,	l) or Full O	rganization Name		Date of	f Re	eceip	ot				
	Mailing Address 9900 Bren Road East				12 ^M	1	D	31	/ Y		009	Y
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	Mailing Address 9900 Bren Road East				12 ^M	1	D	^р 31	/ Y)09	Ŷ
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	FEC ID number of contributing federal political committee.	C VP	Gov't Relations				-		-9-	:	2499.9	0
	Name of Employer (for Individual)		upation (for Individual) tedHealth Group, Inc.	1	5 M	emc	o Itei	m				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3076.80									
C.	Full Name of Individual (Last, First, Middle Initial STEVENS, JOSEPH R, , ,	l) or Full O	rganization Name		Date of	f Re	eceip	ot				
	Mailing Address 9900 Bren Road East				^M 12	/	D	31	/ Y		009	Y
	City Minnetonka	State MN	Zip Code 55343-9664		Trans Amount				R2405			7
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.		Ш М 15	emo	o Ite	m				
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
I LIVILLU RECEITIO		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)			
UnitedHealth Group Incorpor	rated PAC (Jnited for Health)	
Full Name of Individual (Last, First, Middle A. ARMSTEAD, RODNEY CHARLES, ,		rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y 12 31 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2405430223217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C VP	Operations	520.00
Name of Employer (for Individual)		upation (for Individual) eriChoice	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name of Individual (Last, First, Middle BRACH, KAREN E, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 D D / Y Y Y Y 12 31 2009
City _Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2408544523217 Amount of Each Receipt this Period
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Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250,00	
Full Name of Individual (Last, First, Middle	e Initial) or Full O		1
C. ELLISON, NANCY M, , , Mailing Address 9900 Bren Road East			Date of Receipt
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2408544623217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	СМа	nager	500.00
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional)		1270.00
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				Detailed Summary Page		13		14		15		16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
\backslash	NAME OF COMMITTEE (In Full)												
\sum	UnitedHealth Group Incorporated	d PAC (Uni	ted for Health)									
Α.	Full Name of Individual (Last, First, Middle Initia SAELENS, KAREN ANN, , ,	al) or Full C	Drgan	nization Name		Date of	Re	eceip	ot				
	Mailing Address 9900 Bren Road East					12 ^M	/	D	31 ^D	/ Y		009	Y
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	Primary General Other (specify) ▼		-	240.00									
в.	Full Name of Individual (Last, First, Middle Initia WALSH, CHRISTOPHER J, , ,	al) or Full C	Drgan	nization Name		Date of	Re	eceip	t				
	Mailing Address 9900 Bren Road East					12 ^M	/	D	31	/ Y		009	Y
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С.	Full Name of Individual (Last, First, Middle Initia WEE, KATHLYN G, , ,	al) or Full C	Drgan	nization Name		Date of	Re	ceip	ot				
	Mailing Address 9900 Bren Road East					^M 12	/	D	31 ^D	/ Y		009	Ŷ
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SCHEDULE A (FEC Form 3X) _____ _ _ _ _ _

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)
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NAME OF COMMITTEE (In Full)			
VinitedHealth Group Incorpora	ted PAC (l	Jnited for Health)	
Full Name of Individual (Last, First, Middle I A. KOZIARA BOUDREAUX, GAIL, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 31 Y Y Y Y Y 12 31 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2437119523217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C Mar	nager	4999.90
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90]
Full Name of Individual (Last, First, Middle I HAGAN, WILLIAM A, , , Mailing Address 9900 Bren Road East	nitial) or Full O	rganization Name	Date of Receipt
City	State	Zip Code	12 31 2009
Minnetonka	MN	55343-9664	Transaction ID : PR2437120023217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C Mar	nager	4999.90
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90]
Full Name of Individual (Last, First, Middle I C. YALE, KENNETH, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 9900 Bren Road East			12 / D D / Y Y Y Y 12 31 2009
City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID : PR2437120623217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	СМа	nager	280.00
Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.	15 Memo Item
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	ny information copied from such Reports and Sta for commercial purposes, other than using the n												
$\overline{)}$	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	I PAC (I	Jnited for Health	n)									
Α.	Full Name of Individual (Last, First, Middle Initia BALTHAZOR, PAUL JOSEPH, , ,	l) or Full O	rganization Name			Date of	Re	ceipt					
	Mailing Address 9900 Bren Road East					^M 12	/	D 3		/ Y)09	Y
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В.	Full Name of Individual (Last, First, Middle Initia ZAMOFF, MITCHELL, , ,	l) or Full O	rganization Name			Date of	Re	ceipt					
	Mailing Address 9900 Bren Road East					м м 12	/	3		/ Y	ү 20	09	Y
	City	State	Zip Code			Trans	acti	on ID	: P	R24371	1211	23217	,
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.				emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250	0.00									
— С.	Full Name of Individual (Last, First, Middle Initia PRESTON, ROBERT S, , ,	l) or Full O	rganization Name			Date of	Re	ceipt					
	Mailing Address 9900 Bren Road East					^M 12	/	D 3		/ Y		09 [°]	Y
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	Name of Employer (for Individual)		upation (for Individual) edHealth Group, Inc.				emo	Item					
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NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incor	porated PAC (United for Health)									
Full Name of Individual (Last, First, M COSGRIFF, JOHN W, , ,	,	organization Name		Date o	f Re	eceipt					
Mailing Address 9900 Bren Road Eas	t			12 ^M	/	D 31		Y	Y 200	09	Y
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Full Name of Individual (Last, First, M B. BLANK, JOHN P, , ,	liddle Initial) or Full O	organization Name		Date o	f Re	eceipt					
Mailing Address 9900 Bren Road East	:			^M 12	/	31		Y	200	09 [°]	Y
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Full Name of Individual (Last, First, M C. RAINEY, PETER W, , ,	liddle Initial) or Full O	Organization Name		Date o	f Re	eceipt					
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PAGE 121 OF

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	UnitedHealth Group Incorporated	PAC (L	Inited for Healt	h)									
A.	Full Name of Individual (Last, First, Middle Initial) United for Health PAC of Illinois	Date of Receipt											
	Mailing Address 9900 Bren Road East					11	_	05		2009	Y		
	City Minnetonka	State MN	Zip Code 55343-9664						: 3106022	20			
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	Primary General Other (specify) ▼		1	90.06									
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	City	State	Zip Code			Amount of Each Receipt this Period							
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PAGE 122 OF

ITEMIZED RECEIPTS	for each actors of the	(check only one)				
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NAME OF COMMITTEE (In Full)						
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Full Name of Individual (Last, First, Middle Initial) or Full O A. Friends of Roger Kahn for Senate	rganization Name	Date of Receipt				
Mailing Address 9900 Bren Road East		10 19 2009				
City State	Zip Code	Transaction ID : 31060219				
Minnetonka MN	55343-9664	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		600.00				
Name of Employer (for Individual)	upation (for Individual)	Memo Item				
Receipt For: 2010	· · · · · ·	17U				
Aggregate	Year-to-Date ▼					
Other (specify) ▼	600.00]				
Full Name of Individual (Last, First, Middle Initial) or Full O B. Salazar For Senate	rganization Name	Date of Receipt				
Mailing Address 9900 Bren Road East		10 22 2009				
City State	Zip Code	Transaction ID : 31060223				
Minnetonka MN	55343-9664	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	azar For Senate	3000.00				
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Primary General Other (specify) V	3000.00	1				
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SCHEDULE B (FEC Form 3X)	Lise sons	rate schedule(s)	FOR LINE	-		
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NAME OF COMMITTEE (In Full)						
/ UnitedHealth Group Incorporated	PAC (Un	ited for Heal	th)			
Full Name (Last, First, Middle Initial) A. Friends of Blanche Lincoln				Date of Disbursement		
Mailing Address P.O. Box 77572				07 08 / Y Y Y Y 2009		
City Washington	State DC	Zip Code 20013		FEC Identification Number		
Purpose of Disbursement		20013		C 011		
			Re-elec			
Candidate Name			Category/	Transaction ID : 30182475 Amount of Each Disbursement this Period		
, Lincoln, Blanche Lambert, ,			Туре			
Office Sought: House Disburse Senate President	ment For: 2 Primary Other (spec	General		1000.00		
State: S District: AR	Other (Spee	yny) ▼		Memo Item		
Full Name (Last, First, Middle Initial)						
^{B.} Mike Crapo For Us Senate				Date of Disbursement		
Mailing Address P.O. Box 1948				07 08 2009		
City Boise	State ID	Zip Code 83701		FEC Identification Number		
Purpose of Disbursement			Re-elec	C 011		
Candidate Name	Category/			Transaction ID : 30182476 Amount of Each Disbursement this Period		
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	ment For: 2			3500.00		
	Primary	General				
State: S District: ID	Other (spec	лу)		Memo Item		
Full Name (Last, First, Middle Initial) C. Alamo PAC				Date of Disbursement		
				M M / D D / Y Y Y Y		
Mailing Address 919 Congress Ave Suite 1400				07 08 2009		
City	State	Zip Code		FEC Identification Number		
Austin Purpose of Disbursement	ТХ	78701		0 011		
			Political	C 011		
Candidate Name			Category/	Transaction ID : 30182478 Amount of Each Disbursement this Period		
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State: District:	Other (spec	(iiy) 🔻		Memo Item		
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 124 OF 174			
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		Summary Page	21b	22 X 23 26 27 28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
/ UnitedHealth Group Incorporated	PAC (U	nited for Hea	lth)				
Full Name (Last, First, Middle Initial)				Dete of Dishuranment			
A. New Democrat Coalition Political A	ction Corr	nmittee		Date of Disbursement			
Mailing Address 607 14th Street NW Suite 800				07 08 2009			
City	State	Zip Code		FEC Identification Number			
Washington	DC	20005					
Purpose of Disbursement			Political	C 011			
Candidate Name				Transaction ID : 30182985			
C00409730			Category/ Type	Amount of Each Disbursement this Period			
	sement For:		.,100	5000.00			
Senate	Primary	General					
President	Other (spe	ecify) ▼		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)				Data of Distances			
^{B.} Friends Of John Barrow				Date of Disbursement			
Mailing Address PO Box 8166	ailing Address PO Box 8166						
City	State	Zip Code		FEC Identification Number			
Savannah	GA	31412					
Purpose of Disbursement				C 011			
Candidate Name				Transaction ID : 30264435			
H4GA12010, Barrow, John, , Rep.			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburs	sement For:	2010	71	2500.00			
Senate	Primary	General					
President	Other (spe	ecify)		Memo Item			
State: H District: GA				<u> </u>			
Full Name (Last, First, Middle Initial)				Data of Diaburgament			
C. Charles Boustany Jr. Md For Cor	ngress, Ir	IC.		Date of Disbursement			
Mailing Address PO Box 80126				07 / D D / Y Y Y Y 22 2009			
City	State	Zip Code					
Lafayette	LA	70598		FEC Identification Number			
Purpose of Disbursement	-1			C 011			
			Re-elct	Transaction ID : 30302976			
Candidate Name			Category/	Amount of Each Disbursement this Period			
H4LA07029, Boustany, Charles, W., Rep. Office Sought: House Disburs	sement For:	2010	Туре	1000.00			
Senate	Primary	2010 General					
President	Other (spe						
State: H District: LA		<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Memo Item			
SUBTOTAL of Disbursements This Page (optional)		••••••	8500.00			
TOTAL This Period (last page this line number on	lly)		▶	, ,			

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 125 OF 174			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	/ one)			
		Summary Page	21b	22 X 23 26 27			
			28a	28b 28c 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 (Ur	nited for Hea	lth)				
Full Name (Last, First, Middle Initial)							
A. Senate Majority Fund				Date of Disbursement			
Mailing Address P.O. Box 32025				07 22 2009			
City	State	Zip Code		FEC Identification Number			
Phoenix	AZ	85064					
Purpose of Disbursement			Loodor	C 011			
Candidate Name			Leaders	Transaction ID : 30302980			
Conservation Conse			Category/ Type	Amount of Each Disbursement this Period			
	ement For:		iyhe	1000.00			
Senate	Primary	General					
President	Other (spe	cify) 🔻		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)							
^{B.} Hoyer For Congress				Date of Disbursement			
Mailing Address 607 14th Street, Nw Suite 800	Suite 800						
City Washington	State DC	Zip Code 20005		FEC Identification Number			
Purpose of Disbursement				C 011			
			Re-elec	Transaction ID : 30302984			
Candidate Name			Category/	Amount of Each Disbursement this Period			
H2MD05155, Hoyer, Steny, H., Rep.			Туре	0500.00			
	-	2010		2500.00			
Senate President	Primary Other (spe	General					
State: H District: MD	Strier (spe	city)		Memo Item			
Full Name (Last, First, Middle Initial)							
C				Date of Disbursement			
Hoyer For Congress				M M / D D / Y Y Y Y			
Mailing Address 607 14th Street, Nw Suite 800				07 22 2009			
City	State	Zip Code		FEC Identification Number			
Washington	DC	20005					
Purpose of Disbursement			De alas	C 011			
Candidate Name			Re-elec	Transaction ID: 30302990			
H2MD05155, Hoyer, Steny, H., Rep.			Category/ Type	Amount of Each Disbursement this Period			
	ement For:	2010	ishe	1000.00			
Senate	Primary	General					
President	Other (spe	cify)		Memo Item			
State: H District: MD							
SUBTOTAL of Disbursements This Page (optional)			····· ►	4500.00			
TOTAL This Period (last page this line number only	y)		••••••				

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 126 OF 174			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	one)			
		Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporated	I PAC (U	nited for Hea	lth)				
Full Name (Last, First, Middle Initial)							
A. Griffith For Congress				Date of Disbursement			
Mailing Address Post Office Box 2916				07 / D D / Y Y Y Y 22 2009			
City	State	Zip Code		FEC Identification Number			
Huntsville Purpose of Disbursement	AL	35804					
Fulpose of Disbursement			Re-elec	C 011			
Candidate Name			Category	Transaction ID : 30303008 Amount of Each Disbursement this Period			
H8AL05109, Griffith, Parker, , Rep.			Category/ Type				
Office Sought: House Disburs	sement For:	2010		1000.00			
Senate	Primary	General					
State: H District: AL	Other (spe	ecify) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
^{B.} Earl Pomeroy for Congress				Date of Disbursement			
Mailing Address P.O. Box 75214				07 22 2009			
City	State DC	Zip Code		FEC Identification Number			
Washington Purpose of Disbursement	DC	20013-5214		C 011			
·	Re-ele						
Candidate Name			Category/	Transaction ID : 30303031 Amount of Each Disbursement this Period			
, Pomeroy, Earl, ,			Туре				
		2010		1000.00			
Senate	Primary	General					
State: H District: ND	Other (spe	city)		Memo Item			
Full Name (Last, First, Middle Initial)							
C. Feinstein For Senate				Date of Disbursement			
Mailing Address 1212 S Victory Blvd				07 / D D / Y Y Y Y 22 2009			
City	State	Zip Code		FFO Identification Number			
Burbank	CA	91502		FEC Identification Number			
Purpose of Disbursement	·			C 011			
Candidate Name			Re-elec	Transaction ID : 30303057			
S0CA00199, Feinstein, Dianne, , Sen.			Category/ Type	Amount of Each Disbursement this Period			
	sement For:	2012	туре	1000.00			
Senate	Primary	General					
President	Other (spe	ecify) 🔻		Memo Item			
State: S District: CA							
				2000.00			
SUBTOTAL of Disbursements This Page (optional)		••••••	3000.00			
TOTAL This Period (last page this line number or	lly)		⊾				
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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 127 OF 174		
ITEMIZED DISBURSEMENTS			arate schedule(s) category of the	(check only	/ one)		
			Summary Page	21b 	22 X 23 26 27 28b 28c 29 30b		
	ny information copied from such Reports and State			ed by any perso	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	me and addr	ess of any politic	al committee to	solicit contributions from such committee.		
	¹ UnitedHealth Group Incorporated	PAC (Un	nited for Hea	lth)			
	· ·						
Α.	Full Name (Last, First, Middle Initial)				Date of Disbursement		
	Narragansett Bay PAC				M M / D D / Y Y Y Y		
	Mailing Address PO Box 8628				07 22 2009		
	City	State	Zip Code		FEC Identification Number		
	Cranston Purpose of Disbursement	RI	02920		0		
				Leaders			
	Candidate Name			Category/	Transaction ID : 30303162 Amount of Each Disbursement this Period		
	C00403592	_		Туре	1000.00		
	Office Sought: House Disburse Senate	ment For: Primary	General		1000.00		
	President	Other (spec			Mama Itam		
	State: District:				Memo Item		
_	Full Name (Last, First, Middle Initial)						
В.	Hatch Election Committee		Date of Disbursement				
	Mailing Address 555 13th Street NW Suite 600 East			07 / 28 / Y Y Y Y 2009			
	City	State	Zip Code		FEC Identification Number		
	Washington Purpose of Disbursement	DC	20004-1109		C 011		
				Re-elec	Transaction ID : 30329612 Amount of Each Disbursement this Period		
	Candidate Name			Category/			
	, Hatch, Orrin G., , Office Sought: House Disburse	ment For: 2	2012	Туре			
	Senate	Primary	General				
	President	Other (spec	cify)		Memo Item		
_	State: S District: UT						
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement		
	The Grassley Committee, Inc.						
	Mailing Address P.O. Box 6193				07 28 2009		
	City	State	Zip Code		FEC Identification Number		
	Alexandria Purpose of Disbursement	VA	22306-0193		C 011		
				Re-elec	Transaction ID : 30329613		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	, Grassley, Charles E., , Office Sought: House Disburse	ment For: 2		Туре	2500.00		
	Senate	Primary	General				
	President	Other (spec	cify) 🔻		Memo Item		
_	State: S District: IA	-					
	SUBTOTAL of Disbursements This Page (optional).				5000.00		
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ו	TOTAL This Period (last page this line number only	/)		••••••	, ,		

SCHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LINE I			
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check 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 na	ements may ame and add	not be sold or use ress of any politica	d by any perso al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)						
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	lth)			
Full Name (Last, First, Middle Initial) A. Friends Of Byron Dorgan				Date of Disbursement		
Mailing Address PO Box 871				07 / D D / Y Y Y Y 28 2009		
City	State	Zip Code		FEC Identification Number		
Bismarck	ND	58502				
Purpose of Disbursement			Re-Elec	C 011 Transaction ID : 30329614		
Candidate Name			Category/	Amount of Each Disbursement this Period		
S2ND00040, Dorgan, Byron, L., Sen.			Туре	0500.00		
Office Sought: House Disburse Senate President	ement For: 2 Primary Other (spe	General		2500.00		
State: S District: ND				Memo Item		
Full Name (Last, First, Middle Initial) B. Pat Roberts Victory Committee				Date of Disbursement		
Mailing Address 610 S. Boulevard St	•					
City Tampa	State FL	Zip Code 33606		FEC Identification Number		
Purpose of Disbursement	1		Joint Fu	C 011 Transaction ID : 30329615		
Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse	ement For: Primary	General		3000.00		
State: District:	Other (spe			Memo Item		
Full Name (Last, First, Middle Initial)				—		
C. Klobuchar For Minnesota 2012				Date of Disbursement		
Mailing Address PO Box 4146				07 / D D / Y Y Y Y 29 2009		
City St Paul	State MN	Zip Code 55104		FEC Identification Number		
Purpose of Disbursement		33104	Re-elec	C 011		
Candidate Name S6MN00267, Klobuchar, Amy, , Sen.	ime C			Transaction ID : 30329624 Amount of Each Disbursement this Period		
	ement For:	2012	Туре	1000.00		
Senate President	Primary Other (spe	General				
State: S District: MN						
SUBTOTAL of Disbursements This Page (optional)			••••••	6500.00		
TOTAL This Period (last page this line number onl	y)		····· ►			

SCHEDULE B (FEC Form 3X)	Use sen:	arate schedule(s)	FOR LINE	-		
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$		
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	nited for Hea	lth)			
Full Name (Last, First, Middle Initial) A. Richard Burr Committee				Date of Disbursement		
Mailing Address P.O. Box 5928	Mailing Address P.O. Box 5928					
City Winston-Salem	State NC	Zip Code 27113		FEC Identification Number		
Purpose of Disbursement			Re-elec	C 011 Transaction ID : 30329625		
Candidate Name			Category/	Amount of Each Disbursement this Period		
, Burr, Richard M., , Office Sought: House Disburse Senate	ement For: 2		Туре	1000.00		
State: H District: NC	Primary Other (spe	General cify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)						
^{B.} JAZZ PAC				Date of Disbursement		
Mailing Address 10 G Street, NE Suite 470		07 29 2009				
City Washington						
Purpose of Disbursement	Leaders	C 011 Transaction ID : 30329627				
Candidate Name C00405290			Category/	Amount of Each Disbursement this Period		
	ment For:		Туре	1000.00		
Senate	Primary	General				
State: District:	Other (spe	спу)		Memo Item		
Full Name (Last, First, Middle Initial) C. Friends Of Roger Wicker				Date of Disbursement		
Mailing Address P.O. Box 874				07 29 2009		
City	State	Zip Code		FEC Identification Number		
Tupelo	MS	38802				
Candidate Name	Purpose of Disbursement Candidate Name					
H4MS01078, Wicker, Roger, F., Rep.	mont Free t	2014	Category/ Type	1000.00		
Senate	Office Sought: House Disbursement For: 2014 Senate V Primary General					
State: H District: MS	Other (spe	cify) ▼		Memo Item		
SUBTOTAL of Disbursements This Page (optional).				3000.00		
TOTAL This Period (last page this line number only						

SC	CHEDULE B (FEC Form 3X)			FO	RIN	E NUMBER: PAGE 130 OF 174	
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		-	ieck or	nly one)	
			Summary Page		21		
<u>۸</u>	y information copied from such Reports and State	monto movu	act he cold or up	ad by a			
	for commercial purposes, other than using the na						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)						
\bigvee	UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	llth)			
_	Full Name (Last, First, Middle Initial)						
Α.	Senate Majority Fund					Date of Disbursement	
	Mailing Address P.O. Box 32025	ddress P.O. Box 32025					
	City	State	Zip Code			FEC Identification Number	
	Phoenix	AZ	85064				
	Purpose of Disbursement			Lea	der	C 011	
	Candidate Name			Cate	aonul	Transaction ID : 30329630 Amount of Each Disbursement this Period	
	C00368431			Ty		Amount of Each Disbussement this renou	
	v	ment For:	L			1000.00	
	Senate	Primary	General				
	State: District:	Other (spec	city) 🔻			Memo Item	
	Full Name (Last, First, Middle Initial)						
Β.	Impact					Date of Disbursement	
	· · · · · · · · · · · · · · · · · · ·						
	Mailing Address 509 Madison Ave. Suite 1902	07 29 2009					
	v York State Zip Code NY 10022					FEC Identification Number	
	New York Purpose of Disbursement	C 011					
		Transaction ID : 30329631					
	Candidate Name	Cate	gory/	Amount of Each Disbursement this Period			
	C00348607			Туре			
		ment For:	Conorol			5000.00	
	Senate President	Primary Other (spec	General				
	State: District:		ony)			Memo Item	
_	Full Name (Last, First, Middle Initial)						
C.	Georgians for Isakson					Date of Disbursement	
	Mailing Address Post Office Box 71955	07 29 2009					
	City	State	Zip Code				
	Marierta	GA	30007			FEC Identification Number	
	Purpose of Disbursement	C 011					
	Candidate Name			Re-	elec	Transaction ID : 30329638	
	, Isakson, Johnny, ,	gory/	Amount of Each Disbursement this Period				
						1000.00	
	President	Other (spec	cify) 🔻			Memo Item	
_	State: S District: GA					-	
.	UBTOTAL of Disbursements This Page (optional).					7000.00	
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т	OTAL This Period (last page this line number only	/)			🕨	, ,	

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 131 OF 174			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	y one)			
		Summary Page	21b 28a	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 na			d by any perso	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporated	PAC (U	nited for Heal	lth)				
Full Name (Last, First, Middle Initial)							
A. Frank Kratovil For Congress				Date of Disbursement			
Mailing Address 222 Main Sail Drive PO Box 518				07 29 2009			
City Stevensville	State MD	Zip Code 21666		FEC Identification Number			
Purpose of Disbursement		21000		C 011			
			Re-elec	Transaction ID : 30329651			
Candidate Name			Category/	Amount of Each Disbursement this Period			
H8MD01086, Kratovil, Frank, M., Rep.	mont Far	2010	Туре	1000.00			
Office Sought: House Disburse	ement For: Primary	2010 General		1000.00			
President	Other (spe	ecify) 🔻		Memo Item			
State: H District: MD							
Full Name (Last, First, Middle Initial)				Date of Disbursement			
^{B.} All America PAC							
Mailing Address 607 14th Street NW Suite 800	07 29 2009						
City							
Washington Purpose of Disbursement							
	Leaders	C 011					
Candidate Name			Category/	Transaction ID : 30329652 Amount of Each Disbursement this Period			
C00344788			Туре				
U	ement For:			5000.00			
Senate President	Primary Other (spe	General					
State: District:		(Ciry)		Memo Item			
Full Name (Last, First, Middle Initial)							
C. Wyoming Values PAC				Date of Disbursement			
Mailing Address 406 Virginia Avenue				07 29 2009			
City	State	Zip Code		FEC Identification Number			
Alexandria	VA	22302					
Purpose of Disbursement			Leaders	C 011 Transaction ID : 30329657			
Candidate Name	Candidate Name						
C00442368			Category/ Type	Amount of Each Disbursement this Period			
Senate President	Primary Othor (cpc	General					
State: District:	Other (spe	cony) ▼		Memo Item			
SUBTOTAL of Disbursements This Page (optional)			••••••	7000.00			
TOTAL This Period (last page this line number only	/)		••••••	, ,			

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 132 OF 174			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	/ one)			
		Summary Page	21b	22 X 23 26 27			
	<u> </u>		28a	28b 28c 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 (Ur	nited for Hea	lth)				
Full Name (Last, First, Middle Initial)							
A. Glacier PAC				Date of Disbursement			
Mailing Address 818 Connecticut Ave. NW Suite 1100				07 15 2009			
City	State	Zip Code		FEC Identification Number			
Washington Purpose of Disbursement	DC	20006					
Tupose of Disbursement			Void - C	C 011			
Candidate Name			Category/	Transaction ID : 30335958 Amount of Each Disbursement this Period			
C00353953			Туре				
	ment For:			- 5000.00			
Senate President	Primary Other (spe	General					
State: District:	Other (spe	city) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
B. Georgians for Isakson				Date of Disbursement			
	с 						
Mailing Address Post Office Box 71955				08 06 2009			
City	State	Zip Code		FEC Identification Number			
Marierta Purpose of Disbursement	GA	30007		C 011			
	Re-e						
Candidate Name			Category/	Transaction ID : 30347118 Amount of Each Disbursement this Period			
, Isakson, Johnny, ,			Туре				
	ment For:			500.00			
Senate X	Primary Other (spe	General					
State: S District: GA		Shy)		Memo Item			
Full Name (Last, First, Middle Initial)							
C. Clarke For Congress				Date of Disbursement			
Mailing Address 111-36 200th. Street				08 25 2009			
City	State	Zip Code		FEC Identification Number			
Hollis Purpose of Disbursement	NY	11412		C 011			
			Re-elec				
Candidate Name	Catego			Transaction ID : 30453279 Amount of Each Disbursement this Period			
H4NY11138, Clarke, Yvette, D., Rep.			Туре	1000.00			
	ment For:			1000.00			
President	Primary Other (spe	cifv) ▼					
State: H District: NY	culor (spe	~,, ▼		Memo Item			
SUBTOTAL of Disbursements This Page (optional).			••••••	- 3500.00			
TOTAL This Period (last page this line number only	′)		•••••• •				

SCHEDULE B (FEC Form 3X)		arate schedule(s)		NUMBER: PAGE 133 OF 174					
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	y one) 22 X 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may ame and add	not be sold or use lress of any politica	d by any pers al committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)									
/ UnitedHealth Group Incorporated	PAC (UI	nited for Heal	th)						
Full Name (Last, First, Middle Initial) A. Gillibrand For Senate	Date of Disbursement								
Mailing Address 313 C Street Ne				M M / D D / Y Y Y Y 08 25 2009					
City	State	Zip Code		FEC Identification Number					
Washington	DC	20002		FEC Identification Number					
Purpose of Disbursement			Re-elec	C 011					
Candidate Name			Re-elec	Transaction ID : 30453379					
S0NY00410, Gillibrand, Kirsten, , Rep.			Category/ Type	Amount of Each Disbursement this Period					
	ement For:	2010	туре	3500.00					
Senate	Primary	General							
State: H District: NY	Other (spe	ecify) ▼		Memo Item					
Full Name (Last, First, Middle Initial)									
B. Leadeship in the New Century (L	INCPAC))		Date of Disbursement					
Mailing Address 124 West Capitol Avenue Suite 630		_							
City	State AR	Zip Code 72201							
Little Rock Purpose of Disbursement	AK	72201		C 011					
			Category/ Type	C 011 Transaction ID : 30453707 Amount of Each Disbursement this Period					
Candidate Name									
C00366179									
	ement For:			4500.00					
President	Other (spe	General							
State: District:		city)		Memo Item					
Full Name (Last, First, Middle Initial)									
C. Mike Ross for Congress				Date of Disbursement					
Mailing Address 227 Massachusette Ave N.E. Ste 101				09 01 2009					
City	State	Zip Code		FEC Identification Number					
Washington Purpose of Disbursement	DC	20002							
Fulpose of Disbuisement			Re-elec	C 011					
Candidate Name			Cotogony/	Transaction ID : 30470211 Amount of Each Disbursement this Period					
, Ross, Michael Avery, ,			Category/ Type	Amount of Each Disburschient this Feriod					
	ement For:	2010		1500.00					
Senate	Primary	General							
State: H District: AR	Other (spe	ecity) 🔻		Memo Item					
SUBTOTAL of Disbursements This Page (optional))			9500.00					
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TOTAL This Period (last page this line number on	ly)		····· ►	, ,					

SCHEDULE B (FEC Form 3X)	Lise ser	parate schedule(s)	FOR LINE							
ITEMIZED DISBURSEMENTS	for each	a category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b						
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may e name and add	not be sold or use dress of any politica	ed by any perso al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)										
/ UnitedHealth Group Incorporat	ted PAC (U	nited for Hea	lth)							
Full Name (Last, First, Middle Initial) A. Boyd For Congress	Date of Disbursement									
Mailing Address P.O. Box 15703				09 01 / Y Y Y Y 2009						
City Tallahassee	State FL	Zip Code 32317		FEC Identification Number						
Purpose of Disbursement	I		Re-elec	C 011						
Candidate Name				Transaction ID : 30470225 Amount of Each Disbursement this Period						
H6FL00046, Boyd, Allen, , Rep.			Category/ Type							
Office Sought: House Disl Senate President	bursement For: Primary Other (and	General		2500.00						
State: H District: FL	Other (spe	ecny) 🔻		Memo Item						
Full Name (Last, First, Middle Initial)				Date of Dieburgsment						
^{B.} Friends For Gregory Meeks				Date of Disbursement						
Mailing Address 153-01 Jamaica Ave. Suite 8	535			09 / D D / Y Y Y Y 09 01 2009						
City Jamaica	State NY	Zip Code 11432		FEC Identification Number						
Purpose of Disbursement			Re-elec	C 011 Transaction ID : 30470342 Amount of Each Disbursement this Period						
Candidate Name			Category/							
H8NY06048, Meeks, Gregory, W., Rep.			Туре							
	bursement For:			1000.00						
Senate President	Other (spe	General								
State: H District: NY				Memo Item						
Full Name (Last, First, Middle Initial)				Date of Disbursement						
Earl Pomeroy for Congress										
Mailing Address P.O. Box 75214				09 17 2009						
City Washington	State DC	Zip Code 20013-5214		FEC Identification Number						
Purpose of Disbursement		20013-3214		C 011						
Candidate Name			Re-elec Category/	Transaction ID : 30582902 Amount of Each Disbursement this Period						
, Pomeroy, Earl, ,			Туре	1000.00						
Office Sought: House Disl	bursement For:	2010 General		7 7 7						
President		Momo Itom								
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SUBTOTAL of Disbursements This Page (optic	onal)			4500.00						
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ITEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page income control only one of the separate schedule(s) income control on the separate income contreserve control on the separate income con	SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 135 OF 174							
Detailed Summary Page 280<	ITEMIZED DISBURSEMENTS			(check only	one)							
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee to solicit contributions from such contributions from such committee to solicit contributions from su												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A Ike Skelton For Congress Committee Mailing Address P.O. Box A City Purpose of Disbursement Candidate Name Hekkoo4141, Skelton, Ike., Rep. Office Sought: President President State President President State: House Office Sought: House President Other (specify) Bennet For Colorado Memo Item Mailing Address PO Box 3078 City City State: Purpose of Disbursement Disbursement For: 2010 City State: Purpose of Disbursement Category/ Type Office Sought: House District: Disbursement For: 2010 Purpose of Disbursement President State: Disbursement For: 2010 President President State: Disbursement (co) President President St				ed by any perso	on for the purpose of soliciting contributions							
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Ike Skeiton For Congress Committee Mailing Address P.O. Box A City Harrisonville Purpose of Disbursement Candidate Name HéMO04141, Skelon, Ike., Rep. Office Sought: House President State: House President State: House Perimary General Office Sought: House President Other (specify) B. Bennet For Colorado Memo Item Mailing Address PO Box 3078 City City State Purpose of Disbursement Re-elic Candidate Name Senate Purpose of Disbursement Re-elic Candidate Name Senate Purpose of Disbursement Disbursement For: 2010 Purpose of Disbursement President Soc000211, Bennet, Michael, Mr. Disbursement For: 2010 President Disbursement For: 2010 President Disbursement For: 2010 Purpose of Disbursement President State: S Distric: Co <t< td=""><td>Full Name (Last, First, Middle Initial)</td><td></td><td></td><td></td><td></td></t<>	Full Name (Last, First, Middle Initial)											
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H6CA02010, Herger, Wally, , Rep. Type	Candidate Name			Category/	Amount of Each Disbursement this Period							
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Senate President President Primary General Other (specify) ▼		\mathbf{A}										
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SCHEDULE B (FEC Form 3X)				INE NUMBER: PAGE 136 OF 174						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the									
		Summary Page		21b 22 X 23 26 27 28a 28b 28c 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the nat			d by any	person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	th)							
Full Name (Last, First, Middle Initial)										
A. The Freedom Project				Date of Disbursement						
Mailing Address 111 C Street SE				09 17 2009						
City	State DC	Zip Code		FEC Identification Number						
Washington Purpose of Disbursement	DC	20003								
			PAC	C 011						
Candidate Name			Category	Transaction ID : 30586860						
C00305805			Type							
Office Sought: House Disburse	ment For:			1000.00						
Senate	Primary	General								
State: District:	Other (spec	city) 🔻		Memo Item						
Full Name (Last, First, Middle Initial)										
^{B.} Chris Lee For Congress				Date of Disbursement						
Mailing Address PO Box 15395				09 17 2009						
Maining Address PO Box 15395				09 17 2009						
City	State NY	Zip Code		FEC Identification Number						
Rochester Purpose of Disbursement	INT	14615		C 011						
			Re-elec Category/ Type							
Candidate Name				// Transaction ID : 30586971 // Amount of Each Disbursement this Period						
H8NY26095, Lee, Christopher, , Mr.										
	ment For: 2			1000.00						
Senate Yresident	Primary Other (spec	General								
State: H District: NY	Other (spec	Siry)		Memo Item						
Full Name (Last, First, Middle Initial)										
C. Charles Boustany Jr. Md For Cong	gress, In	С.		Date of Disbursement						
Mailing Address PO Box 80126				09 17 2009						
City	State	Zip Code		FEC Identification Number						
Lafayette	LA	70598								
Purpose of Disbursement			Re-elec	C 011						
Candidate Name				Iransaction ID : 30587076						
H4LA07029, Boustany, Charles, W., Rep.			Category Type	Amount of Each Disbursement this Period						
	ment For: 2	2010	71	1000.00						
Senate	Primary	General								
President	Other (spec	cify) 🔻		Memo Item						
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 137 OF 174						
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(check only	one) 22 🗙 23 26 27						
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NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	lth)							
Full Name (Last, First, Middle Initial)	Data of Disburgement									
A. Leadeship in the New Century (LIN)	CPAC)			Date of Disbursement						
Mailing Address 124 West Capitol Avenue Suite 630				09 17 2009						
City Little Rock	State AR	Zip Code 72201		FEC Identification Number						
Purpose of Disbursement		72201		C 011						
			Leaders							
Candidate Name			Category/	Transaction ID : 30587243 Amount of Each Disbursement this Period 500.00						
C00366179			Туре							
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President	Primary Other (spe	General cifv) ▼		— ———————————————————————————————————						
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Full Name (Last, First, Middle Initial)										
B. Committee To Elect Chris Murphy	у			Date of Disbursement						
Mailing Address P.O. Box 127		_		09 24 2009						
City	State CT	Zip Code 06410		FEC Identification Number						
Cheshire Purpose of Disbursement		06410		C 011						
			Re-elec	C 011 Transaction ID : 30599331 Amount of Each Disbursement this Period						
Candidate Name			Category/ Type							
H6CT05124, Murphy, Christopher, Scott, Rep.										
	ement For: :	2010		1000.00						
President	Other (spe	General								
State: H District: CT		,		Memo Item						
Full Name (Last, First, Middle Initial)										
^{C.} Georgians for Isakson				Date of Disbursement						
Mailing Address Post Office Box 71955				09 29 2009						
City	State	Zip Code								
Marierta	GA	30007		FEC Identification Number						
Purpose of Disbursement	-			C 011						
Candidate Name	Void - C	Transaction ID : 30608655								
, Isakson, Johnny, ,	Category/ Type	Amount of Each Disbursement this Period								
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President		Memo Item								
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Detailed Summary Page 28a 2	22 X 23 26 27 28b 28c 29 30b r the purpose of soliciting contributions							
or for commercial purposes, other than using the name and address of any political committee to solic NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. Georgians for Isakson Mailing Address Post Office Box 71955 City Marierta Purpose of Disbursement , Isakson, Johnny, , Office Sought: House Disbursement For: 2010 President State: S District: GA	ate of Disbursement							
UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. Georgians for Isakson Mailing Address Post Office Box 71955 City Marierta Purpose of Disbursement , Isakson, Johnny, , Office Sought: House President State: S Disbursement For: 2010 President Other (specify)	09 / 29 / YTYTY 2009							
Full Name (Last, First, Middle Initial) Da A. Georgians for Isakson Mailing Address Post Office Box 71955 City State Zip Code Marierta GA 30007 Purpose of Disbursement Category/ Type Candidate Name Category/ Type Noffice Sought: House Disbursement For: 2010 Category/ State: S District: GA	09 / 29 / YTYTY 2009							
A. Georgians for Isakson Date Mailing Address Post Office Box 71955 Image: Content of the second secon	09 / 29 / YPYYY 2009							
Mailing Address Post Office Box 71955 State Zip Code FE City State GA 30007 FE Purpose of Disbursement Category/ Category/ Category/ Category/ Type Candidate Name Category/ Category/ Category/ Type Category/	09 29 2009							
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Purpose of Disbursement Category/ Type Candidate Name Category/ Type , Isakson, Johnny, , Disbursement For: 2010 Office Sought: House President Primary General Other (specify) State: S								
, Isakson, Johnny, , Category/ Type Office Sought: House Senate Disbursement For: 2010 President Other (specify) State: S								
Office Sought: House Disbursement For: 2010 Senate Primary General President Other (specify) ▼	Transaction ID : 30608656 Amount of Each Disbursement this Period							
Senate President State: S District: GA	500.00							
	Memo Item							
Full Name (Last, First, Middle Initial)	-							
B. Gillibrand For Senate	Date of Disbursement							
Mailing Address 313 C Street Ne	10 07 2009							
City State Zip Code FE Washington DC 20002	C Identification Number							
Purpose of Disbursement Re-elec	C 011 Transaction ID : 30636792							
	nount of Each Disbursement this Period							
S0NY00410, Gillibrand, Kirsten, , Rep. Type Office Sought: House Disbursement For: 2010	1000.00 Memo Item							
Senate Primary General								
State: H District: NY Other (specify)								
Full Name (Last, First, Middle Initial) C. Building Relationships in Diverse Geographic Environments PAC (Bridge PAC)	ate of Disbursement							
	10 / D D / Y Y Y Y 2009							
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Washington DC 20003 Purpose of Disbursement C	011							
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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 139 OF 174								
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		Summary Page	21b	22 X 23 26 27								
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NAME OF COMMITTEE (In Full)												
/ UnitedHealth Group Incorporated	d PAC (U	nited for Hea	lth)									
Full Name (Last, First, Middle Initial)												
A. Ryan For Congress				Date of Disbursement								
Mailing Address P. O. Box 1919				10 / D D / Y Y Y Y 2009								
City	State	Zip Code		FEC Identification Number								
Janesville	WI	53547		FEC Identification Number								
Purpose of Disbursement			Palat	C 011								
Condidata Nama			Re-elec	Transaction ID : 30636909								
Candidate Name H8Wl01024, Ryan, Paul, D., Rep.			Category/	Amount of Each Disbursement this Period								
	sement For:	2010	Туре	1500.00								
Senate	Primary	General										
State: H District: WI	Other (spe	ecify) 🔻		Memo Item								
Full Name (Last, First, Middle Initial)												
^{B.} Friends Of Trey Grayson				Date of Disbursement								
Mailing Address PO Box 175726												
City	State	Zip Code										
Ft Mitchell Purpose of Disbursement	KY	41017										
			Elect to									
Candidate Name			Category/	Transaction ID : 30640490 Amount of Each Disbursement this Period								
S0KY00131, Grayson, Trey, ,			Type	2500.00								
Office Sought: House Disburg	sement For:	2010										
	Y Primary	General										
State: S District: KY	Other (spe	ecify)		Memo Item								
Full Name (Last, First, Middle Initial)												
C. Bachus For Congress Committee	Э			Date of Disbursement								
Mailing Address P.O. Box 131134				10 / D D / Y Y Y Y 2009								
City	State	Zip Code		FEC Identification Number								
Birmingham	AL	35213										
Purpose of Disbursement			Po elec	C 011								
Candidate Name	Re-elec	Transaction ID : 30640493										
H2AL06035, Bachus, Spencer, Thomas, Rep.	Category/ Type	Amount of Each Disbursement this Period 1500.00										
Office Sought: House Disburg	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
Senate												
President		Memo Item										
State: H District: AL												
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 140 OF 174								
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NAME OF COMMITTEE (In Full)												
/ UnitedHealth Group Incorporated	PAC (U	nited for Hea	lth)									
Full Name (Last, First, Middle Initial)												
A. Michael Burgess For Congress				Date of Disbursement								
Mailing Address PO Box 2334				10 / D D / Y Y Y Y 2009								
City	State	Zip Code		FEC Identification Number								
Denton	ТХ	76202		FEC Identification Number								
Purpose of Disbursement			Dealer	C 011								
Condidate Name			Re-elec	Transaction ID : 30640495								
Candidate Name			Category/	Amount of Each Disbursement this Period								
H2TX26093, Burgess, Michael C., , Mr. Office Sought: House Disburs	ement For:	2010	Туре	1000.00								
Senate	Primary	General										
President	Other (spe			Mama Itam								
State: H District: TX				Memo Item								
Full Name (Last, First, Middle Initial)												
^{B.} Dave Camp For Congress 2010				Date of Disbursement								
Mailing Address 5915 Eastman Avenue Suite 100		_										
City	State MI	Zip Code 48640										
Midland Purpose of Disbursement	IVII	40040										
			Re-elec	Transaction ID : 30640497 Amount of Each Disbursement this Period 3000.00								
Candidate Name			Category/									
H0MI10071, Camp, David, Lee, Rep.			Туре									
Č I	ement For:											
President	Primary	General										
State: H District: MI	Other (spe	ectry)		Memo Item								
Full Name (Last, First, Middle Initial)												
C. Nelson 2012				Date of Disbursement								
Mailing Address DO Bay 2000				10 09 2009								
Mailing Address PO Box 8666				10 09 2009								
City	State	Zip Code		FEC Identification Number								
Omaha	NE	68108		FEC Identification Number								
Purpose of Disbursement				C 011								
Condidata Nama			Re-elec	Transaction ID: 30640502								
Candidate Name S6NE00095, Nelson, Ben, , Sen.			Category/	Amount of Each Disbursement this Period								
	ement For:	2010	Туре	1000.00								
Senate	Primary	General										
President	Other (spe			Memo Item								
State: S District: NE												
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NAME OF COMMITTEE (In Full)												
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	lth)									
Full Name (Last, First, Middle Initial) A. Bob Corker for Senate		Date of Disbursement										
Mailing Address PO Box 848				M M / D D / Y Y Y Y 10 09 2009								
City	State	Zip Code		FEC Identification Number								
Chattanooga	TN	37401										
Purpose of Disbursement			Re-Elec	C 011								
Candidate Name			Category/	Transaction ID : 30640514 Amount of Each Disbursement this Period								
S6TN00216, Corker, Robert, P,			Туре	1000.00								
Office Sought: House Disburse Senate President	Senate Primary General											
State: S District: TN		oliy) V		Memo Item								
Full Name (Last, First, Middle Initial)												
B. Roskam for Congress Committee				Date of Disbursement								
Mailing Address 5006 Washington Ave.				10 09 2009								
City Downers Grove	State IL	Zip Code 60515		FEC Identification Number								
Purpose of Disbursement			Re-Elec	C 011 Transaction ID : 30640515 Amount of Each Disbursement this Period								
Candidate Name												
, Roskam, Peter, ,			Category/ Type									
	ement For:	2010	1900	1000.00								
	Primary	General										
State: H District: IL	Other (spe	cify)		Memo Item								
Full Name (Last, First, Middle Initial)				Date of Disbursement								
 Majority Initiative to Keep Electing Rep 	ublicans F	und A.K.A. Mi	ke R Fund									
Mailing Address PO Box 2485				10 10 2009								
City	State	Zip Code		FEC Identification Number								
Springfield Purpose of Disbursement	VA	22152		0 011								
. appear of Distribution			Void - N	C 011 Transaction ID : 30723459								
Candidate Name			Category/	Amount of Each Disbursement this Period								
C00370791			Туре									
	ement For:	Conorol		- 1500.00								
Senate President	Primary Other (spe	General cifv) ▼										
State: District:		,,, v		Memo Item								
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ITEMIZED DISBURSEMENTS			arate schedule(s) category of the	(chec	k only							
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\setminus	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	lth)								
Full Name (Last, First, Middle Initial)												
Α.	Moderate Democrats Political Action	n Committ	tee			Date of Disbursement						
	Mailing Address 426 C Street, N.E.					11 04 2009						
	City	State	Zip Code			FEC Identification Number						
	Washington	DC	20002									
	Purpose of Disbursement					C 011 Transaction ID : 30788396						
	Candidate Name			Catego	ry/	Amount of Each Disbursement this Period						
	C00436022			Туре	•	5000.00						
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General			5000.00						
	State: District:		···· y / •			Memo Item						
	Full Name (Last, First, Middle Initial)											
В.	Frank Kratovil For Congress					Date of Disbursement						
	Mailing Address 222 Main Sail Drive PO Box 518											
	City	State MD			FEC Identification Number							
	Stevensville Purpose of Disbursement		MD 21666			C 011						
	Candidate Name		Category/ Type		Transaction ID : 30788410 Amount of Each Disbursement this Period							
	H8MD01086, Kratovil, Frank, M., Rep.											
	Office Sought: House Disburse	ment For:	71		1000.00							
	Senate	Primary										
	State: H District: MD	Other (spec	cify)			Memo Item						
	Full Name (Last, First, Middle Initial)											
C.	Welch For Congress					Date of Disbursement						
	Mailing Address PO Box 1682					11 / D D / Y Y Y Y 105 / 2009						
	City	State	Zip Code			FEC Identification Number						
	Burlington	VT	05402									
	Purpose of Disbursement					C 011						
	Candidate Name			_	Transaction ID : 30790895							
	H6VT00160, Welch, Peter, , Rep.			Catego Type		Amount of Each Disbursement this Period						
		ment For: 2	2010	7.0		1000.00						
	Senate	Primary	General									
President Other (specify)						Memo Item						
_	State: H District: VT					<u> </u>						
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SCHEDULE B (FEC Form 3X)	lles con	arate schedule(s)	FOR LINE I									
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NAME OF COMMITTEE (In Full)												
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	llth)									
Full Name (Last, First, Middle Initial) A. Friends Of Dennis Cardoza		Date of Disbursement										
Mailing Address PO Box 2749				11 / D D / Y Y Y Y 11 05								
City Merced	State CA	Zip Code 95340		FEC Identification Number								
Purpose of Disbursement			· · · ·]	C 011								
Candidate Name			Category/	Transaction ID : 30790962 Amount of Each Disbursement this Period								
H2CA18056, Cardoza, Dennis, A., Rep.			Type									
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General		1000.00								
State: H District: CA		(ony) v		Memo Item								
Full Name (Last, First, Middle Initial) B. Arcuri For Congress				Date of Disbursement								
Mailing Address P.O. Box 8508				11 / D D / Y Y Y Y 11 05 / 2009								
City Utica	State NY	Zip Code 13505		FEC Identification Number C 011 Transaction ID : 30790965 Amount of Each Disbursement this Period								
Purpose of Disbursement			Category/ Type									
Candidate Name H6NY24128, Arcuri, Michael, A., Rep.												
	ement For:	2010		1000.00								
	Primary	General										
State: H District: NY	Other (spe	cify)		Memo Item								
Full Name (Last, First, Middle Initial) C. Kind for Congress				Date of Disbursement								
Mailing Address P.O. Box 184				11 / D D / Y Y Y Y Y 11 05 2009								
City La Crosse	State WI	Zip Code 54603		FEC Identification Number								
Purpose of Disbursement			· · · ·]	C 011 Transaction ID : 30790968 Amount of Each Disbursement this Period								
Candidate Name , Kind, Ron, , Rep			Category/ Type									
	ement For:	2010		1000.00								
Senate President State: H District: WI	Primary Other (spe	General cify) ▼		Memo Item								
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	CHEDULE B (FEC Form 3X)	Use sena	rate schedule(s)				UMBER:			[PAGE	144 OF 174			
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\backslash	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated	PAC (Un	ited for Heal	lth)											
A.	Full Name (Last, First, Middle Initial)						Date of	Disl	ourse	ment					
	Friends of Sam Johnson						MM	/	D			Y Y Y			
	Mailing Address PO Box 860096						11		0	>	<u> </u>	2009			
	City PLANO	State TX	Zip Code 75086				FEC Ide	entifi	catior	Num	ber				
	Purpose of Disbursement			_	-	1	С	011							
	Candidate Name					ч.	Transaction ID : 30790970 Amount of Each Disbursement this Period								
	, Johnson, Sam, ,				gory/		Amount	OTE	ach	Disbu	rseme	nt this Period			
		ment For: 2		,			1000.00 Memo Item								
	State: H District: TX	Primary Other (spec	General cify) ▼												
_	Full Name (Last, First, Middle Initial)														
В.	Tiberi For Congress						Date of Disbursement M M / D / Y Y Y 11 / 05 / 2009 FEC Identification Number C 011								
	Mailing Address 2931 E Dublin Granville Road Suite 190	State Zip Code OH 43231													
	City Columbus														
	Purpose of Disbursement				1										
	Candidate Name	L				4.	Transaction ID : 30790977 Amount of Each Disbursement this Period								
	H0OH12062, Tiberi, Patrick, J., Rep.		Category/ Type									ni unis Penod			
	5								,	1000.00					
	Senate X President	Primary Other (spec	General												
	State: H District: OH	Other (oper	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Memo Item								
C.	Full Name (Last, First, Middle Initial)						Date of	Dis	nurse	ment					
0.	Congressman Joe Barton Commit	tee					Date of Disbursement								
	Mailing Address 701 Williamsburg						11		05	5		2009			
	City Ennis	State TX	Zip Code 75120				FEC Ide	entifi	catior	Num	ber				
	Purpose of Disbursement		73120	_	_		С	011				· · · ·			
Candidate Name					gory/	ų.	Transaction ID : 30790979 Amount of Each Disbursement this Period								
	, Barton, Joe L., ,						Amount		ach	DISDU	seme	nit tinis Fenou			
	Office Sought: House Disburse					1500.00									
Senate Primary General President Other (specify) ▼															
	State: H District: TX	outor (oper	, , , , , , , , , , , , , , , , , , ,				Memo Item								
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ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(cł			y one)								
			Summary Page			21b 28a	22 X 23 26 27 28b 28c 29 30b								
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	UnitedHealth Group Incorporated	PAC (Un	nited for Hea	lth)											
<u> </u>	Full Name (Last, First, Middle Initial)														
Α.	AMERIPAC: The Fund for a Greater	America					Date of Disbursement								
	Mailing Address 607 14th Street, NW Suite 800						11 10 2009								
	-	State	Zip Code				FEC Identification Number								
	Washington Purpose of Disbursement	DC	20005												
							C 011								
	Candidate Name						Transaction ID : 30811622								
	C00271338			Cate Ty	egory /pe	"	Amount of Each Disbursement this Period								
	Office Sought: House Disburse	ment For:		,			5000.00								
	Senate	Primary	General												
	State: District:	Other (spec	cify) 🔻				Memo Item								
_	Full Name (Last, First, Middle Initial)														
В.	Ryan For Congress						Date of Disbursement								
	Mailing Address P. O. Box 1919						11 10 2009								
	City	State	Zip Code				FEC Identification Number								
	Janesville Purpose of Disbursement					1	C 011								
	Candidate Name			L.,			Transaction ID : 30811704								
	H8WI01024, Ryan, Paul, D., Rep.			Cate		//	Amount of Each Disbursement this Period								
		ment For: 2	2010	Ty	/pe		1000.00								
		Primary	General												
	State: H District: WI	Other (spec	cify)				Memo Item								
	Full Name (Last, First, Middle Initial)														
C.	Citizens For Altmire						Date of Disbursement								
	Mailing Address P.O. Box 1776						11 10 2009								
	City	State	Zip Code			$\neg \uparrow$	FEC Identification Number								
	Freedom	PA	15042												
	Purpose of Disbursement					 	C 011								
	Candidate Name			Ļ		 	Transaction ID : 30811712								
	H6PA04110, Altmire, Jason, , Mr.			Cate Tv	egory /pe	//	Amount of Each Disbursement this Period								
		ment For: 2	2010	. ,			1000.00								
	Senate	Primary	General												
	President	Other (spec	cify) 🔻				Memo Item								
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 146 OF 174			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	/ one)			
		Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
> UnitedHealth Group Incorporated	PAC (U	nited for Hea	lth)				
Full Name (Last, First, Middle Initial)							
A. Davis For Congress/Friends Of Dav	/is			Date of Disbursement			
Mailing Address 5956 W. Race Avenue				11 / D D / Y Y Y Y 11 10 2009			
City Chicago	State IL	Zip Code 60644		FEC Identification Number			
Purpose of Disbursement				C 011			
				Transaction ID : 30811725			
Candidate Name			Category/	Amount of Each Disbursement this Period			
H4IL07037, Davis, Danny, K., Rep.			Туре	1000.00			
Office Sought: House Disburs	ement For:			1000.00			
President	Primary Other (spe	cify) ▼		Memo Item			
State: H District: IL							
Full Name (Last, First, Middle Initial) B. Friends of Mary Landrieu				Date of Disbursement			
Mailing Address 58156 Court Street				11 / D D / Y Y Y Y 11 2009			
City	State	Zip Code		FEC Identification Number			
Plaquemine	LA	70764					
Purpose of Disbursement				C 011			
Candidate Name			Cotogony/	Transaction ID : 30811734			
, Landrieu, Mary L., ,			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburs	ement For:	2014		1000.00			
	Primary	General					
State: S District: LA	Other (spe	ecify)		Memo Item			
Full Name (Last, First, Middle Initial)							
C. Georgians for Isakson				Date of Disbursement			
Mailing Address Post Office Box 71955				11 / D D / Y Y Y Y 11 10 2009			
City	State	Zip Code		FEC Identification Number			
Marierta Purpose of Disbursement	GA	30007					
Fulpose of Disbuisement				C 011			
Candidate Name			Category/	Transaction ID : 30811746 Amount of Each Disbursement this Period			
, Isakson, Johnny, , Office Sought: House Disburs	ement For:	2010	Туре	1000.00			
Senate Setup 1	 Primary 	General					
President	Other (spe	ecify) 🔻		Memo Item			
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SCH	HEDULE B (FEC Form 3X)	11		FOR LINE	E NUMBER: PAGE 147 OF 174			
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\ N.	AME OF COMMITTEE (In Full)							
/	JnitedHealth Group Incorporated	PAC (Un	nited for Hea	llth)				
٨	ull Name (Last, First, Middle Initial) Michael Burgess For Congress				Date of Disbursement			
	ailing Address PO Box 2334				M M / D D / Y Y Y Y 11 10 2009			
	ity	State TX	Zip Code 76202		FEC Identification Number			
	urpose of Disbursement			· · ·]	C 011			
C	andidate Name			Category/	Transaction ID : 30811752 Amount of Each Disbursement this Period			
	2TX26093, Burgess, Michael C., , Mr.			Type				
Ō	ffice Sought: House Disburse Senate X President	ment For: 2 Primary Other (spec	General					
St	tate: H District: TX		sily) v		Memo Item			
D	ull Name (Last, First, Middle Initial)				Date of Disbursement			
	lailing Address P.O. Box 32025		M M / D D / Y Y Y Y 11 10 2009					
Р	ity hoenix	State AZ	Zip Code 85064		FEC Identification Number			
	urpose of Disbursement				C 011 Transaction ID : 30811763			
	andidate Name 200368431			Category/ Type	Amount of Each Disbursement this Period			
		ment For: Primary	General	туре	1000.00			
St	President	Other (spec			Memo Item			
Fi	ull Name (Last, First, Middle Initial)				Date of Disbursement			
- (DrrinPAC				M M / D D / Y Y Y Y			
M	ailing Address 175 S West Temple Suite 650				11 10 2009			
	ity	State UT	Zip Code 84101		FEC Identification Number			
	alt Lake City urpose of Disbursement	C 011						
	andidate Name C00235572			Category/ Type	Transaction ID : 30811766 Amount of Each Disbursement this Period			
Ō	ffice Sought: House Disburse	ment For:		2.	1000.00			
	Senate President	Primary Other (spec	General cify) ▼		Memo Item			
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or for commercial purposes, other than using the nan											
UnitedHealth Group Incorporated I	PAC (Un	ited for Heal	lth)								
Full Name (Last, First, Middle Initial)											
A. ERICPAC						Date of	Dist	ourse	ment		
Mailing Address 25 East Main Street, Suite 200							/	D 1(2009
5	State	Zip Code			-	FEC Id	entific	cation	Numl	oer	
Richmond Purpose of Disbursement	VA	23219									-
Fulpose of Disbursement					11		011			_	
Candidate Name			Cator	aonu					ID:30 Disbur		67 Int this Period
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Office Sought: House Disburser	ment For:					L.					1000.00
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						_					
Full Name (Last, First, Middle Initial)						Date of	Dist	ourse	ment		
Friends Of Ginny Brown-Waite						M M		D	_	Y	Y Y Y
Mailing Address PO Box 865	865					11 10 2009					
,	State	Zip Code				FEC Id	entific	cation	Numl	ber	
Brooksville Purpose of Disbursement	FL	34605				_	-				-
Fulpose of Disbursement	irsement					С	011				
Candidate Name			Catao	~~~~	11	Transaction ID : 30811768					
H2FL05127, Brown-Waite, Virginia, , Rep.			Cateo Typ			Amount of Each Disbursement this Period					
C I	ment For: 2	2010				Ι.					1000.00
	Primary	General									
President	Other (spec	cify)				Me	mo li	tem			
State: H District: FL						-					
Full Name (Last, First, Middle Initial)						Date of	Dieł	nursa	mont		
C. Richard Burr Committee						M M		D			Y Y Y
Mailing Address P.O. Box 5928						11	,	1(2009
City	State	Zip Code									
Winston-Salem	NC	27113				FEC Id	entific	cation	Numi	ber	
Purpose of Disbursement				-		С	011	_			
Candidata Nama						Tra	insad	ction	ID : 30	81177	71
Candidate Name , Burr, Richard M., ,			Cateo			Amount	of E	Each	Disbur	semer	nt this Period
	nent For: 2	010	Тур	he							1000.00
Senate	Primary	General				<u> </u>	-7				1 40 1
President	Other (spec					Mo	mo li	tem			
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	y information copied from such Reports and State for commercial purposes, other than using the na						
\backslash	NAME OF COMMITTEE (In Full)						
	UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	lth)			
Α.	Full Name (Last, First, Middle Initial) People For Patty Murray				Date of Disbursement		
	Mailing Address PO Box 3662				M M / D D / Y		
	City Seattle	State WA	Zip Code 98124		FEC Identification Number		
	Purpose of Disbursement			· · · ·]	C 011 Transaction ID : 30811774		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	S2WA00189, Murray, Patty, , Sen.			Туре	500.00		
	Office Sought: House Disburse Senate President	ement For: 2 Primary Other (spe	General		500.00 Memo Item		
	State: S District: WA						
B.	Full Name (Last, First, Middle Initial) Re-Elect Brian Bilbray For Congre		Date of Disbursement				
	City						
	City Imperial Beach	State CA	Zip Code 91932		FEC Identification Number		
	Purpose of Disbursement				C 011 Transaction ID : 30811776		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	, Bilbray, Brian P., , Office Sought: House Disburse	ment For:	2010	Туре	1000.00		
		Primary	2010 General		7 7 7		
	State: H District: CA	Other (spe			Memo Item		
~	Full Name (Last, First, Middle Initial)						
C.	Mcconnell Senate Committee '14				Date of Disbursement		
	Mailing Address PO Box 1496				11 / D D / Y Y Y Y 10 2009		
	City	State	Zip Code		FEC Identification Number		
	Louisville Purpose of Disbursement	KY	40201				
					C 011 Transaction ID : 30811777		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	S2KY00012, McConnell, Mitch, , Sen.			Туре			
	Office Sought: House Disburse Senate	ment For: 2			2500.00		
	President	Other (spe	General cify) ▼				
	State: S District: KY		- ,, ,		Memo Item		
s	UBTOTAL of Disbursements This Page (optional).			····· ►	4000.00		
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 150 OF 174			
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UnitedHealth Group Incorporated	I PAC (Ur	nited for Hea	lth)				
Full Name (Last, First, Middle Initial)							
A. Issa for Congress				Date of Disbursement			
Mailing Address P. O. Box 760				11 / D D / Y Y Y Y 11 10 / 2009			
City	State CA	Zip Code		FEC Identification Number			
Vista Purpose of Disbursement	CA	92085-0760		0 044			
				C 011			
Candidate Name			Category/	Transaction ID : 30811778 Amount of Each Disbursement this Period			
, Issa, Darrell, ,			Туре				
	ement For:	2010		1000.00			
Senate >	Primary	General					
State: H District: CA	Other (spe	CITY) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
B. Demint For Senate Committee In	С			Date of Disbursement			
Mailing Address DO Day 49495				11 10 2009			
Mailing Address PO Box 12425							
City	State	Zip Code		FEC Identification Number			
Columbia Purpose of Disbursement	SC	29211		0			
				C 011			
Candidate Name			Category/	Transaction ID : 30811780 Amount of Each Disbursement this Period			
S4SC00083, DeMint, James, W., Sen.			Туре				
	ement For:	2010		1000.00			
	Primary	General					
State: S District: SC	Other (spe	city)		Memo Item			
Full Name (Last, First, Middle Initial)							
C. Friends Of John Thune				Date of Disbursement			
Mailing Address 200 North Dhilling Augure Ota L	101			M M / D D / Y Y Y Y 11 10 2009			
Mailing Address 200 North Phillips Avenue Ste L1				2009			
City	State	Zip Code		FEC Identification Number			
Sioux Falls	SD	57104					
Purpose of Disbursement				C 011			
Candidate Name			Cotomoral	Transaction ID : 30811783			
S2SD00068, Thune, John, R., Sen.			Category/ Type	Amount of Each Disbursement this Period			
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	ny information copied from such Reports and State for commercial purposes, other than using the na						
\land	NAME OF COMMITTEE (In Full)						
	UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	lth)			
<u>د</u>	Full Name (Last, First, Middle Initial)						
Α.	The Freedom Project				Date of Disbursement		
	Mailing Address 111 C Street SE				11 10 / Y Y Y Y 11 10 2009		
	City	State	Zip Code		FEC Identification Number		
	Washington	DC	20003				
	Purpose of Disbursement			· · · ·	C 011		
	Candidate Name			Category/	Transaction ID : 30811785 Amount of Each Disbursement this Period		
	C00305805	_		Туре	1000.00		
	Office Sought: House Disburse	ment For: Primary	General		1000.00		
	President	Other (spec			Memo Item		
	State: District:	1					
Р	Full Name (Last, First, Middle Initial)				Data of Diskurgement		
В.	Brady For Congress			Date of Disbursement			
	Mailing Address P.O. Box 8277	11 10 Y Y Y Y 2009					
	City	State TX	Zip Code 77387		FEC Identification Number		
	The Woodlands Purpose of Disbursement		C 011				
					Transaction ID : 30811788		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	H6TX08100, Brady, Kevin, Patrick, Rep. Office Sought: House Disburse	ment For: 2	2010	Туре	1000.00		
		Primary	General				
	President	Other (spec	cify)		Memo Item		
	State: H District: TX						
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement		
	Price For Congress				M M / D D / Y Y Y Y		
	Mailing Address P.O. Box 425				11 10 2009		
	City	State	Zip Code		FEC Identification Number		
	Roswell Purpose of Disbursement	GA	30077		C 011		
					Transaction ID : 30811790		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	H4GA06087, Price, Thomas, Edmunds, Rep.			Туре	1000.00		
	Office Sought: House Disburse Senate	ement For: 2 Primary	2010 General				
	President	Other (spec			Memo Item		
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NAME OF COMMITTEE (In Full)						
ight angle UnitedHealth Group Incorporated	d PAC (U	nited for Hea	lth)			
Full Name (Last, First, Middle Initial)						
A. Lisa Murkowski For Us Senate				Date of Disbursement		
Mailing Address PO Box 100847				11 10 2009		
City	State AK	Zip Code		FEC Identification Number		
Anchorage Purpose of Disbursement	AK	99510				
				C 011		
Candidate Name			Category/	Transaction ID : 30811984 Amount of Each Disbursement this Period		
S4AK00099, Murkowski, Lisa, , Sen.			Type	Amount of Each Disburgement this renou		
Office Sought: House Disburg	sement For:	2010		1000.00		
Senate	Y Primary	General				
State: S District: AK	Other (spe	ecify) 🔻		Memo Item		
Full Name (Last, First, Middle Initial)						
^{B.} Linder For Congress				Date of Disbursement		
Mailing Address 2821 Greystone Cove South	Mailing Address 2821 Greystone Cove South					
City	State	Zip Code		FEC Identification Number		
Atlanta Purpose of Disbursement	GA	30341		C 011		
				Transaction ID : 30878934		
Candidate Name			Category/	Amount of Each Disbursement this Period		
, Linder, John, ,			Туре	4000.00		
5	sement For:			1000.00		
Senate President	Primary Other (spe	General				
State: H District: GA		(ing)		Memo Item		
Full Name (Last, First, Middle Initial)						
C. Mike Ross for Congress				Date of Disbursement		
Mailing Address 227 Massachusette Ave N.E. Ste 101				11 19 / Y Y Y Y 12009		
City	State	Zip Code		FEC Identification Number		
Washington Purpose of Disbursement	DC	20002		0 011		
Candidate Name			Category/	Transaction ID : 30878935 Amount of Each Disbursement this Period		
, Ross, Michael Avery, ,			Type			
	sement For:			2000.00		
Senate	C Primary	General				
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NAME OF COMMITTEE (In Full)					
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	lth)		
Full Name (Last, First, Middle Initial)					
A. Mchenry For Congress				Date of Disbursement	
Mailing Address PO Box 1406				11 / 19 / Y Y Y Y 11 2009	
City	State NC	Zip Code 28603		FEC Identification Number	
Hickory Purpose of Disbursement	NC	28603		0	
				C 011	
Candidate Name			Category/	Transaction ID: 30878938 Amount of Each Disbursement this Period	
H4NC10047, McHenry, Patrick, Timothy, Rep.			Type		
	ement For: 2			1000.00	
Senate	Primary	General			
State: H District: NC	Other (spe	сіту) 🔻		Memo Item	
Full Name (Last, First, Middle Initial)					
^{B.} Freedom Fund				Date of Disbursement	
Mailing Address 701 8th Street, N.W. Suite 500	1	1		11 23 2009	
City Washington	State DC	Zip Code 20001		FEC Identification Number	
Purpose of Disbursement	00	20001		C 011	
				Transaction ID : 30885451	
Candidate Name			Category/	Amount of Each Disbursement this Period	
C00390674			Туре	1500.00	
Office Sought: House Disburse	ement For:	Conorol		1500.00	
President	Primary Other (spe	General			
State: District:		(ily)		Memo Item	
Full Name (Last, First, Middle Initial)				Data of Distance	
^{C.} Bob Casey For Senate Inc				Date of Disbursement	
Mailing Address 607 14th Street Nw Suite 800				11 / D D / Y Y Y Y 2009	
City	State	Zip Code		FEC Identification Number	
Washington	DC	20005			
Purpose of Disbursement				C 011	
Candidate Name				Transaction ID : 30932760	
S6PA00217, Casey, Robert, , Sen.			Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburse	ement For:	2012		1000.00	
Senate	Primary	General			
President	Other (spe	cify) 🔻		Memo Item	
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SCHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LINE I			
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NAME OF COMMITTEE (In Full)						
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	th)			
Full Name (Last, First, Middle Initial) A. Sue Myrick For Congress				Date of Disbursement		
Mailing Address P.O. Box 37091				M M / D D / Y Y Y Y 12 02 2009		
City	State	Zip Code				
Charlotte	NC	28237		FEC Identification Number		
Purpose of Disbursement	1			C 011		
Candidate Name			Category/	Transaction ID : 30935358 Amount of Each Disbursement this Period		
H4NC09106, Myrick, Sue, Wilkins, Rep.			Type			
Senate	ement For:	General		1000.00		
State: H District: NC	Other (spe	cify) 🔻		Memo Item		
Full Name (Last, First, Middle Initial)						
^{B.} Priority PAC				Date of Disbursement		
Mailing Address 2821 Kavanaugh Blvd Suite 3G		12 02 2009				
City Little Rock	State AR	Zip Code 72205		FEC Identification Number		
Purpose of Disbursement	1			C 011		
Candidate Name			Category/	Transaction ID: 30935920 Amount of Each Disbursement this Period		
C00388694			Туре			
Office Sought: House Disburs	ement For:	Gaparal		2500.00		
President	Primary Other (spe	General cify)		Memo Item		
State: District:						
Full Name (Last, First, Middle Initial)C. Stephanie Herseth Sandlin For S	outh Dak	ota		Date of Disbursement		
Mailing Address PO Box 2009				M M / D D / Y Y Y Y 12 02 2009		
City	State	Zip Code		FEC Identification Number		
Sioux Falls	SD	57101		C 011		
	Purpose of Disbursement					
Candidate Name , M, Herseth, ,			Category/ Type	Amount of Each Disbursement this Period		
	ement For:	2010	туре	1000.00		
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SCHEDULE B (FEC Form 3X)			FOR LIN	E NUMBER: PAGE 155 OF 174			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check or	/ one)			
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NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporated	I PAC (U	nited for Hea	alth)				
Full Name (Last, First, Middle Initial)							
A. Feinstein For Senate				Date of Disbursement			
Mailing Address 1212 S Victory Blvd				12 02 2009			
City	State	Zip Code		FEC Identification Number			
Burbank	CA	91502					
Purpose of Disbursement				C 011			
Candidate Name				Transaction ID : 30935924			
S0CA00199, Feinstein, Dianne, , Sen.			Category/ Type	Amount of Each Disbursement this Period			
	ement For:	2012	76-	1000.00			
Senate	Primary	General					
State: S District: CA	Other (spe	ecify) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
^{B.} Georgians for Isakson				Date of Disbursement			
				M = M / D = D / Y = Y = Y			
Mailing Address Post Office Box 71955	12 04 2009						
City Marierta	State GA	Zip Code 30007		FEC Identification Number			
Purpose of Disbursement		C 011					
				Transaction ID : 30939623			
Candidate Name			Category/	Amount of Each Disbursement this Period			
, Isakson, Johnny, ,			Туре	4000.00			
3		2010		1000.00			
President	Primary Other (spe	General					
State: S District: GA		,y)		Memo Item			
Full Name (Last, First, Middle Initial)							
C. TENNPAC				Date of Disbursement			
Mailing Address 228 South Washington Street				12 04 2009			
Suite 115							
City	State	Zip Code		FEC Identification Number			
Alexandria Purpose of Disbursement	VA	22314					
r arpose or Disputsement				C 011			
Candidate Name		Catogony	Transaction ID : 30939644 Amount of Each Disbursement this Period				
C00388421			Category/ Type				
	ement For:			1500.00			
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NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporated	PAC (U	nited for Hea	lth)				
Full Name (Last, First, Middle Initial)				Dete of Diskurgement			
A. Forward Together PAC				Date of Disbursement			
Mailing Address 10 G Street, NE Suite 570				12 04 2009			
City	State	Zip Code		FEC Identification Number			
Washington Purpose of Disbursement	DC	20002		C 011			
				C 011 Transaction ID : 30940119			
Candidate Name			Category/	Amount of Each Disbursement this Period			
C00412791 Office Sought: House Disburs	ement For:		Туре	1000.00			
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State: District:	Other (spe	ecify) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
^{B.} Hagan For Us Senate Inc				Date of Disbursement			
Mailing Address PO Box 29103				12 / D D / Y Y Y Y Y 2009			
City	State	Zip Code		FEC Identification Number			
Greensboro Purpose of Disbursement	NC	27429		C 011			
				C 011 Transaction ID : 30945009			
Candidate Name			Category/	Amount of Each Disbursement this Period			
S8NC00239, Hagan, Kay, , Office Sought: House Disburs	ement For:	2014	Туре	1000.00			
	Primary	General					
President	Other (spe	ecify)		Memo Item			
State: S District: NC							
Full Name (Last, First, Middle Initial)				Date of Disbursement			
Senate Majority Fund				M M / D D / Y Y Y Y			
Mailing Address P.O. Box 32025				12 14 2009			
City	State	Zip Code		FEC Identification Number			
Phoenix Purpose of Disbursement	AZ	85064					
Tupose of Disbursement				C 011			
Candidate Name			Category/	Transaction ID : 31002918 Amount of Each Disbursement this Period			
C00368431			Туре	2000.00			
Office Sought: House Disburse	ement For: Primary	General		2000.00			
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Full) Value OF Committee. NAME OF COMMITTEE (in Full) Value OF Committee. The Grassley Committee. Inc. Mailing Address P.O. Box 6193 City Purpose of Disbursement Candidate Name Candidate Name State: State: State: State: State: State: State: Candidate Name Candidate Name State:						
ar for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME CF COMMITTE (in Full) NAME CF COMMITTE (in Full) The Grassley Committee, Inc. Maling Address P.O. Box 6183 City Abstance Candidate Name State Diarist: Diabursement Full Name (Last, First, Middle Initia) Bennett Election Committee Inc Maling Address 175 South West Temple Suite 650 City State Suttower Robert, F. Sen. Office Sought: House Periodite Name <						
✓ UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) The Grassley Committee, Inc. Mailing Address P.O. Box 6193 City Abxandria Purpose of Disbursement Candidate Name Consety Consety Office Sought: House Disbursement For: 2010 Office Sought: Benate Disbursement For: 2010 Office Sought: House Purpose of Disbursement Disbursement For: 2010 Office Sought: Bennett Election Committee Inc Mailing Address 175 South West Temple Suite 650 Date of Disbursement City State: Sutter: S District: Mailing Address 175 South West Temple Suite 650 City State: Sutter: S District: Thume (Last, First, Middle Initial) Purpose of Disbursement Sutter: S District: Mailing Address PD Box 581 Purpose of Disbursement Sutter: S District: Mailing Address PD Box 581 Pure Office Box 581	or for commercial purposes, other than using the na	ments may me and add	not be sold or use ress of any politica	ed by any al commi	y perso ittee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Date of Disbursement The Grassley Committee, Inc. Image: Committee, Inc. Mailing Address P.O. Box 6193 State City State Condidate Name Category Conseter, Charles E., Disbursement Condidate Name Disbursement For: 2010 Conseter, Charles E., Disbursement For: 2010 Office Sought: Breate State: S District: IA Value State State: S Mailing Address 175 South West Temple Suite 650 City State Candidate Name State Suttake City State Purpose of Disbursement Disbursement For: 2010 Candidate Name State: Suttake City State Purpose of Disbursement Category State: S Office Sought: House President Category State: S Disbursement Category City State: S	NAME OF COMMITTEE (In Full)					
A The Grassley Committee, Inc. Date of Disbursement Mailing Address P.O. Box 6133 12 14 2099 City State Zip Code 2200-0133 FEC Identification Number Candidate Name Category Transaction ID : 51002922 Amount of Each Disbursement this Period Office Sought: Benate Disbursement For: 2010 Merro Itam Merro Itam State: S Disfut:: A 1000:00 Merro Itam State: S Disbursement Category Transaction ID : 51002932 Full Name (Last, First, Middle Initia) Date of Disbursement Date of Disbursement Category Suppose of Disbursement UT 84101 Date of Disbursement Category Purpose of Disbursement UT 84101 EEC Identification Number EEC Identification Number Candidate Name Sonate Disbursement For: 2010 Transaction ID : 31002939 Mount of Each Disbursement this Period Subtrict: House Disbursement For: 2010 Category Transaction ID : 31002939 Rogens For Congress Mailing Address PO Box 581 EEC Identification Number EEC	/ UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	lth)		
The Grassley Committee, Inc. Mating Address P.O. Box 6193 City Alexandra VA 2206-0193 Purpose of Disbursement Category/ Grassley. Charles E., Office Sought: House Bennett Election Committee Inc Mailing Address 175 South West Temple Suite 650 City Satul Lake City Purpose of Disbursement Candidate Name Candidate Name Category/ Satul Lake City Subscreenent City Satul Lake City Disbursement For: 2010 Bennett Election Committee Inc Mailing Address 175 South West Temple Suite 650 City Satul Lake City Purpose of Disbursement State: S bisbursement For: 2010 President Other (specify) State: S bisbursement Purpose of Disbursement City State Purpose Of Disbursement City State Purpose of Disbursement City State President<						
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<u>ب</u>	Full Name (Last, First, Middle Initial)				Dete of Diskurgement
Α.	Citizens For Altmire				Date of Disbursement
	Mailing Address P.O. Box 1776				12 14 2009
	City Freedom	State PA	Zip Code 15042		FEC Identification Number
	Purpose of Disbursement		13042		C 011
					Transaction ID : 31002941
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В.	Childers For Congress				Date of Disbursement
	Mailing Address PO Box 177				12 / D D / Y Y Y Y 12 15 2009
	City Booneville	State MS	Zip Code 38829		FEC Identification Number
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	Candidate Name			L	Transaction ID : 31043467
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с.	Full Name (Last, First, Middle Initial)				Date of Disbursement
0.	Richard Burr Committee				
	Mailing Address P.O. Box 5928				12 15 2009
	City	State	Zip Code		FEC Identification Number
	Winston-Salem Purpose of Disbursement	NC	27113		
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\square	NAME OF COMMITTEE (In Full)							
	UnitedHealth Group Incorporated	PAC (Un	ited for Hea	alth)				
<u>—</u> А.	Full Name (Last, First, Middle Initial)						Date of Disbursemer	at
Π.	Bennet For Colorado							
	Mailing Address PO Box 3078						12 15	2009
	City	State	Zip Code				FEC Identification Nu	umber
	Denver	CO	80201					
	Purpose of Disbursement					11	C 011	
	Candidate Name			Cate	egory	,	Transaction ID : Amount of Each Dist	bursement this Period
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В.	Pat Roberts For US Senate Inc						Date of Disbursemer	
	Mailing Address PO Box 433						12 / D D 15	2009
	City	State	Zip Code				FEC Identification Nu	umber
	Great Bend Purpose of Disbursement	KS	67530			_	C 011	
						Ш	C 011 Transaction ID :	21042544
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	Mailing Address Post Office Box 977						12 / D D 15	2009
	City	State	Zip Code				FEC Identification Nu	ımber
	Muskogee	OK	74402					
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	Candidate Name			Cate	egory	,	Transaction ID : Amount of Each Dist	: 31043550 bursement this Period
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/ UnitedHealth Group Incorporated	PAC (Ur	ited for Heal	th)	
Full Name (Last, First, Middle Initial)				Date of Disbursement
A. SKI PAC				M M / D D / Y Y Y Y
Mailing Address P.O. Box 83142				12 15 2009
City Gaithersburg	State MD	Zip Code 20883		FEC Identification Number
Purpose of Disbursement		20000		C 011
Candidate Name		L	Category/	Transaction ID : 31043551 Amount of Each Disbursement this Period
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B. Making Business Excel Political A	ction Co	mmittee		Date of Disbursement
Mailing Address PO Box 3241				12 16 2009
City Cheyenne	State WY	Zip Code 82001		FEC Identification Number
Purpose of Disbursement				C 011
Candidate Name		I	Cotogony/	Transaction ID : 31053906 Amount of Each Disbursement this Period
C00392134			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For:			2500.00
Senate	Primary	General		
State: District:	Other (spec	cify)		Memo Item
Full Name (Last, First, Middle Initial)				
C. Mike Mcmahon For Congress				Date of Disbursement
Mailing Address 66 Arnold Street				12 16 2009
2	State	Zip Code		FEC Identification Number
Staten Island Purpose of Disbursement	NY	10301		0 011
				C 011
Candidate Name		I	Catagony/	Transaction ID : 31053963 Amount of Each Disbursement this Period
H8NY13077, McMahon, Michael, , Mr.			Category/ Type	Amount of Each Disburschient this Feriod
Office Sought: House Disburse	ment For: 2	2010		1000.00
Senate X	Primary	General		
State: H District: NY	Other (spec	city) 🔻		Memo Item
State: H District: NY				
SUBTOTAL of Disbursements This Page (optional).			••••••	6000.00
	\ \			
TOTAL This Period (last page this line number only)		•••••• •	

SCHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check 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 na				
NAME OF COMMITTEE (In Full)				
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	th)	
Full Name (Last, First, Middle Initial) A. Hagan For Us Senate Inc				Date of Disbursement
Mailing Address PO Box 29103				12 17 2009
City	State	Zip Code		FEC Identification Number
Greensboro Purpose of Disbursement	NC	27429		
				C 011
Candidate Name			Category/	Transaction ID : 31055047 Amount of Each Disbursement this Period
S8NC00239, Hagan, Kay, ,			Туре	
Office Sought: House Disburse Senate X President	ement For: 2 Primary Other (spe	General		1000.00
State: S District: NC		oliy) v		Memo Item
Full Name (Last, First, Middle Initial)				Date of Disbursement
People For Patty Murray				
Mailing Address PO Box 3662				12 23 2009
City Seattle	State WA	Zip Code 98124		FEC Identification Number
Purpose of Disbursement				C 011
Candidate Name			Category/	Transaction ID : 31065529 Amount of Each Disbursement this Period
S2WA00189, Murray, Patty, , Sen.			Type	Anount of Each Disburschicht this Fellow
Office Sought: House Disburse	ement For:			1000.00
Senate	Primary	General		
State: S District: WA	Other (spe	cify)		Memo Item
Full Name (Last, First, Middle Initial)				Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y Y
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement		1		С
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For:		71. *	
Senate	Primary	General		7- 7- 7- 1- 1-
State: District:	Other (spe	cify) 🔻		Memo Item
				2000.00
SUBTOTAL of Disbursements This Page (optional)				158500.00
TOTAL This Period (last page this line number only	/)		▶	130300.00

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 162 OF 174
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 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				
NAME OF COMMITTEE (In Full)				
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	th)	
Full Name (Last, First, Middle Initial)				
A. Committee to Elect Niehaus				Date of Disbursement
Mailing Address 1131 Little Indian Creek Road				07 / D D / Y Y Y Y 2009
City New Richmond	State OH	Zip Code 45157-9602		FEC Identification Number
Purpose of Disbursement				C 011
			Tom Ni	Transaction ID : 30182988
Candidate Name			Category/	Amount of Each Disbursement this Period
, Niehaus, Tom, , OH Sen. Office Sought: House Disburse	ment For: 2	2010	Туре	2000.00
Senate X	Primary Other (spec	General		
State: S District: OH		•••• • ••		Memo Item
Full Name (Last, First, Middle Initial)				
^{B.} Committee to Elect Bill Harris				Date of Disbursement
Mailing Address 1238 TWP Road 1506				07 08 2009
City	State	Zip Code		FEC Identification Number
Ashland Purpose of Disbursement	OH	44805		
			Bill Harı	C 011
Candidate Name			Category/	Transaction ID : 30182992 Amount of Each Disbursement this Period
, Harris, Bill, , Senator			Туре	
	ment For: 2			3000.00
Senate X	Primary Other (spec	General		
State: S District: OH		Siry)		Memo Item
Full Name (Last, First, Middle Initial)				
^{C.} Friends of Faber				Date of Disbursement
Mailing Address 7706 St. Rt 703				07 08 2009
City	State	Zip Code		FEC Identification Number
Celina	ОН	45822		
Purpose of Disbursement			Keith Fa	C 011
Candidate Name				Transaction ID : 30182994
, Faber, Keith, , OH Sen.			Category/ Type	Amount of Each Disbursement this Period
	ment For: 2	2010	- , , , , ,	2000.00
Senate	Primary	General		
President	Other (spec	cify) 🔻		Memo Item
State: S District: OH				hand the second s
SUBTOTAL of Disburgaments This Bags (antianal)				7000.00
SUBTOTAL of Disbursements This Page (optional).			····· •	
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S	CHEDULE B (FEC Form 3X)			FO	RIN	E NUMBER: PAGE 163 OF 174
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	-		nly one) b 22 23 26 27
	y information copied from such Reports and State for commercial purposes, other than using the na					prson for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full)					
	UnitedHealth Group Incorporated	PAC (Un	nited for Hea	alth)		
A.	Full Name (Last, First, Middle Initial)					Date of Disbursement
	Citizens for Buehrer					M M / D D / Y Y Y Y
	Mailing Address 704 Greenview Drive					07 08 2009
	City	State	Zip Code			FEC Identification Number
	Delta Purpose of Disbursement	OH	43515			
	Fulpose of Disbursement			Ste	ve E	
	Candidate Name			Cate	gory/	Transaction ID : 30182995 Amount of Each Disbursement this Period
	, Buehrer, Steve, , OH Sen.			Ту		
		ement For: 2				1000.00
	President	Primary Other (spec	General cify) ▼			
	State: S District: OH		<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Memo Item
_	Full Name (Last, First, Middle Initial)					
В.	Citizens for Wagoner					Date of Disbursement
	Mailing Address 7445 Airport Highway					07 / D D / Y Y Y Y 08 / 2009
	City	State	Zip Code			FEC Identification Number
	Holland Purpose of Disbursement	OH	43528	_		C 011
				Ма	rk W	Transaction ID : 30182996
	Candidate Name				gory/	Amount of Each Disbursement this Period
	, Wagoner, Mark, , OH Sen.		0010	Ту	ре	2000.00
	-	ement For: 2 Primary	General			200.00
	President	Other (spec				
	State: S District: OH]				Memo Item
~	Full Name (Last, First, Middle Initial)					Date of Disbursement
C.	Citizens for Kevin Bacon					
	Mailing Address 5325 Ponderosa Drive					07 17 2009
	City	State	Zip Code			FEC Identification Number
	Columbus Purpose of Disbursement	OH	43231			
				Kev	/in B	C 011
	Candidate Name			Cate	gory/	Transaction ID : 30264421 Amount of Each Disbursement this Period
	, Bacon, Kevin, , OH Rep.			Ту		
		ment For: 2				250.00
	Senate X	Primary	General			
	State: S District: OH	Other (spec	uny) ▼			Memo Item
s	UBTOTAL of Disbursements This Page (optional).				►	3250.00
т	OTAL This Period (last page this line number only	/)			🕨	

	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE (check only	
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	21b 28a	22 23 26 27 28b 28c X 29 30b
	ny information copied from such Reports and State for commercial purposes, other than using the nati				
\backslash	NAME OF COMMITTEE (In Full)				
	UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	alth)	
	Full Name (Last, First, Middle Initial)				
Α.	UnitedHealth Group Inc Political Act	ion Comr	mittee of low	a	Date of Disbursement
	Mailing Address 9900 Bren Road East				07 / D D / Y Y Y Y 22 / 2009
	City Minnetonka	State MN	Zip Code 55343		FEC Identification Number
	Purpose of Disbursement		00040		C 011
				Fundinç	Transaction ID : 30302965
	Candidate Name			Category/	Amount of Each Disbursement this Period
	Office Sought: House Disburse	ment For:		Туре	1000.00
	Senate	Primary	General		
	President	Other (spe			Memo Item
	State: District:				
B.	Full Name (Last, First, Middle Initial)				Date of Disbursement
. ت	Paula Brooks Committee				
	Mailing Address PO Box 1446				07 22 2009
	City Columbus	State OH	Zip Code 43216		FEC Identification Number
	Purpose of Disbursement	011	75210		C 011
				Paula B	Transaction ID : 30303187
	Candidate Name			Category/	Amount of Each Disbursement this Period
	, Brooks, Paula, , Office Sought: House Disburse	ment For:	2010	Туре	1000.00
	Senate	Primary	General		
	President	Other (spe	cify)		Memo Item
	State: District:				
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement
<u>.</u>	Citizens to Elect John Patrick Car	ney			
	Mailing Address 357 E Torrence Road				07 22 2009
	City	State	Zip Code		FEC Identification Number
	Columbus Purpose of Disbursement	ОН	43214		
	Purpose of Disbursement			John Ca	C 011
	Candidate Name			Category/	Transaction ID : 30303287 Amount of Each Disbursement this Period
	, Carney, John, , OH Rep.			Туре	
	Office Sought: House Disburse Senate	ment For:			500.00
	President	Primary Other (spe	cify) ▼		
	State: H District: OH	- (-150	<i>,</i> , ,		Memo Item
s	UBTOTAL of Disbursements This Page (optional).				2500.00
Ĕ					
Т	OTAL This Period (last page this line number only	′)		••••••	

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 165 OF 174
ITEMIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c X 29 30b
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 I	PAC (Un	ited for Heal	th)	
Full Name (Last, First, Middle Initial) A. UnitedHealth Group Inc, PAC of Geo	orgia			Date of Disbursement
Mailing Address 9900 Bren Road East				M = M / D = D / Y = Y = Y = Y Y 08 21 2009
City Minnetonka	State MN	Zip Code 55343		FEC Identification Number
Purpose of Disbursement				C 011
Candidate Name			Fundinç Category/	Transaction ID : 30443985 Amount of Each Disbursement this Period
			Туре	250.00
Office Sought: House Disburser Senate President Image: Constraint of the senate of the senat of the senate of the senate of the senate of the senat of the se	ment For: Primary Other (spec	General cify) ▼		
State: District:	· ·	• •		Memo Item
 Full Name (Last, First, Middle Initial) B. United for Health PAC of Illinois 				Date of Disbursement
Mailing Address 9900 Bren Road East				09 18 2009
City Minnetonka Purpose of Disbursement	State MN	Zip Code 55343		FEC Identification Number
Candidate Name			Fundinç Category/	C 011 Transaction ID : 30590476 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate	Primary	General	Туре	250.00
State: District:	Other (spec	cify)		Memo Item
Full Name (Last, First, Middle Initial)				
C. Republican House Victory Commit	tee			Date of Disbursement
Mailing Address PO Box 11494				10 07 2009
City Tempe	State AZ	Zip Code 85284		FEC Identification Number
Purpose of Disbursement			State P	C 011 Transaction ID : 30636828
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser Senate Disburser	Primary	General		2500.00
State: District:	Other (spec	спу) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)				3000.00

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 166 OF 174
ITEMIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page	(check only 21b 28a	one) 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 name				on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)				
UnitedHealth Group Incorporated	PAC (Ur	ited for Heal	th)	
Full Name (Last, First, Middle Initial)				
A. Republican Senate Victory Committee	ee			Date of Disbursement
Mailing Address PO Box 11494				10 / D D / Y Y Y Y 10 07 2009
5	State	Zip Code		FEC Identification Number
Tempe	AZ	85284		
Purpose of Disbursement			State P	
Candidate Name			Category/	Transaction ID : 30636877 Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For:		Туре	2500.00
Senate	Primary	General		
State: District:	Other (spec	cify) ▼		Memo Item
Full Name (Last, First, Middle Initial)				
B. Mentel for Council Committee				Date of Disbursement
Mailing Address 3886 N High St				10 / D D / Y Y Y Y 10 07 2009
City Columbus	State OH	Zip Code 43214		FEC Identification Number
Purpose of Disbursement		43214	Mike M	C 011
Candidate Name			Category/	Transaction ID : 30636947 Amount of Each Disbursement this Period
, Mentel, Mike, ,			Туре	
ů – Elektrik	ment For: 2 Primary	2010 General		2500.00
President	Other (spec			Mama Item
State: District:				Memo Item
Full Name (Last, First, Middle Initial)				Date of Disbursement
C. Paley for Columbus				
Mailing Address 668 Bellamy Place				10 07 2009
2	State	Zip Code		FEC Identification Number
Columbus Purpose of Disbursement	OH	43213		
			Eileen F	C 011 Transaction ID : 30636952
Candidate Name			Category/	Amount of Each Disbursement this Period
, Paley, Eileen, Y.,	. –		Туре	1000.00
Office Sought: House Disburse Senate V	ment For: 2 Primary	2010 General		7 7 7
President	Other (spec			Memo Item
State: District:				
SUBTOTAL of Disbursements This Page (optional).			····· •	6000.00
TOTAL This Period (last page this line number only	/)		····· ►	, ,

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 167 OF 174
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	ited for Heal	th)	
Full Name (Last, First, Middle Initial)				
A. Paula Brooks Committee				Date of Disbursement
Mailing Address PO Box 1446				10 / D D / Y Y Y Y Y 2009
City	State	Zip Code		FEC Identification Number
Columbus	OH	43216		
Purpose of Disbursement			Paula E	C 011
Candidate Name				Transaction ID : 30636960
, Brooks, Paula, ,			Category/ Type	Amount of Each Disbursement this Period
	ment For: 2	2010	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1000.00
Senate	Primary	General		
State: District:	Other (spec	cify) 🔻		Memo Item
Full Name (Last, First, Middle Initial)				
B. A. Troy Miller for Columbus				Date of Disbursement
Mailing Address 1029 Northfield Place North				10 / D D / Y Y Y Y 10 07 2009
City	State	Zip Code		FEC Identification Number
Reynoldsburg Purpose of Disbursement	OH	43068		
r upose or Disbursement			A. Mille	C 011
Candidate Name			Category/	Transaction ID: 30636969 Amount of Each Disbursement this Period
, Miller, A., Troy,			Type	
	ment For: 2	2010		1000.00
	Primary	General		
State: District:	Other (spec	CITY)		Memo Item
Full Name (Last, First, Middle Initial)				
C. Berding for Cincinnati Committee				Date of Disbursement
Mailing Address 5001 Shatuc Ave.				10 / D D / Y Y Y Y Y 10 07 2009
City	State	Zip Code		FEC Identification Number
Cincinnati	OH	45208		
Purpose of Disbursement			loff Dor	C 011
Candidate Name			Jeff Ber	Transaction ID : 30636972
, Berding, Jeff, ,			Category/ Type	Amount of Each Disbursement this Period
-	ment For: 2	2010	.,,,,,	500.00
Senate	Primary	General		
President	Other (spec	cify) 🔻		Memo Item
State: District:				_
SUBTOTAL of Disbursements This Page (optional).			••••••	2500.00
TOTAL This Period (last page this line number only)		····· ►	, ,

ITEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: [PAGE TEB OF TEB O
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 PAC (United for Health) Full Name (Last, First, Middle Initial) A. Citizens for Tavares Mailing Address 1257 Medford Road City Columbus Purpose of Disbursement Candidate Name , Tavares, Charleta, B, Office Sought: House President State Disbursement For: 2010 State: Disbursement For: 2010 State: Disbursement For: 2010 State: District: Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City Candidate Name Candidate Name Typose of Disbursement City State City Cate of Disbursement City Cate of Disbursement City Cate of Disbursement City Cate of Disbursement City Cate of Disburse
JunitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. Citizens for Tavares Mailing Address 1257 Medford Road City Columbus Purpose of Disbursement Candidate Name Tavares, Charleta, B, Office Sought: House President State: Disbursement For: 2010 Senate Primary Other (specify) Memo Item Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Date of Disbursement Mailing Address 1465 E Broad St City City State City State City State City Other (specify) Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City City State Colombus Priscilla Purpose of Disbursement Priscilla Candidate Name Priscilla Candidate Name Priscilla,
Full Name (Last, First, Middle Initial) A. Citizens for Tavares Mailing Address 1257 Medford Road Image: Colore of Disbursement City State Zip Code Columbus OH Zip Code Purpose of Disbursement Charlet: Candidate Name Charlet: , Tavares, Charleta, B, Office Sought: Office Sought: House President Disbursement For: 2010 State: District: Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City City State Colombus OH Purpose of Disbursement OH City State Other (specify) Memo Item Priscilla Tyson FEC Identification Number City Colombus Purpose of Disbursement OH City State Zip Code OH Zip Code OH Gategory/ Type Citil Candidate Name OH <t< td=""></t<>
A. Citizens for Tavares Date of Disbursement Mailing Address 1257 Medford Road Image: City Columbus City Columbus OH Zip Code 43209 Purpose of Disbursement Charleti Candidate Name Tavares, Charleta, B, Charleti Office Sought: House Disbursement For: 2010 Senate President District: Full Name (Last, First, Middle Initial) Date of Disbursement B. Citizens for Priscilla Tyson Date of Disbursement Mailing Address 1465 E Broad St City Colombus City Colombus OH Purpose of Disbursement Priscilla City Colombus OH Purpose of Disbursement Priscilla City Colombus OH Purpose of Disbursement Priscilla Purpose of Disbursement Priscilla City Colombus OH Purpose of Disbursement Priscilla Candidate Name Type, Transaction ID : 30638978 Amount of Each Disbursement this Period
Citizens for Paveles Mailing Address 1257 Medford Road City State Zip Code Columbus OH 43209 Purpose of Disbursement Charlet: Candidate Name Category/ , Tavares, Charleta, B, Disbursement For: 2010 Office Sought: Senate President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City State City State City State City State City State OH 43205 Purpose of Disbursement City State City State Purpose of Disbursement Purpose of Disbursement Purpose of Disbursement Purpose of Disbursement Priscilla Candidate Name , Tyson, Priscilla, ,
Mailing Address 1257 Medford Road 10 07 209 City State Zip Code 43209 FEC Identification Number Purpose of Disbursement Charlet: Category/ Category/ Transaction ID : 30636975 Citizens (Last, First, Middle Initial) Senate Priscilla Primary General Memo Item Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Date of Disbursement 209 Mailing Address 1465 E Broad St City State Zip Code 43205 FEC Identification Number City State Disbursement City 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0
Columbus OH 43209 Purpose of Disbursement Charlet: Candidate Name Charlet: , Tavares, Charleta, B, Disbursement For: 2010 Office Sought: House President Primary General Other (specify) V Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City State OH 43205 Purpose of Disbursement Priscilla Candidate Name Category/ Type , Tyson, Priscilla, , Name
Purpose of Disbursement Charlet: Candidate Name Charlet: , Tavares, Charleta, B, Disbursement For: 2010 Office Sought: House President Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City State Colombus OH Purpose of Disbursement Priscilla Candidate Name Category/ Type Transaction ID : 30636973 Amount of Each Disbursement
Candidate Name , Tavares, Charleta, B, Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City City City City Colombus Purpose of Disbursement Purpose of Disbursement Candidate Name , Tyson, Priscilla, , Candidate Name
Candidate Name Category/ Type Amount of Each Disbursement this Period Office Sought: House Disbursement For: 2010 Senate Primary General Memo Item State: District: Memo Item Full Name (Last, First, Middle Initial) Date of Disbursement B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St Zip Code City State Purpose of Disbursement Priscilla Purpose of Disbursement Priscilla Candidate Name Priscilla , Tyson, Priscilla, , State
, Tavares, Charleta, B, Type Office Sought: House Disbursement For: 2010 Senate Primary General President Other (specify) Memo Item State: District: Memo Item Full Name (Last, First, Middle Initial) Date of Disbursement B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St Distate City State Colombus OH Purpose of Disbursement Priscilla Candidate Name Priscilla, , , Tyson, Priscilla, , Category/
Senate President Primary General President Other (specify) Memo Item State: District: Memo Item Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address 1465 E Broad St City State Zip Code Colombus OH 43205 Purpose of Disbursement Priscilla Candidate Name Category/ , Tyson, Priscilla, , State
State: District: Full Name (Last, First, Middle Initial) B. Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City State Colombus Purpose of Disbursement Candidate Name , Tyson, Priscilla, ,
B. Citizens for Priscilla Tyson Date of Disbursement Mailing Address 1465 E Broad St Image: City Colombus OH disputsion City Colombus Purpose of Disbursement State OH disputsion Candidate Name Tyson, Priscilla Tyson, Pr
Citizens for Priscilla Tyson Mailing Address 1465 E Broad St City State Zip Code Colombus OH 43205 Purpose of Disbursement Priscilla Candidate Name Category/ Type , Tyson, Priscilla, , Category/ Type
City State Zip Code Colombus OH 43205 Purpose of Disbursement Priscilla Candidate Name Category/ , Tyson, Priscilla, , Category/
Colombus OH 43205 Purpose of Disbursement Priscilla Candidate Name Category/ Type , Tyson, Priscilla, , Category/ Type
Purpose of Disbursement Priscilla Candidate Name Category/ , Tyson, Priscilla, , Category/
Candidate Name , Tyson, Priscilla, , Category/ Type
, Tyson, Priscilla, , Type
Office Sought House Disbursement For: 2010 1000.00
Senate Primary General
State: District: Other (specify) Memo Item
Full Name (Last, First, Middle Initial)
C. Friends of John O'Grady
Mailing Address PO Box 1355
City State Zip Code FEC Identification Number
Columbus OH 43216
Candidate Name Transaction ID : 30636985 Candidate Name Category/
, O'Grady, John, , Type
Office Sought: House Disbursement For: 2010 750.00
Senate Primary General
State: District: Other (specify) ▼ Memo Item
SUBTOTAL of Disbursements This Page (optional)
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 169 OF 174		
ITEMIZED DISBURSEMENTS	for each	Use separate schedule(s) for each category of the Detailed Summary Page		one) 22 23 26 27 28b 28c X 29 30b		
Any information copied from such Reports and Sta or for commercial purposes, other than using the				on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)						
/ UnitedHealth Group Incorporate	d PAC (U	nited for Hea	lth)			
Full Name (Last, First, Middle Initial)				Date of Disbursement		
A. Hearcel Craig for Council				M M / D D / Y Y Y		
Mailing Address 550 E Walnut St	Mailing Address 550 E Walnut St					
City Columbus	State OH	Zip Code 43214		FEC Identification Number		
Purpose of Disbursement		40214		C 011		
			Hearcel	Transaction ID : 30636996		
Candidate Name			Category/	Amount of Each Disbursement this Period		
, Craig, Hearcel, F,			Туре	1000.00		
Office Sought: House Disbu						
State: District:		ecity) V		Memo Item		
Full Name (Last, First, Middle Initial)						
B. Mallory for Citizens				Date of Disbursement		
Mailing Address 907 Dayton Street	Mailing Address 907 Dayton Street					
City Cincinnati	State OH	Zip Code 45214		FEC Identification Number		
Purpose of Disbursement		Mark M	C 011			
Candidate Name	allory, Mark, , Category/ Type ce Sought: House Disbursement For: 2010			Transaction ID : 30637006 Amount of Each Disbursement this Period		
, Mallory, Mark, ,						
				500.00		
Senate President	Primary	General				
State: District:	Other (sp	ecity)		Memo Item		
Full Name (Last, First, Middle Initial)				Dete of Disburgement		
State Representative Jeff Greer				Date of Disbursement		
Mailing Address 2125 Hwy 79				10 / D D / Y Y Y Y 2009		
City	State	Zip Code		FEC Identification Number		
Brandenburg Purpose of Disbursement	KY	40108		C 011		
Jeff Gre						
Candidate Name	Categor			Transaction ID : 30640479 Amount of Each Disbursement this Period		
, Greer, Jeff, , KY Rep.	, Jeff, , KY Rep. Type					
Office Sought: House Disbursement For: 2010 Senate Primary General President Other (specify) ▼				500.00		
				8		
State: H District: KY	Other (sp	eeny) 🔻		Memo Item		
				2000.00		
SUBTOTAL of Disbursements This Page (optiona	al)		••••••	2000.00		
TOTAL This Period (last page this line number o	nly)		····· ►			

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 170 OF 174		
ITEMIZED DISBURSEMENTS			Use separate schedule(s) for each category of the		/ one)		
			Summary Page	21b 28a	22 23 26 27 28b 28c X 29 30b		
	y information copied from such Reports and State for commercial purposes, other than using the national states and the states of				on for the purpose of soliciting contributions		
\setminus	NAME OF COMMITTEE (In Full)						
	UnitedHealth Group Incorporated	PAC (Un	ited for Hea	lth)			
<u> </u>	Full Name (Last, First, Middle Initial)						
Α.	Kentucky Senate Republican Cauco		Date of Disbursement				
	Mailing Address PO Box 1068		10 09 2009				
	City	State	Zip Code		FEC Identification Number		
	Frankfort Purpose of Disbursement	KY	40602				
				Senate			
	Candidate Name			Category/	Transaction ID : 30640480 Amount of Each Disbursement this Period		
	2 /// 2			Туре	2500.00		
	Office Sought: House Disburse Senate	ment For: Primary	General		2300.00		
	President	Other (spec			Memo Item		
	State: District:	1					
D	Full Name (Last, First, Middle Initial)				Data of Disburgement		
B.	Committee to Elect Kathy Angere	r			Date of Disbursement		
	Mailing Address PO Box 157				10 09 2009		
	City	State MI	Zip Code 48131		FEC Identification Number		
	Dundee Purpose of Disbursement		C 011				
		Kathy A					
	Candidate Name , Angerer, Kathy, , MI Rep. Office Sought: House Disbursement For: 2010				Transaction ID: 30640489 Amount of Each Disbursement this Period		
					500.00		
	Senate Primary General President Other (specify)						
					Memo Item		
	State: H District: MI				1		
C.	Full Name (Last, First, Middle Initial)	٨			Date of Disbursement		
	- UnitedHealth Group Inc PAC of PA				M M / D D / Y Y Y Y		
	Mailing Address 9900 Bren Road East				10 09 2009		
	City	State	Zip Code		FEC Identification Number		
	Minnetonka	MN	55343				
	Purpose of Disbursement	Fundinç	C 011				
	Candidate Name	Category/ Type	Transaction ID : 30640549 Amount of Each Disbursement this Period				
	Office Sought: House Disburse	3000.00					
	Senate Primary General President Other (specify) ▼						
	State: District:		ziry) ▼		Memo Item		
s	UBTOTAL of Disbursements This Page (optional).			••••••	6000.00		
-	OTAL This Period (last page this line number only	0					
1 '	THE THE TOTOL (LOST PAGE THE HIT HE TURNET ONLY	,		••••••			

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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 171 OF 174
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check only 21b 28a	one) 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				
NAME OF COMMITTEE (In Full)				
UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	th)	
Full Name (Last, First, Middle Initial) A. United for Health of Texas (UnitedH	ealth Gro	oup Inc, PAC c	of Texas	Date of Disbursement
Mailing Address 9900 Bren Road East		10 / D D / Y Y Y Y 10 19 2009		
City Minnetonka	State MN	Zip Code 55343		FEC Identification Number
Purpose of Disbursement			State P.	C 011
Candidate Name			Category/ Type	Transaction ID : 30722932 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General	Турс	15000.00
State: District:	Other (spe	(Ciry) V		Memo Item
Full Name (Last, First, Middle Initial) B. Friends of John McComish Mailing Address 4463 East Desert View Drive		Date of Disbursement		
City Phoenix	State AZ	Zip Code 85044		FEC Identification Number
Purpose of Disbursement	Purpose of Disbursement John M			
Candidate Name	Category/	Transaction ID : 30885455 Amount of Each Disbursement this Period		
	McComish, John, , AZ Rep. Type Office Sought: House Disbursement For: 2010			
State: H District: AZ	Primary Other (spe	General ecify)		Memo Item
Full Name (Last, First, Middle Initial)				—
C. United for Health PAC of Tennessee				Date of Disbursement
Mailing Address 9900 Bren Road East				12 07 2009
City Minnetonka	State MN	Zip Code 55343		FEC Identification Number
Purpose of Disbursement Candidate Name Category/ Type				C 011 Transaction ID : 30942929 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	Sought: House Disbursement For: Senate Primary General			18700.00 Memo Item
State: District:				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number onl				33900.00

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 172 OF 174		
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check 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			d by any pers	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)						
angle UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	th)			
Full Name (Last, First, Middle Initial)						
A. UnitedHealth Group Inc PAC of PA				Date of Disbursement		
Mailing Address 9900 Bren Road East		12 14 2009				
City	State	Zip Code		FEC Identification Number		
Minnetonka Burnoso of Dichursomont	MN	55343				
Purpose of Disbursement				C 011		
Candidate Name			Cotogoriul	Transaction ID : 31002935		
			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse	ement For:	I		1500.00		
Senate	Primary	General				
President	Other (spe	cify) 🔻		Memo Item		
State: District:				lend .		
Full Name (Last, First, Middle Initial)				Date of Disbursement		
^{B.} United for Health PAC of Tenness	see					
Mailing Address 9900 Bren Road East				12 14 Y Y Y Y Y 12 14 2009		
City	State	Zip Code		FEC Identification Number		
Minnetonka Burnoso of Disbursomont	MN	55343		C 011		
i alpose of Disputsement	urpose of Disbursement					
Candidate Name Category/ Type				Transaction ID : 31002936 Amount of Each Disbursement this Period		
				Amount of Each Disbursement this Pendu		
Office Sought: House Disburse						
President	Other (spe	cify)		Memo Item		
State: District:						
Full Name (Last, First, Middle Initial) C. Alon Somhern for Someth						
^{C.} Alan Sanborn for Senate						
Mailing Address 27140 Irwin Road	12 15 2009					
City	State	Zip Code		FEC Identification Number		
Richmond	MI	48062				
Purpose of Disbursement	Alan Sa Adidate Name Category/					
Candidate Name						
, Sanborn, Alan, , MI Sen.						
	ment For:	2010	1300	250.00		
Senate						
President				Memo Item		
State: S District: MI						
SUBTOTAL of Dichursomente This Base (anticas)				2750.00		
SUBTOTAL of Disbursements This Page (optional).			••••••			
TOTAL This Period (last page this line number only	()					

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 173 OF 174	
ITEMIZED DISBURSEMENTS	for each	Use separate schedule(s) for each category of the Detailed Summary Page		one) 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				on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)					
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	th)		
Full Name (Last, First, Middle Initial) A. Senate Republican Campaign Com		Date of Disbursement			
Mailing Address P.O. Box 12023		12 / D D / Y Y Y Y 15 / 2009			
City Lansing	State MI	Zip Code 48901		FEC Identification Number	
Purpose of Disbursement				C 011	
Candidate Name			Category/ Type	Transaction ID : 31035979 Amount of Each Disbursement this Period	
Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General		5000.00	
State: District:		y / v		Memo Item	
 Full Name (Last, First, Middle Initial) B. Republican Senate Victory Comm 		Date of Disbursement			
Mailing Address PO Box 11494	Mailing Address PO Box 11494				
City Tempe Purpose of Disbursement	State AZ	Zip Code 85284		FEC Identification Number	
Candidate Name	ndidate Name Category/				
Senate	ement For: Primary	General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1250.00	
State: District:	Other (spec	cify)		Memo Item	
Full Name (Last, First, Middle Initial) C. Republican House Victory Commi		Date of Disbursement			
Mailing Address PO Box 11494		12 15 Y Y Y Y Y 12 15 2009			
City Tempe	State AZ	Zip Code 85284		FEC Identification Number	
Purpose of Disbursement Candidate Name Category/ Type				C 011 Transaction ID : 31037879 Amount of Each Disbursement this Period	
Senate	Primary	General		1250.00	
State: District:	Other (spe	спу) 🔻		Memo Item	
SUBTOTAL of Disbursements This Page (optional).				7500.00	
TOTAL This Period (last page this line number only	()		▶		

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 174 OF 174		
ITEMIZED DISBURSEMENTS	for each	Use separate schedule(s) for each category of the		one) 22 23 26 27		
	Detailed	Summary Page	21b 28a	28b 28c X 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na				on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)						
/ UnitedHealth Group Incorporated	PAC (Ur	nited for Heal	lth)			
Full Name (Last, First, Middle Initial)				Date of Disbursement		
A. Friends of Roger Kahn for Senate	Friends of Roger Kahn for Senate					
Mailing Address P.O. Box 1627		12 16 Y Y Y Y Y 12 16				
City	State MI	Zip Code		FEC Identification Number		
Saginaw Purpose of Disbursement	IVII	48605		C 011		
			Roger ŀ	Transaction ID : 31054482		
Candidate Name			Category/	Amount of Each Disbursement this Period		
, Kahn, Roger, , MI Sen. Office Sought: House Disburse	ement For: ;	2010	Туре	400.00		
Senate	Primary	General				
State: S District: MI	Other (spe	cify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)						
^{B.} Friends of Roger Kahn for Senate	;			Date of Disbursement		
Mailing Address P.O. Box 1627						
City	State	Zip Code		FEC Identification Number		
Saginaw Purpose of Disbursement	Saginaw MI 48605					
Candidate Name Roger K , Kahn, Roger, , MI Sen. Category/ Type Office Sought: House				C 011 Transaction ID : 31064681		
				Amount of Each Disbursement this Period		
				200.00		
÷	Senate Primary General President Other (specify)					
				Memo Item		
State: S District: MI Full Name (Last, First, Middle Initial)						
C.	Date of Disbursement					
				M M / D D / Y Y Y Y		
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	1 1 7 1 1 7 1 1 7					
Senate Primary General President Other (specify) ▼						
State: District:		,, , , , , , , , , , , , , , , , , ,		Memo Item		
			I	000.00		
SUBTOTAL of Disbursements This Page (optional)			····· ►	600.00		
TOTAL This Period (last page this line number only	/)		••••••	79250.00		