

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

ADDRESS (number and street)

9900 Bren Road East

Check if different  
than previously  
reported. (ACC)

Minnetonka

MN

55343-9664

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00274431

3. IS THIS  
REPORTNEW  
(N)

OR

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)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☒ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

11

06

2018

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

10

01

2018

through

M M M / D D D / Y Y Y Y Y Y

10

17

2018

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

Type or Print Name of Treasurer

Sherwood, Susan, , ,

Signature of Treasurer

Sherwood, Susan, , ,

Date

M M M / D D D / Y Y Y Y Y Y

10

25

2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 10 / 01 / 2018

To:

 M M / D D / Y Y Y Y Y  
 10 / 17 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y 2018</span>		<span style="border: 1px solid black; padding: 2px;">621080.35</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">430012.86</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">90500.10</span>	<span style="border: 1px solid black; padding: 2px;">1501767.59</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">520512.96</span>	<span style="border: 1px solid black; padding: 2px;">2122847.94</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">78000.00</span>	<span style="border: 1px solid black; padding: 2px;">1680334.98</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">442512.96</span>	<span style="border: 1px solid black; padding: 2px;">442512.96</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



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](http://www.fec.gov)

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	88154.52	1352214.82
(ii) Unitemized .....	2345.58	143921.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	90500.10	1496136.76
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2080.83
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	90500.10	1498217.59
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	1050.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	90500.10	1501767.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	90500.10	1501767.59

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29000.00	839000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	549.98
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	549.98
29. Other Disbursements (Including Non-Federal Donations).....	49000.00	840785.00
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
(c) Total Federal Election Activity (add 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)) ..	78000.00	1680334.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	78000.00	1680334.98

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	90500.10	1498217.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	549.98
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	90500.10	1497667.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGUIRE, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4326.85

Date of Receipt

10 / 01 / 2018

Transaction ID : 42687524

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Alderman, Frank, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MedExpress

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 15 / 2018

Transaction ID : 42803244

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BERNARD, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Chief Tech Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 15 / 2018

Transaction ID : 42803291

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

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

12500.00

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

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

FOR LINE NUMBER: PAGE 7 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STREB, DEBORAH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1159794152183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAUDIO, JOSEPH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1159811852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WICHMANN, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1159814752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

398.60

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEAD, BRUCE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1159816152183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PENSHORN, JOHN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
SVP UnitedHlth Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1159816952183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KALLMEYER, PAUL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2214.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1159817452183

Amount of Each Receipt this Period

130.95

☐ Memo Item

P/R Deduction (\$130.95 Bi-Weekly)

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

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

515.55



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. QUIRK, THOMAS, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Care Initiv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1159819152183

Amount of Each Receipt this Period

16.15

☐ Memo Item

P/R Deduction (\$16.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARATZ, MEREDITH, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1159820052183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FALK, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1159820252183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

44.19

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

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

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

FOR LINE NUMBER: PAGE 10 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MIGLIORI, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
EVP, UHG Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1159827452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUENEMANN, BARBARA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Cust Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1159828752183**

Amount of Each Receipt this Period

11.54

☐ Memo Item

P/R Deduction (\$11.54 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOCK, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1551128952183**

Amount of Each Receipt this Period

11.54

☐ Memo Item

P/R Deduction (\$11.54 Bi-Weekly)

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

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

215.38

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

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

FOR LINE NUMBER: PAGE 11 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTEO, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Chief Client Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1551133452183**

Amount of Each Receipt this Period

115.38

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARR, ANTHONY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
AES Natl VP SIs & Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1554323452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, KATHERINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1554324352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

499.98

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

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

FOR LINE NUMBER: PAGE 12 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CRAIG, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1575957352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ERICKSON, KAREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Optum Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1575957652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONFILETTO, ERNEST, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Prgrms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1575958152183**

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

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

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

461.52

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

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

FOR LINE NUMBER: PAGE 13 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VALENTA, LEE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1575958552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELLY, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1575959752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAHILL, LAURA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Solution Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1580863652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

398.64

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

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

FOR LINE NUMBER: PAGE 14 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBB, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP UnitedHlth Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1580865352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGHES, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP COO of Human Capital

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3638.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596304152183**

Amount of Each Receipt this Period

226.00

☐ Memo Item

P/R Deduction (\$226.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, THAD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mkt Group Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596304352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

610.60

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHUMACHER, DANIEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Mkt Grp Pres & COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1596305452183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THEISEN, SCOTT, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
SVP Bus Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1596305652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Pharmacy Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

622.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1596309352183

Amount of Each Receipt this Period

62.92

☐ Memo Item

P/R Deduction (\$62.92 Bi-Weekly)

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

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

447.52



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

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

FOR LINE NUMBER: PAGE 16 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLYNN, DIANE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Regn Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596309752183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIDSON, TRACY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596311652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNLOP, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596312352183**

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

331.30



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

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

FOR LINE NUMBER: PAGE 17 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARCIA, STEVAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596312952183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEUMANN, KURT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596313752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALLATT, KATHLEEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596315452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

230.76

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

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

FOR LINE NUMBER: PAGE 18 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSENTHAL, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Pres Ntwk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596317352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTH, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP, Hlth Advancement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596317452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STURKEY, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596318452183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

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

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

423.60

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

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

FOR LINE NUMBER: PAGE 19 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TODD, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1596319052183**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DODDY, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Info Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1600597352183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MICHAUX, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP GM PCM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1600598552183**

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

164.00

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

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

FOR LINE NUMBER: PAGE 20 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDY, LEWIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Clin Advancement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1600598752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, MATTHEW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
CEO Ancillary & Ind/Sgt CAO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1602669952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALONEY, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1613243552183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

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

480.75

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CELLI, PAT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1613243752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KENNEDY, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1653443152183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELLAMY, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP SIs Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1653444352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

404.60

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

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

FOR LINE NUMBER: PAGE 22 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEVIGNY, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Director Tech Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1653445752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Proj-Prgm Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1653445852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARCHER, LORI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Prov Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1806750152183**

Amount of Each Receipt this Period

11.54

☐ Memo Item

P/R Deduction (\$11.54 Bi-Weekly)

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

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

64.04

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

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

FOR LINE NUMBER: PAGE 23 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EMERSON, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum360 Services Inc

Occupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1806750352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ULLOA, SHAUNA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
NA VP Clnt Relationship

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1832379152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANDERSON, CATHERINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Strat Initiv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1903550752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

398.64



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

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

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUFEK, ROBERT, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Dir Info Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1903577152183

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, CHRISTOPHER, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1903591152183

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PENN, STEVEN, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR1903612952183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

78.00



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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANTELLI, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1903622052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEERUP, LORI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Human Capital Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1903628652183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEYMOUTH, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3381.84

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR1903636952183**

Amount of Each Receipt this Period

269.00

☐ Memo Item

P/R Deduction (\$269.00 Bi-Weekly)

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

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

475.30

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

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRYAN, KATHIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mktg Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119469452183**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, COLLEEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119469952183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEMBROSKI, TODD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Act Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119472852183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 27 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILDERNICK, AMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119475252183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119476752183**

Amount of Each Receipt this Period

135.00

☐ Memo Item

P/R Deduction (\$135.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARLAN, MADELINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119476952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

169.04

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

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

FOR LINE NUMBER: PAGE 28 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HO, SAMUEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119477952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANNE, KATHLEEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.65

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119479652183**

Amount of Each Receipt this Period

555.55

☐ Memo Item

P/R Deduction (\$555.55 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNUTSON, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119480252183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

762.85

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

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

FOR LINE NUMBER: PAGE 29 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACEMEADOR, HEATHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119482552183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NYGARD, KEITH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Reg Adhr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119485052183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLLMANNWAGNER, TRACY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir SIs Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119485252183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 30 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAXSON, LYNDA A, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNITED HEALTHCARE SVS INC

Occupation (for Individual)  
Sr Field Acct Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119485852183**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETE, DIANA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Clin Qlty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119486352183**

Amount of Each Receipt this Period

12.00

☐ Memo Item

P/R Deduction (\$12.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERS, MICHELLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Act Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119486452183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

52.00

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

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

FOR LINE NUMBER: PAGE 31 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PITTMAN, AUSTIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119486752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PROCHNOW, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119487252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICCIUTI, SHARON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Clin Qlty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2119487952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

220.34



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TUCKER, STEVEN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2119492052183

Amount of Each Receipt this Period

96.00

☐ Memo Item

P/R Deduction (\$96.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANASTEN, SUSAN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
M&R Telesls Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2119492652183

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WESTPHAL, SCOTT, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Act Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2119493252183

Amount of Each Receipt this Period

11.54

☐ Memo Item

P/R Deduction (\$11.54 Bi-Weekly)

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

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

147.54



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WRIGHT, GREGORY, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2119494152183

Amount of Each Receipt this Period

646.00

☐ Memo Item

P/R Deduction (\$646.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNG, GEORGE, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2119494452183

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASON, JOHN, J, ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3653.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2126373852183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

853.30

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

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

FOR LINE NUMBER: PAGE 34 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURKE, FORREST, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Unit CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2133132452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLEMAN, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2133132552183**

Amount of Each Receipt this Period

12.00

☐ Memo Item

P/R Deduction (\$12.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUMMINGS, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2133132652183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

219.30

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

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

FOR LINE NUMBER: PAGE 35 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HULTGREN, BROR, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Unit CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2133133252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORISATO, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Pres Insurance Sols

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2133133852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NETTLETON, KIMBERLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2133133952183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

399.60

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

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

FOR LINE NUMBER: PAGE 36 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUTNAM, T JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mkt Group CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2133134252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALKENBERG, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2298.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2145728452183**

Amount of Each Receipt this Period

116.92

☐ Memo Item

P/R Deduction (\$116.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUMMEL, LEAH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

452.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2145729552183**

Amount of Each Receipt this Period

91.30

☐ Memo Item

P/R Deduction (\$91.30 Bi-Weekly)

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

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

400.52

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

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

FOR LINE NUMBER: PAGE 37 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, DANNETTE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2145729952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, KURT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3271.86

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2203967552183**

Amount of Each Receipt this Period

288.00

☐ Memo Item

P/R Deduction (\$288.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEAULE, JEAN-FRANCOIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Hlth Advancement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2225813652183**

Amount of Each Receipt this Period

115.38

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

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

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

595.68

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARRUTH, NANCY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Principal Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2225818452183

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGUIRE, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4423.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2225818852183

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RYAN, JOHN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2225819652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

303.45

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

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

FOR LINE NUMBER: PAGE 39 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAILOR, ROY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2225819752183**

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENMAN, DEE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2231350252183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONNLY, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Chief Tech Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2247625852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

283.21



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

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

FOR LINE NUMBER: PAGE 40 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARCIONE, JOSEPH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1154.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2247626852183**

Amount of Each Receipt this Period

57.70

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANTOLA, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2247627052183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OBRIEN, DENNIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2247627352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

289.00



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

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

FOR LINE NUMBER: PAGE 41 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERNEY, JEFFERY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2247627452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARODIA, SANJAY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.82

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2247627852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRINCE, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2259738452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

423.06

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

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

FOR LINE NUMBER: PAGE 42 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRONN, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2270522952183**

Amount of Each Receipt this Period

57.69

☐ Memo Item

P/R Deduction (\$57.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRY, CAROLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Proj Mgr II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402315752183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRASCINO, MJ, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Mktg Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402316552183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

85.69

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

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

FOR LINE NUMBER: PAGE 43 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEPLEYCARRIER, ANGELA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402317752183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVIBAUMGARTEN, MARILYN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402317952183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGAN, JAKE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
PS Sr Sls Exe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402318252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

232.30

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGRATH, STACY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2402318552183

Amount of Each Receipt this Period

17.12

☐ Memo Item

P/R Deduction (\$17.12 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSSI, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2402319652183

Amount of Each Receipt this Period

13.87

☐ Memo Item

P/R Deduction (\$13.87 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARRINGER, PAUL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

923.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2402444352183

Amount of Each Receipt this Period

46.15

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

77.14

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

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

FOR LINE NUMBER: PAGE 45 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRANLEY, SHELLEY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402444452183**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BECKER, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402445152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLEMAN, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mkt Grp SVP, Human Capital

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402445252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

409.60

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

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

FOR LINE NUMBER: PAGE 46 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIGA, JOY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2402446252183**

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALEXANDER, CORY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
EVP Corp Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2405428852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAELENS, KAREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2408544852183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

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

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

242.30

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

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

FOR LINE NUMBER: PAGE 47 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEE, KATHLYN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP State Sls OptumI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2408545052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CORZINE, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

766.81

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437119752183**

Amount of Each Receipt this Period

38.84

☐ Memo Item

P/R Deduction (\$38.84 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FUENTEVILLA, ANA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Seg Chief Med Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437119852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

423.44



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

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

FOR LINE NUMBER: PAGE 48 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGAN, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437120052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEISS, JACK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Shared Svs Regn CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437120552183**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BALTHAZOR, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437120752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

409.60



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

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

FOR LINE NUMBER: PAGE 49 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NESS, LAURA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437121552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COSGRIFF, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437121652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDELSON, BRETT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437127152183**

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$200.00 Bi-Weekly)

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

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

584.60

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

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

FOR LINE NUMBER: PAGE 50 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAINEY, PETER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Corp Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2437127552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIPPERT, ROBIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP External Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2439928052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEYMAN, STEPHEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2444265752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

576.90

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

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

FOR LINE NUMBER: PAGE 51 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANGER, DONALD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3823.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2445015452183**

Amount of Each Receipt this Period

196.15

☐ Memo Item

P/R Deduction (\$196.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIND, NANCY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2445016252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADLINGTONSHKABERIN, AMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Human Capital

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2445016452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

402.45

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

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

FOR LINE NUMBER: PAGE 52 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIEGEL, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2445017152183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRAJNOVICH, DANIEL, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2460167352183

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RENFRO, LARRY, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Vice Chairman UHG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2460168152183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

226.34

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

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

FOR LINE NUMBER: PAGE 53 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ORBUCH, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UHC International Services Inc

Occupation (for Individual)  
Optum Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2460168252183**

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEXLER, ERIC, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2463723152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKOWSKI, KAREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Hlthcare Econ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2463723452183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

434.04

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

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

FOR LINE NUMBER: PAGE 54 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILL, PETER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Treas & Chief Invstmnt Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2463724652183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHICK, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
C&S Exec Sponsor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2480620552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBOTT, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2153.84

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2484541552183**

Amount of Each Receipt this Period

125.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

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

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

317.30

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURNS, MATTHEW, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2484541752183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNARR, KEVIN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Bus Segment COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2484542352183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROPEANO, DANIEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2065.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2484542852183

Amount of Each Receipt this Period

113.63

☐ Memo Item

P/R Deduction (\$113.63 Bi-Weekly)

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

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

498.23



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

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

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANDERFELD, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Capital Mkt Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2486697952183**

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCMAHON, DIRK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mkt Grp Pres & COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2491457052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NATHAN, DONALD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Chief of Staff - UHG CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2491457352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

424.60



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

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

FOR LINE NUMBER: PAGE 57 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARTLEY, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2538641352183

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, KARA, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2540175352183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PURDY, PATRICIA, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP External Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2541300652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

384.60

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

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

FOR LINE NUMBER: PAGE 58 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIERNEY, JOELLE, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2541300752183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERSAGGI, JOHN, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2541300852183

Amount of Each Receipt this Period

96.16

☐ Memo Item

P/R Deduction (\$96.16 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOSTETLER, BRENDAN, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2542541952183

Amount of Each Receipt this Period

57.69

☐ Memo Item

P/R Deduction (\$641.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

346.15

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 59 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAMSAY, RICHARD, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2542542252183

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPENCER, IPYANA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2542542352183

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YAU, ANNE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP External Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2543582552183

Amount of Each Receipt this Period

57.69

☐ Memo Item

P/R Deduction (\$57.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

137.69

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

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVENPORT, ALLISON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552313652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRUNELL, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
MGR URS SAE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552961252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRYANT, JEREMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clnt Mgmt NA Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552961352183**

Amount of Each Receipt this Period

35.00

☐ Memo Item

P/R Deduction (\$35.00 Bi-Weekly)

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

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

241.30

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLEMAN, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.44

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552961452183**

Amount of Each Receipt this Period

66.92

☐ Memo Item

P/R Deduction (\$66.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EHLMAN, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Health Plan of Nevada

Occupation (for Individual)  
Sr Director Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552962252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANNERY, SCOTT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3497.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552962352183**

Amount of Each Receipt this Period

248.00

☐ Memo Item

P/R Deduction (\$248.00 Bi-Weekly)

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

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

328.92

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

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

FOR LINE NUMBER: PAGE 62 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, GREGORY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.93

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552963252183**

Amount of Each Receipt this Period

37.33

☐ Memo Item

P/R Deduction (\$37.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIDAMBI, NARASIMHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Bus Anlys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552963852183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOVELADY, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Bus Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552964252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

249.63

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARTO, MICHELLE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2552964752183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATTSON, CARL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2552964852183

Amount of Each Receipt this Period

46.15

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRIS, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2552965052183

Amount of Each Receipt this Period

15.38

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

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

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

75.53



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

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

FOR LINE NUMBER: PAGE 64 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAULUS, LESLIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552965252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEKA, GARY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Six Sigma

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552965352183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POTTER, DONALD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
NA VP Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

335.10

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552965452183**

Amount of Each Receipt this Period

69.10

☐ Memo Item

P/R Deduction (\$69.10 Bi-Weekly)

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

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

97.10



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

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

FOR LINE NUMBER: PAGE 65 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAMSEL, KRISTINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552965752183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STREIT, BARRY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Reg VP of SIs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552966752183**

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TINKER, ANN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552966852183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

104.92

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

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

FOR LINE NUMBER: PAGE 66 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WACKER, AARON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Principal Engineer, TLCP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2552967052183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAASZ, SCOTT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2553474752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PROSKAUER, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2553475052183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

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

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

71.69

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

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

FOR LINE NUMBER: PAGE 67 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAYBURN, MONICA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2553475152183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1940.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2553475452183**

Amount of Each Receipt this Period

97.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOJTA, DENEEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Bus Initiv Clin Aff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2553475552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

328.30

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZERAFA, DANIEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2553475752183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLAGSTAD, KARSTEN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Info Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2554013052183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, THOMAS, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Dir, Sis Care Mgmt & Del

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2554013252183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

220.30

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

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

FOR LINE NUMBER: PAGE 69 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REIDY, GREGORY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2554013352183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALEXANDER, JOY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Health Plan of Nevada

Occupation (for Individual)  
Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560064152183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BENNETT, JIM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560064252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

66.46

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

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

FOR LINE NUMBER: PAGE 70 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLUTE, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560064452183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAZELEY, PAULA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560064852183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIANCORSIO, DONALD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Health Plan of Nevada

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560064952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

244.76

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

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

FOR LINE NUMBER: PAGE 71 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, JERI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560065152183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNEMUND, GREGG, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560065352183**

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIPPMAN, SHELDON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1940.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560065452183**

Amount of Each Receipt this Period

97.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

420.85



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUCHT, JEFFREY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
SVP Act Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1940.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2560065652183

Amount of Each Receipt this Period

97.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARONEY, KEVIN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2560065752183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILICH, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3633.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2560066052183

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

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

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

338.70



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OBRYANT, WILLIAM, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2560066152183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAIL, DENISE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2560066852183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DICKMAN, KRISTA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Sr Proj Mgr III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2560398152183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

42.00

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

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

FOR LINE NUMBER: PAGE 74 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOREAN, GEORGE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Act Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560398552183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOEL, TIMOTHY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Prd

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560398852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WULF, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560398952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

220.34

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

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

FOR LINE NUMBER: PAGE 75 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRONIN, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560821152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBRIEN, PATRICK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Prov Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560821452183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERO, MARIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2560821552183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

220.30

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

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

FOR LINE NUMBER: PAGE 76 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, CHARLES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2561358952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUND, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2561457652183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAVANAUGH, LARRY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Spcl Ben Govt Dntl Sls Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2563211052183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

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

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

270.30

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MACKENZIE, ANDREW, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Bus Segment CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2564297152183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAMATO, ELLEN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2564802252183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLSON, JOSH, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
RVP SLS SB and Spec Ben

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2564802552183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

244.76

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

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

FOR LINE NUMBER: PAGE 78 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARLSON, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Cnsmr & Cust Experience

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564802652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mkt Grp Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1940.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564802752183**

Amount of Each Receipt this Period

97.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOODWIN, MARYELLEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564802952183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

303.30

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

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

FOR LINE NUMBER: PAGE 79 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENNY, KATHERINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB VP of Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564803252183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARDEN, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564803352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOQUIST, DARREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564803452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

423.60



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

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

FOR LINE NUMBER: PAGE 80 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELLMAN, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB VP Sls Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564803552183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, LISA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564803752183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OHARE, TAMMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB VP Sls

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2564803952183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

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

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

67.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WICKS, TIMOTHY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Mkt Group CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2565448652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, WILLIAM, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
KA VP SIs Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2565448752183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRAIG, DONNA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2565448852183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

244.76

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

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

FOR LINE NUMBER: PAGE 82 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUNST, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
UHC SIs RVP KA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2566302152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEISS, BRUCE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.44

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2566302352183**

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANSUKHANI, NEIL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
AES Dir SIs Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2567129452183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

104.96

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

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

FOR LINE NUMBER: PAGE 83 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAMORE, DENISE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2567129552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNONE, WENDY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3653.70

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2568900552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARRILLO, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Contractng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2571778252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

269.22

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

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

FOR LINE NUMBER: PAGE 84 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOYER, BRUCE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2571778352183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HINTON, DUSTIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2571978752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINSON, MARCUS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB VP SIs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2572588952183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

245.30

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

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

FOR LINE NUMBER: PAGE 85 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACQUET, SHAUN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2572589352183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2572589552183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARLSON, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2572590052183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

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

124.15

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WACKER, CHARLES, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Sr Solution Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2572590152183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BECK, JOANNE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2572590352183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OBRIEN, CHRISTINE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
KA VP SIs Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2572590652183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

42.04



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

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

FOR LINE NUMBER: PAGE 87 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, KIMBERLEY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2572591252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIFFLER, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Unit CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2572992752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOETZ, MERRITT, David, ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2573477352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

398.60

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. QUINN, PATRICK, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1832.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2573518752183

Amount of Each Receipt this Period

111.00

☐ Memo Item

P/R Deduction (\$111.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROZDANICH, PATTI, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2573518852183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENSON, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Assc Dir Sls Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2573518952183

Amount of Each Receipt this Period

14.42

☐ Memo Item

P/R Deduction (\$14.42 Bi-Weekly)

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

163.88

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

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

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

FOR LINE NUMBER: PAGE 89 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHAW, AMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574971352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUCCHIANERI, STEVEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR257497152183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICHARD, DARYL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574979052183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

71.73

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANE, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.31

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574979152183**

Amount of Each Receipt this Period

277.77

☐ Memo Item

P/R Deduction (\$277.77 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARE, LESLIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Health Plan of Nevada

Occupation (for Individual)  
Dir Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574979452183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MASTERS, SCOTT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.50

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574979652183**

Amount of Each Receipt this Period

38.50

☐ Memo Item

P/R Deduction (\$38.50 Bi-Weekly)

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

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

330.27

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIMPSON, TRENT, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2574985052183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CIANFROCCO, HEATHER, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2574986252183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAPLANLEWIS, DEBRA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2574986952183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

423.06

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

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

FOR LINE NUMBER: PAGE 92 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNETT, JAMIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574988252183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANGJACOBSEN, HEATHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574991452183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLAZETTA, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2574995452183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

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

173.61

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

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

FOR LINE NUMBER: PAGE 93 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEWKIRK, MEGHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB KA VP SIs Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575008752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, JOSEPH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Reg VP of SIs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2615.45

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575008852183**

Amount of Each Receipt this Period

153.85

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SJOBLAD, BETHANY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3333.24

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575009152183**

Amount of Each Receipt this Period

277.77

☐ Memo Item

P/R Deduction (\$277.77 Bi-Weekly)

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

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

445.66



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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEMMER, HEIDI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Prov Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575021352183**

Amount of Each Receipt this Period

14.14

☐ Memo Item

P/R Deduction (\$14.14 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDELL, CATHERINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.93

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575027552183**

Amount of Each Receipt this Period

38.33

☐ Memo Item

P/R Deduction (\$38.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, MICHELE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575029652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

244.77

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OBRIEN, JENNIFER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Chief Compli Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575034552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONCZYK, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Treasury

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575038752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADDOX, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575039552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

269.22

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

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

FOR LINE NUMBER: PAGE 96 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLENBURG, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575039852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEATH, SEAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575048752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JORDAN, GARELL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575050252183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

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

148.65

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

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

FOR LINE NUMBER: PAGE 97 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDSAY, VIVIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575054952183**

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLACKO, MARY ANN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575057952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCARTY, CARY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575059452183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

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

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

305.16

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

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

FOR LINE NUMBER: PAGE 98 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEN, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575060252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCEVOY, AMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575062252183**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWAN, RICK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575062652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

72.50

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 99 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRIE, ULYSSES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575064152183**

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAETTA, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575068352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERCHICK, TAMI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Director Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575068952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

260.76

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ISMERT, JENNY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575070052183

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENLOW, MARGARET, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575071052183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHRISTIAN, DENISE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
SVP Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575071452183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

256.34



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

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

FOR LINE NUMBER: PAGE 101 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICHOLS, SANDRA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Natl Inptnt Care Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575074552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BECK, RALPH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575074952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHELLEY, MATTHEW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Natl Clin Cvrge Review

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575075252183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

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

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

225.57

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

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

FOR LINE NUMBER: PAGE 102 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNAM, DEBRA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575076252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALAMIA, EDITH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2598.18

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575076652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UPCHURCH, KAREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575084452183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

244.80

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ONEILL, AUDREY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575089452183

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEROLD, STACI, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575093052183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NABRITSTEPHENS, BARBARA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575093452183

Amount of Each Receipt this Period

13.38

☐ Memo Item

P/R Deduction (\$13.38 Bi-Weekly)

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

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

71.07

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PERRY, BEVERLY-JANE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Ntwk Prgrms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575096052183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACOBY, CHARLES, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Sr Dir Qlty Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575099252183

Amount of Each Receipt this Period

16.00

☐ Memo Item

P/R Deduction (\$16.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAMPION, PHEBE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Health Plan of NevadaOccupation (for Individual)  
Dir Cust Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575108352183

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

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

55.04

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

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

FOR LINE NUMBER: PAGE 105 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADDIGAN, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Dir Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575114852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORSCH, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum360 Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575115152183**

Amount of Each Receipt this Period

15.38

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYDON, SCOTT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575122252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

43.42

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

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

FOR LINE NUMBER: PAGE 106 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNT, ZOE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575136252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCDONNEL, LISA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Ntwk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575136352183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTER, JOCELYN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3172.95

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575141952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

220.29

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

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

FOR LINE NUMBER: PAGE 107 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEWALL, PATRICK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575145352183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGANN, JEAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB VP of Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575146952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSOHN, PATRICK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Reg VP of SIs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575148352183**

Amount of Each Receipt this Period

416.66

☐ Memo Item

P/R Deduction (\$416.66 Bi-Weekly)

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

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

526.85



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 108 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JONES, RON, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
SVP CInt Relationship

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575163552183

Amount of Each Receipt this Period

125.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAZVI, NIGHET, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575168652183

Amount of Each Receipt this Period

13.81

☐ Memo Item

P/R Deduction (\$13.81 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMANN, CHAD, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575170152183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

331.11

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WIELAND, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Sr Dir I O Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575181652183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGUIRE, THOMAS, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575185452183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MELLO, STEPHANIE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575191352183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

220.38

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 110 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEMARIS, PETER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Mktg eComm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2923.03

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575191852183**

Amount of Each Receipt this Period

346.15

☐ Memo Item

P/R Deduction (\$346.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MUELLER, CYNTHIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575192252183**

Amount of Each Receipt this Period

17.40

☐ Memo Item

P/R Deduction (\$17.40 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, KRISTIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575194452183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

377.55

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANBERG, MITCHELL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575196152183**

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CONDON, CRAIG, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Unit CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575203152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANCIS, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3653.70

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575203352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

612.30

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARRIS, DONNA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.08

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575212552183**

Amount of Each Receipt this Period

37.14

☐ Memo Item

P/R Deduction (\$37.14 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STORDAHL, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3452.28

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575213052183**

Amount of Each Receipt this Period

258.00

☐ Memo Item

P/R Deduction (\$258.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, PETER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum360 Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575213652183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

310.14

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYERHOFER, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Bundled Payment Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575214652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOUGLAS, CHRIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575220252183**

Amount of Each Receipt this Period

20.19

☐ Memo Item

P/R Deduction (\$20.19 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHORS, MATTHEW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575222352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

250.95

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

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

FOR LINE NUMBER: PAGE 114 OF 309

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRUTA, DARLENE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575232552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRUNDHOEFER, BRYAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
CEO Med Grp Non Physn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575232752183**

Amount of Each Receipt this Period

714.00

☐ Memo Item

P/R Deduction (\$192.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIRKPATRICK, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575233652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

790.92



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

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

FOR LINE NUMBER: PAGE 115 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUSSELL, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Empl Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575238652183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHOATE, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575247852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DARRAH, JACQUELINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575248552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

90.92

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRANT, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB KA VP Sls Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575250252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATTILA, LUCAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB VP Sls Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575250652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORF, GRETCHEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP External Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575252252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

244.80

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

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

FOR LINE NUMBER: PAGE 117 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BACHMANN, ANITA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.06

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575258452183**

Amount of Each Receipt this Period

66.67

☐ Memo Item

P/R Deduction (\$66.67 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REICHEL, RANDI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.19

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575259952183**

Amount of Each Receipt this Period

52.63

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROOMFIELD, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

761.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575260452183**

Amount of Each Receipt this Period

73.07

☐ Memo Item

P/R Deduction (\$73.07 Bi-Weekly)

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

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

192.37

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

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

FOR LINE NUMBER: PAGE 118 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZARN, MARY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Chief of Staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575269152183**

Amount of Each Receipt this Period

37.50

☐ Memo Item

P/R Deduction (\$37.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAFFIRIS, NICHOLAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575270652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, TERRY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575279252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

65.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRASKA, LISA, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP Recruit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2575283052183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMBLIN, JILLIAN, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2575290352183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUELLER, STEVEN, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

454.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2575294552183**

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$90.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

143.26

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

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

FOR LINE NUMBER: PAGE 120 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEAUREGARD, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Exec Dir, Applied Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575295152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEWITT, SCOTT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.58

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575296752183**

Amount of Each Receipt this Period

56.73

☐ Memo Item

P/R Deduction (\$56.73 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MONAGHAN, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Ntwk Prgrms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575296852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

263.07

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

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

FOR LINE NUMBER: PAGE 121 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUGHES, ROBERT, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mgr Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575304252183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CUEVAS, BRANDON, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575305652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNT, BRADLEY, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575310452183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

398.64



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

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

FOR LINE NUMBER: PAGE 122 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMM, JAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mkt Sls SVP Optuml

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575314852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRAWZ, MATTHEW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Bus Dvlp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.47

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575315952183**

Amount of Each Receipt this Period

104.71

☐ Memo Item

P/R Deduction (\$104.71 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOLDBERG, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Business Development Exe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575326952183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

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

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

157.75

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEEL, CHAD, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Prd

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575329852183

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANHAM, COLLEEN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575341952183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMONE, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575346752183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

246.34

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IMDIEKE, PATRICK, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Sr Bus Anlys Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575347952183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TELESKY, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
KA VP Sls Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575350952183

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHILLIPS, CHRISTINE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575354052183

Amount of Each Receipt this Period

13.97

☐ Memo Item

P/R Deduction (\$13.97 Bi-Weekly)

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

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

67.01

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 125 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SALLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575363652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAM, MATTHEW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Chief of Staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575364052183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIAVARELLA, TRACY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575377952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

42.12

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

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

FOR LINE NUMBER: PAGE 126 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOLL, KATHLEEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clnt Mgmt NMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575385152183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINKLER, YASMINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3050.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575390952183**

Amount of Each Receipt this Period

33.18

☐ Memo Item

P/R Deduction (\$33.18 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROWE, ANGELA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Ntwk Prgrms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575391752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

85.68

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FENLON, STEVEN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575392052183

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POST, LINDA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575395252183

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRATTEBO, CRAIG, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1730.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575397252183

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

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

207.30

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

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

FOR LINE NUMBER: PAGE 128 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UNDERWOOD, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575403352183**

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOTHARD, CAROL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.87

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575419152183**

Amount of Each Receipt this Period

38.18

☐ Memo Item

P/R Deduction (\$38.18 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGAVICK, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Bus Dvlp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575421952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

326.64



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

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

FOR LINE NUMBER: PAGE 129 OF 309

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OHARA, KARIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Acctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575428752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CASTILLO, EFREM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Seg Chief Med Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575441352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURLEY, MARY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575443652183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

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

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

230.76

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AXBERG, PAMELA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.38

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575443852183**

Amount of Each Receipt this Period

4.34

☐ Memo Item

P/R Deduction (\$4.34 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPILKER, TIMOTHY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
C&S Exec Sponsor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575446352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAUTMAN, MILLA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Chief Tech Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575447152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

388.94

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

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

FOR LINE NUMBER: PAGE 131 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOOKER, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3269.10

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575447252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLOCCO, LOUIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575448652183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEHLBACH, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3499.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575448852183**

Amount of Each Receipt this Period

248.50

☐ Memo Item

P/R Deduction (\$248.50 Bi-Weekly)

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

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

454.80

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

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

FOR LINE NUMBER: PAGE 132 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUNICE, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Treasury

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575451552183**

Amount of Each Receipt this Period

15.38

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGLINCH, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Treasury

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575451652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, ERIC, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575453752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

246.14

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

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

FOR LINE NUMBER: PAGE 133 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEGG, JACK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575456052183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, DAYNITA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Acctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575460652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRANZ, PHILLIP, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575463152183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

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

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

28.08

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 134 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHINNEY, ASHLEY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.30

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575468452183**

Amount of Each Receipt this Period

13.63

☐ Memo Item

P/R Deduction (\$13.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SADUSKE, NANETTE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.41

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575470252183**

Amount of Each Receipt this Period

38.26

☐ Memo Item

P/R Deduction (\$38.26 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARTHEL, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Dir Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575484352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

65.93

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

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

FOR LINE NUMBER: PAGE 135 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACLAUCHLAN, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575492752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STARMANN, LYNN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575494552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAMIREZ, MICHELE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Human Capital Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

407.05

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575502452183**

Amount of Each Receipt this Period

32.15

☐ Memo Item

P/R Deduction (\$32.15 Bi-Weekly)

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

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

84.65



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

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

FOR LINE NUMBER: PAGE 136 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUNDAL, DEBORAH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575502952183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBSTER, AMBER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575504852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DELREAL, MAGDALENA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Reg SIs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575507752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

42.08

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

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

FOR LINE NUMBER: PAGE 137 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Reg Sls Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575509652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOWELL, NICHOLAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Advisory Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575510052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOSEPH, MOLLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575521752183**

Amount of Each Receipt this Period

192.00

☐ Memo Item

P/R Deduction (\$192.00 Bi-Weekly)

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

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

398.34

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIRE, BERNADETTE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575522552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAPLAN, ERIC, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mkt Sls SVP Optuml

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575524052183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROCKETT, DOUGLAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1157.08

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575526052183**

Amount of Each Receipt this Period

57.14

☐ Memo Item

P/R Deduction (\$57.14 Bi-Weekly)

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

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

109.60

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COHEN, SANFORD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Seg Chief Med Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575526152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JETER, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575528152183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNTER, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M A VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575528352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

220.34

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

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

FOR LINE NUMBER: PAGE 140 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BASS, JOHN, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
PS RVP SIs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575528552183

Amount of Each Receipt this Period

93.40

☐ Memo Item

P/R Deduction (\$93.40 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERNANDEZ, MAYRENE, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575529252183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLOVANIA, KRISTEN, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2575533052183

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

359.56

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

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

FOR LINE NUMBER: PAGE 141 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILL, JANE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575533152183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAHL, ALISA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575534452183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULLANEY, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

647.02

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575535152183**

Amount of Each Receipt this Period

58.82

☐ Memo Item

P/R Deduction (\$58.82 Bi-Weekly)

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

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

116.51

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

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

FOR LINE NUMBER: PAGE 142 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMLIN, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Behvrl Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575536252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, EILEEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575537252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUQUE, JOY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575539252183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

67.50



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

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

FOR LINE NUMBER: PAGE 143 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUN, TONY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575540252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WENTZIEN, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP, Advisory Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575540852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINBRECHER, HOLLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575544552183**

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

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

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

280.20

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

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

FOR LINE NUMBER: PAGE 144 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BALCK, AMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575548452183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAIKEN, LAURIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575549652183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, MARY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575550852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

47.27

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 145 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STAFFORD, JEFF, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575561252183**

Amount of Each Receipt this Period

57.70

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHERRYHOMES, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.19

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575573552183**

Amount of Each Receipt this Period

13.48

☐ Memo Item

P/R Deduction (\$13.48 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOCK, CURTIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575579252183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

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

167.33

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINSOR, ELIZABETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575582852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EULL, MARY ANN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575583752183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, EUGENE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Reg VP of Brkr Sls

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575585452183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

244.66

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

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

FOR LINE NUMBER: PAGE 147 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYON, JAMIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575585952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLLER, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575586752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GISCH, SHAWNA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575592152183**

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$200.00 Bi-Weekly)

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

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

252.50

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JORGE, DEBORAH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575593652183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Business Development Exe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.93

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575595652183**

Amount of Each Receipt this Period

38.33

☐ Memo Item

P/R Deduction (\$38.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHIMENTO, LISA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mgng Dir Optuml Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575596152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

244.63

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

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

FOR LINE NUMBER: PAGE 149 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IVERSON, LISA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575603252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNUTT, DIANE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Chief Talent Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575604552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COSTA, JOEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2192.22

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575605852183**

Amount of Each Receipt this Period

115.38

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

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

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

499.98



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

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

FOR LINE NUMBER: PAGE 150 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, SARAH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mkt Sls SVP Optuml

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

**10 / 17 / 2018**

**Transaction ID : PR2575612852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOCKHOWER, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Director, Advisory Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

**10 / 17 / 2018**

**Transaction ID : PR2575619952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAULTERS, SCOTT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

**10 / 17 / 2018**

**Transaction ID : PR2575622152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

423.06

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

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

FOR LINE NUMBER: PAGE 151 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLEYBURNS, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Manager Data Analytics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575623052183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575634652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, STEPHEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1372.49

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575636152183**

Amount of Each Receipt this Period

102.93

☐ Memo Item

P/R Deduction (\$102.93 Bi-Weekly)

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

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

309.13

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

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

FOR LINE NUMBER: PAGE 152 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARK, TERRENCE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575636952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CABANILLAS, MARIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1519.17

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575637352183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINS, NEIL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575637652183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

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

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

302.45

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

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

FOR LINE NUMBER: PAGE 153 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, BENTON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP GM Clin Comnty Ntwk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3329.59

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575639252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICOLL, DEREK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1154.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575648652183**

Amount of Each Receipt this Period

57.70

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERMAN, CRAIG, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UHC International Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3653.70

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575650252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

442.30

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

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

FOR LINE NUMBER: PAGE 154 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANERT, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575650552183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYHURST, JENNY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Prgms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575651852183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SJODIN, CARA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575652452183**

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

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

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

278.04

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

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

FOR LINE NUMBER: PAGE 155 OF 309

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFANN, ELENA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575654752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANE, HEATHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575657452183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIZZANO, KATHRYN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1261.44

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575662152183**

Amount of Each Receipt this Period

123.00

☐ Memo Item

P/R Deduction (\$123.00 Bi-Weekly)

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

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

334.53

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

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

FOR LINE NUMBER: PAGE 156 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUXLEY, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575664252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZIGLER, JANICE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575665652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVERETT, RICARDO, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Contractng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.56

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575667652183**

Amount of Each Receipt this Period

26.07

☐ Memo Item

P/R Deduction (\$26.07 Bi-Weekly)

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

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

232.41



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

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

FOR LINE NUMBER: PAGE 157 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLEN, CARL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Southwest Medical Assoc. Inc.

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575669352183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOGATYRENKO, VICTORIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1249.95

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575675452183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MITCHELL, JILL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575678352183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

173.61

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

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

FOR LINE NUMBER: PAGE 158 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STIDMAN, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clnt Relationship

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575683852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OCHIPINTI, JOSEPH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575685752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FINE, BRETT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Corp Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2587.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575692852183**

Amount of Each Receipt this Period

402.10

☐ Memo Item

P/R Deduction (\$402.10 Bi-Weekly)

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

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

786.70

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

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

FOR LINE NUMBER: PAGE 159 OF 309  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARRELL, STEPHEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575696252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, EDWARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Info Security Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575702752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERMES, JAMIL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575705352183**

Amount of Each Receipt this Period

14.42

☐ Memo Item

P/R Deduction (\$14.42 Bi-Weekly)

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

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

66.92

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 160 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PROKOCKI, ELIZABETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Ntwk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575705852183**

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, D ELLEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
EVP Human Capital

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575708852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CAMPBELL, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.22

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575715452183**

Amount of Each Receipt this Period

39.46

☐ Memo Item

P/R Deduction (\$39.46 Bi-Weekly)

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

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

459.46

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

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

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOLLRATH, MICHELLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1158.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575719852183**

Amount of Each Receipt this Period

56.84

☐ Memo Item

P/R Deduction (\$56.84 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CREED, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Director Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.29

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575720552183**

Amount of Each Receipt this Period

13.97

☐ Memo Item

P/R Deduction (\$13.97 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRANDALL, KIM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575731252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

84.85

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

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

FOR LINE NUMBER: PAGE 162 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HELLAND, ROBYN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575733852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, KRISTIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575734452183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNORR, MOLLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Risk Adjustment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575735452183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

66.49

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 163 OF 309

(check only one)

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROSCLAGS, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575735752183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAL, JESSICA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3499.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575736152183**

Amount of Each Receipt this Period

248.50

☐ Memo Item

P/R Deduction (\$248.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575736552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

536.95



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

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CESARETTI, GINA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575739052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRICKLAND, JULIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Mktg Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575740952183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAITE, STEPHANIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Prod Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575743252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

220.34

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PORTZ, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575744552183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PINERSKI, JENNIFER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.88

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575752852183**

Amount of Each Receipt this Period

41.66

☐ Memo Item

P/R Deduction (\$41.66 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMOINE, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Director Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575755152183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

94.16

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULTON, RYAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575756952183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, KURT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Director Data Science

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575758352183**

Amount of Each Receipt this Period

38.50

☐ Memo Item

P/R Deduction (\$38.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOWE, JANET, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Acct Mgmt TPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575758652183**

Amount of Each Receipt this Period

15.38

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

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

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

67.78

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

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

FOR LINE NUMBER: PAGE 167 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EKLO, BENJAMIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575761852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEESE, LARRY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA Dir Sls & AM-Producing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575766152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CUNNINGHAM, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
COO NA Acct

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575767852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

398.64

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

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

FOR LINE NUMBER: PAGE 168 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONTOYA, MATTHEW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575777652183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROEPKE, KRISTIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Human Capital Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR257577752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULLINS, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575778752183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

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

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

47.27

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

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

FOR LINE NUMBER: PAGE 169 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADDUX, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clin Pharm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575783852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BERGDOLL, JENNIFER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Human Capital Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575793752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JELINEK, TROY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Clnt Relationship

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

666.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575795652183**

Amount of Each Receipt this Period

55.55

☐ Memo Item

P/R Deduction (\$55.55 Bi-Weekly)

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

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

108.05

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

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

FOR LINE NUMBER: PAGE 170 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAURER, CARRIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575798152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANKEN, SARA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Human Capital Partner Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575798552183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIX, LACOSTA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575800052183**

Amount of Each Receipt this Period

37.50

☐ Memo Item

P/R Deduction (\$37.50 Bi-Weekly)

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

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

243.84



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

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

FOR LINE NUMBER: PAGE 171 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALIAN, SANDRA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575803252183**

Amount of Each Receipt this Period

55.50

☐ Memo Item

P/R Deduction (\$55.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVINE, CAROL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575803352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HJERPE, ADAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575806252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

440.10

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

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

FOR LINE NUMBER: PAGE 172 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUKENBILL, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Tech Proj-Prgm Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575808152183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRICCO, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575808452183**

Amount of Each Receipt this Period

714.00

☐ Memo Item

P/R Deduction (\$105.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSSELL, LAURIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575812152183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

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

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

766.90

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 173 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHAPIRO, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2575814252183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEXTON, ELLEN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2575823252183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCNATT, RICHARD, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Sls Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2575824952183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

423.06

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

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

FOR LINE NUMBER: PAGE 174 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADLEY, JOEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575825852183**

Amount of Each Receipt this Period

18.46

☐ Memo Item

P/R Deduction (\$18.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAUFMAN, PHILIP, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575829852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNTLEY, MICHELLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575832052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

403.06

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

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

FOR LINE NUMBER: PAGE 175 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARPER, JENNIFER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575835552183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JERDE, MARY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575837452183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANDELL, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575837852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

66.54

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

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

FOR LINE NUMBER: PAGE 176 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEESON, MARY JANE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575839552183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRISON, CHARLES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575840352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, DALE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575849252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

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

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

124.23

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

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

FOR LINE NUMBER: PAGE 177 OF 309

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOROCH, BLAIR, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.30

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575849952183**

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOLDEN, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
CEO E&I Regions & Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4423.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575859352183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COTTINGTON, NYLE BRENT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Acctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1111.62

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575865352183**

Amount of Each Receipt this Period

64.80

☐ Memo Item

P/R Deduction (\$64.80 Bi-Weekly)

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

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

200.95



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

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

FOR LINE NUMBER: PAGE 178 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSS, CHRISTY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575873352183**

Amount of Each Receipt this Period

38.50

☐ Memo Item

P/R Deduction (\$38.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEZHMAN, PAYMAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575883552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANGAN, PATRICK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1940.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575885052183**

Amount of Each Receipt this Period

97.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

327.80

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

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

FOR LINE NUMBER: PAGE 179 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANDALL, RHONDA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Seg Chief Med Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575889652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARGHERIO, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB KA VP Sls Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.74

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575916352183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENSENPFIEFFER, KIM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Acctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575929752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

90.96

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

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

FOR LINE NUMBER: PAGE 180 OF 309

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCGOLDRICK, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Natl VP Sls & Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575930452183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEDEIROS, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Clnt Mgmt NA Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575930652183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZITZER, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575933352183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

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

91.50

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

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

FOR LINE NUMBER: PAGE 181 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTERA, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mkt Group Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575938452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANDIG, LAUREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575939852183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RILEY, FELICITY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1963.11

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575943352183**

Amount of Each Receipt this Period

108.69

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

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

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

315.99

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

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

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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIRAFESI, JUDY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Ntwk Prgrms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575953552183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SALVO, GIANCARLO, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Reg Sls Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575964952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KISCH, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575966052183**

Amount of Each Receipt this Period

15.00

☐ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

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

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

67.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYER, MARYBETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575971752183**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

P/R Deduction (\$1000.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DICELLO, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575977952183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICHARDS, ALISON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP NA Strat Initiv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575987952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1206.30

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOLD, PAMELA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB KA VP Sls Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575988652183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHULTZ, STACY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2575990952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAMBUNDABONGSE, KUNJORN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP External Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

454.50

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576000252183**

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$90.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

143.36



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRIGGS, MARC, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3774.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2576001652183

Amount of Each Receipt this Period

203.00

☐ Memo Item

P/R Deduction (\$203.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANN, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2576026452183

Amount of Each Receipt this Period

42.31

☐ Memo Item

P/R Deduction (\$42.31 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SONERHOLM, KIMBERLY, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Health Plan of Nevada

Occupation (for Individual)  
SB KA VP Sls Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2576033252183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

259.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLZERSPARR, CYNTHIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576034852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, GAYLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Strategic Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576040352183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYRNES, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3633.15

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576042852183**

Amount of Each Receipt this Period

227.70

☐ Memo Item

P/R Deduction (\$227.70 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

337.89

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 187 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANDALAFT, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1519.17

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576043652183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STONE, LAURA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Ntwk Contract Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576045152183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROENENDAAL, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Executive Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576046252183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

124.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VINCENT, BRYAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576049152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONICAL, KENT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP, Medicare STARS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576051352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REED, BARTON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Prod Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576059252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 OF 309

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUANG, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.44

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576059952183**

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REX, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
UHG CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576060052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCEWAN, JOSHUA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3818.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576085752183**

Amount of Each Receipt this Period

196.92

☐ Memo Item

P/R Deduction (\$196.92 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

466.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUDA, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576089952183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLUJIC, TAMMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576097352183**

Amount of Each Receipt this Period

23.52

☐ Memo Item

P/R Deduction (\$23.52 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARBISON, CECILIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576100152183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

133.57

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAHL, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576100252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, DARRIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576103752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DIAMOND, TIFFANY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576105552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

244.80



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CASEY, TAMMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576107352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIEWEL, NATHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Mgr, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576117552183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANCHEZ, VINCENT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576126952183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KERAN, PATRICK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Dir Tech Proj-Prgm Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576137852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIRETTE, KARL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir, Health Plan Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576138952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOADO, ANDREA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576144652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, STEVEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
EVP UHC CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576144852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIDNER, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB NA VP SIs/Gen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576147552183**

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEPNER, SHELLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Found/Social Resp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

289.83

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576147852183**

Amount of Each Receipt this Period

12.51

☐ Memo Item

P/R Deduction (\$12.51 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

243.81

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAUNOVICH, VUKASIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576306752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BENSON, JEAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2576310952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COMBSMORGAN, LAURIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578719852183**

Amount of Each Receipt this Period

19.20

☐ Memo Item

P/R Deduction (\$19.20 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

403.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TIDMARSH, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SCE 2 NA Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.95

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578724252183**

Amount of Each Receipt this Period

14.02

☐ Memo Item

P/R Deduction (\$14.02 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578734952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGELAND, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578741052183**

Amount of Each Receipt this Period

416.66

☐ Memo Item

P/R Deduction (\$416.66 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

469.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRODE, KURT, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2578819252183**

Amount of Each Receipt this Period

14.42

☐ Memo Item

P/R Deduction (\$14.42 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASNER, BARTLEY, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
CEO Med Grp Physn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2578819452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALTIWANGER, RACHEL, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2578820252183**

Amount of Each Receipt this Period

14.01

☐ Memo Item

P/R Deduction (\$14.01 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

220.73

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUFFEY, KRISTY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Chief Clin Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578823252183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIAVOLA, LAURA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578824352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUSBEE, NATHANAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578826752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

423.06



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, TRACI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2578829952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARMER, RACHEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2595208352183**

Amount of Each Receipt this Period

57.69

☐ Memo Item

P/R Deduction (\$57.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLIS, DENNIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA Dir Sls

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

327.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2595209152183**

Amount of Each Receipt this Period

16.38

☐ Memo Item

P/R Deduction (\$16.38 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

112.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LONIGRO, ANTHONY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2595225852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOWES, DOUGLAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2595226952183**

Amount of Each Receipt this Period

41.66

☐ Memo Item

P/R Deduction (\$41.66 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNYDER, MARY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2595229352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

272.42

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUCAYET, JULIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2595232952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, WESTON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2601125352183**

Amount of Each Receipt this Period

30.77

☐ Memo Item

P/R Deduction (\$30.77 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHORT, MARIANNE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
EVP Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2601133552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

237.11

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PATRICK, ALLEN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
SB Dir Sls Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2601136852183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWANSON, AMY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2601140752183

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCBRIEN, ROBERT, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2601148952183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

124.23

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, DOUGLAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Assc Dir Hlthcare Econ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2601149652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESTER, SHAUNA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2601154752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERERA, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2601168852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

42.12

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RODRIGUEZ, ROGER, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2601176852183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUDSON, JEFFREY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Sls Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2605703052183

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCBEATH, ROBERT, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
CEO Med Grp Physn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2605708952183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

398.60

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUTCHINS, LEIGH, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Primecare Medical Network, IncOccupation (for Individual)  
CEO Med Grp Non Physn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2605717852183

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$90.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICKS, RHONDA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2605733452183

Amount of Each Receipt this Period

15.38

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, KELLY, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2605734252183

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

202.43



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINLAY, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2605735152183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALONE, TRACY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP External Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2605736952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAEGER, MICHELLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Clnt Svc Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2605753952183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.28

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, LARRY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Compli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2605760652183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEISSEL, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Optum Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2606842952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SONSTEGARD, NATHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UHC International Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2606844452183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.57

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATECZUN, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Pres M&V

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2606845152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAWLINSON, DORIEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2606854652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EYER, JAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Regn Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2606857552183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARGRITZ, CYNTHIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Clin Qlty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2607806152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FICKER, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.93

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2607806752183**

Amount of Each Receipt this Period

38.33

☐ Memo Item

P/R Deduction (\$38.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWARTZ, SHAWN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Ntwk Prgms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2608059352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANDO, LISA, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2608059552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLYNN, VIRGINIA, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2608061252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERGUSON, SANDRA, , ,**

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Assc Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

**Transaction ID : PR2608061952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, ALLYN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2609810952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BODELL, LESLIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2609811352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, NORMAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Chief of Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2609812352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

398.64

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRAUSS, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Total Rewards, HC Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2612521852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PELUSO, JOSIANE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
C&S Medicr Dir NYC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.97

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2612525352183**

Amount of Each Receipt this Period

33.33

☐ Memo Item

P/R Deduction (\$33.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, MELANIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Recruit Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2612527652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

264.09



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 213 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, J, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Tech Proj-Prgm Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2612528552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAKER, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2612530552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIVERS, CAROLINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.02

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2612533752183**

Amount of Each Receipt this Period

14.01

☐ Memo Item

P/R Deduction (\$14.01 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

244.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIECKHAFFER, REGINA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2612536252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSEN, KIMBERLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Prov Data

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2613383252183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEIDESHEIMER, THERESA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2613383452183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41.84

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORCORAN, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Acctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2613385352183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DICKINSON, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1157.08

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2613388952183**

Amount of Each Receipt this Period

57.14

☐ Memo Item

P/R Deduction (\$57.14 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KREJCI, ANDREW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

561.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2614310752183**

Amount of Each Receipt this Period

28.08

☐ Memo Item

P/R Deduction (\$28.08 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

123.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 309

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYER, RAYNEE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.19

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2614314052183**

Amount of Each Receipt this Period

52.63

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
URS Dir SIs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2614322352183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURKHOLDER, CHAD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615073452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

264.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OCONNOR, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615082052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANNORMAN, SAMUEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615086052183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLOMON, RANDALL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Behvrl Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615671552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

244.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BIRNBAUM, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Hlthcare Econ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615671652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNUTSON, DIANE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UHC International Services Inc

Occupation (for Individual)  
Dir Ntwk Pricing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615923952183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNG, JENNIFER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615929452183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

244.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARVEY, MARISA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Sls Strat Mkt Allis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.66

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615937752183**

Amount of Each Receipt this Period

115.38

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRBY, WESLEY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Manager, Advisory Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2615957052183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LONGORIA, PATRICIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2617361152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

143.46



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PASSINEAU, MEGHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2617363652183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAW, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2617365652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHERRY, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP, Analytics Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2617922852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

66.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 221 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAUBLIT, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2617927152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PUTTERMAN, JAY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
NA VP Clnt Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2617931352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2617933952183**

Amount of Each Receipt this Period

46.15

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

74.23

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MISKELLCLOUTIER, DOMINIQUE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Preservice Review

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2618984952183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, ROGER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2622557952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARELLI, JOLENE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Tech Proj-Prgm Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2622559252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, MARK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA VP SIs Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2622561652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAMPBELL, THERESA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Human Capital Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2622562152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TROCINSKI, CAROL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

282.92

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2623691052183**

Amount of Each Receipt this Period

13.69

☐ Memo Item

P/R Deduction (\$13.69 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMP, MELISSA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2624436852183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULES, REBECCA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3653.70

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2624442652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINGH, KANWAR, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Agile Practitioner 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2624445952183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STALLWOOD, GREGG, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Cust Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3653.70

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2625499052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLETTE, CHRISTOPHER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP UnitedHlth Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2625499552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RELLER, TAMI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mkt Grp Chief Mktg Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2625501952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

576.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, LISA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1341.16

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2625503752183**

Amount of Each Receipt this Period

609.00

☐ Memo Item

P/R Deduction (\$609.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAWTON, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2625505452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOMER, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Principal Proj-Prgm Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2625507752183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

815.29



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIVERS, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2626346052183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CULHANE, DEBORAH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2626356052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TERRAL, RECCA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2626359652183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HINES, GREGORY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2626886552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BONAR, BRUCE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Mgr, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2626906852183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOCKSTAD, LYNNE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mkt Grp Chief Mktg Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2626915552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

398.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHENCK, ERIK, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Assc Dir Clin Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2627730452183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCOTT, NICOLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SB Dir Sls Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2627731952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, BARBARA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2627735552183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41.98

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDLEY, SHEILA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2627739852183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SENDEN, SCOTT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Info Security Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2627743452183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSH, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

666.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2627743852183**

Amount of Each Receipt this Period

55.55

☐ Memo Item

P/R Deduction (\$55.55 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

83.49

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NAKAJIMA, KENICHI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Act Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2628319052183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNING, KIM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2628331452183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VANDERWALDE, LAMBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP, Govt Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2628332352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORNHAUSER, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1159.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2628335752183**

Amount of Each Receipt this Period

57.96

☐ Memo Item

P/R Deduction (\$57.96 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROERSE, DEBRA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Assc Dir Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2628791352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALIK, SHKEELA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Assc Dir Clin Qlty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2628798152183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.90

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ERICKSON, ALYSSA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Found/Social Resp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2628798952183

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSEN, YVETTE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Dir Recruit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2628807152183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, BRUCE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Clms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2628833652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

220.24



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WONG, MING, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2629556852183**

Amount of Each Receipt this Period

60.00

☐ Memo Item

P/R Deduction (\$60.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TITA, MARYBETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632077852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAYEED, OMER, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Advisory Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

684.19

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632078252183**

Amount of Each Receipt this Period

52.63

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

151.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OTTESON, WILLIAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632082552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLIGANJR, CHARLES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632083552183**

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIBBERT, LINDA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.93

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632085352183**

Amount of Each Receipt this Period

38.33

☐ Memo Item

P/R Deduction (\$38.33 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.79

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NAPOLITANO, DIANE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632087752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GORSUCH, KIRSTEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632087852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TUFFIN, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632087952183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

398.64

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ORRICK, VERONICA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Sr Ntwk Prgm Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2632858552183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TEMPLE, MARTHA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2632873652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALTHOUR, JOHN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Mktg Rsch

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2632877052183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

244.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRUPNICK, BRUCE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Agile Practitioner 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632878052183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PLATT, LAWRENCE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632880752183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARR, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2632883552183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SARGENT, GLORIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA VP SIs Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634119352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYES, TREVOR, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.78

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634166852183**

Amount of Each Receipt this Period

13.87

☐ Memo Item

P/R Deduction (\$13.87 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAPGOOD, WADE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634167052183**

Amount of Each Receipt this Period

57.69

☐ Memo Item

P/R Deduction (\$57.69 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 OF 309  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROALDI, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634169552183**

Amount of Each Receipt this Period

38.50

☐ Memo Item

P/R Deduction (\$38.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRIBLE, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634656652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHEID, ADREAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP External Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634880452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

423.10



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARAMEE, CHRISTINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634881552183**

Amount of Each Receipt this Period

46.15

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CRAWFORD, KIMBERLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.56

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634884552183**

Amount of Each Receipt this Period

26.07

☐ Memo Item

P/R Deduction (\$26.07 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PESCATELLO, SARA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634888552183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

264.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POWER, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2634892852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REED, PAM, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA Mgr Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2635426352183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAYET, KEITH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2635440052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

249.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, ANTHONY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Population Hlth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.19

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2635444052183**

Amount of Each Receipt this Period

52.63

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELLER, JESSE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2635445152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EICHENLAUB, MANDIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Ntwk Prgrms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

571.36

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2635448552183**

Amount of Each Receipt this Period

71.42

☐ Memo Item

P/R Deduction (\$71.42 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

138.09

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROOS, THOMAS, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
SVP Chief Acctng Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2635451252183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Assc Dir Recruit Global

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2636719352183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Sr Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2636726552183

Amount of Each Receipt this Period

365.00

☐ Memo Item

P/R Deduction (\$365.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

571.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 OF 309  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIMES, MATT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2636733352183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, KENNETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2636734552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUICK, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Cust Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.17

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2637679552183**

Amount of Each Receipt this Period

21.47

☐ Memo Item

P/R Deduction (\$21.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

73.97

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEDERSEN, NICHOLAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Comp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2637684752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARSON, CHRISTINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Bus Anlys Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2637688752183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLOOD, ANDREW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Principal Data Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2637693252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

42.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIST, CHRISTINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2637694652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIVLEYIII, HARRY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2638106652183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGAN, BRETT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

771.51

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2638112752183**

Amount of Each Receipt this Period

38.10

☐ Memo Item

P/R Deduction (\$38.10 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.79



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 OF 309  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAUSCHILDT, TODD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2638114752183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZEGLINSKI, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Pharm Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639701852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Mkt Sls SVP OptumI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639702052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

423.06

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 249 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CALABRESE, DAVID, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Pharmacy Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3569.76

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639708352183**

Amount of Each Receipt this Period

238.50

☐ Memo Item

P/R Deduction (\$238.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAHL, ROBERT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639726152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MESSING, KEITH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Lead Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639734952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

266.58

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, ANTHONY, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2639746252183

Amount of Each Receipt this Period

43.47

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SURRELL, CHRISTOPHER, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1317.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2639758152183

Amount of Each Receipt this Period

72.72

☐ Memo Item

P/R Deduction (\$72.72 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEPLER, CAREY, , ,

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2639760752183

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

130.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENSENMOORE, KIMBERLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.39

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639770352183**

Amount of Each Receipt this Period

24.76

☐ Memo Item

P/R Deduction (\$24.76 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BIGHAM, ANNE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639771452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLEMING, SUSAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

666.66

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639773752183**

Amount of Each Receipt this Period

222.22

☐ Memo Item

P/R Deduction (\$222.22 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

439.28

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUTTA, SUMIT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Seg Chief Med Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639773852183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KETTLEWELL, KELLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639774152183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FITZGERALD, JAMES, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Mgr I O Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

307.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639783052183**

Amount of Each Receipt this Period

15.38

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

207.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, ELLEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Clnt Svc Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639795352183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, DELYLE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Director Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.93

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2639801552183**

Amount of Each Receipt this Period

37.33

☐ Memo Item

P/R Deduction (\$37.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BARRAGREE, SHERI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640450152183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

248.86

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLOWAY, MERCEDEIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640452052183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOHORIC, MARGARET, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Clin Qlty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640460052183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOW, CHRISTINA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP External Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640466452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.33



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 OF 309  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILJANENHATHAWAY, AMY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Dvlp Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.98

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640835252183**

Amount of Each Receipt this Period

13.83

☐ Memo Item

P/R Deduction (\$13.83 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMIDT, BURT, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Solution Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640842152183**

Amount of Each Receipt this Period

12.31

☐ Memo Item

P/R Deduction (\$12.31 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHARKEY, S PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP SIs SB KA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640845452183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRISSON, SAMUEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Tech Proj-Prgm Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.02

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640854552183**

Amount of Each Receipt this Period

14.00

☐ Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIERCEHARRIS, PHELISHA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assoc Dir Clin Pract Perf

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640866352183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAGNER, JOSEPH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

830.46

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640875852183**

Amount of Each Receipt this Period

44.00

☐ Memo Item

P/R Deduction (\$44.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

71.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WITT, JULIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Director, Actuarial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640876052183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ESTESS, SHARON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640876552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WONG, PAMELA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
NA VP Clnt Relationship

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2640876952183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.54

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. METKO, SARA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2640877352183

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEGMAN, PAM, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Sr Prod Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2640878452183

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINTO, RYAN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

962.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2640882452183

Amount of Each Receipt this Period

47.96

☐ Memo Item

P/R Deduction (\$47.96 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.32

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADVANI, PROTIMA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Rsch

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2642024152183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DASTVAR, DEAN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Assc Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2642028552183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUECKMAN, BRIAN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
SVP UHC Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2642029452183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

398.64

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, STEPHANIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
PS Dir Strat Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2642818052183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, ALLISON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.42

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2642830352183**

Amount of Each Receipt this Period

117.40

☐ Memo Item

P/R Deduction (\$117.40 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LONG, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2642831252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

194.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOX, ELIZABETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2642832052183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEISERJENKINS, KAREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.29

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2642834452183**

Amount of Each Receipt this Period

13.97

☐ Memo Item

P/R Deduction (\$13.97 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRESTA, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2642837552183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

148.58



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLENBRING, LYNN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3695.63

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2642839352183**

Amount of Each Receipt this Period

217.39

☐ Memo Item

P/R Deduction (\$217.39 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIVERTSEN, DARREN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2643132652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOCZYNSKI, PAUL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2643197752183**

Amount of Each Receipt this Period

37.50

☐ Memo Item

P/R Deduction (\$37.50 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

293.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CRAGLE, STEVE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3499.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2643200652183**

Amount of Each Receipt this Period

248.50

☐ Memo Item

P/R Deduction (\$248.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEELY, MARC, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2764.44

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2643203152183**

Amount of Each Receipt this Period

371.00

☐ Memo Item

P/R Deduction (\$371.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMMOND, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Prod Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2644644852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

657.96

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINNEROSKI, KEVIN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2644647152183

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKOY, PHILIP, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Mkt Grp CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2644651652183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONTRERAS, LISA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Assc Dir Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2644652652183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

220.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JEZARIAN, WENDY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Mktg Rsch Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2644659652183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZIRKELBACH, ANGELA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
External Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2644660252183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MISTRY, RASHMITA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2645169152183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.57

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEALE, MATTHEW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2645175252183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAHRT, JONATHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.24

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2645176952183**

Amount of Each Receipt this Period

277.77

☐ Memo Item

P/R Deduction (\$277.77 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOFFMAN, SHERRI, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2646294652183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

354.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALEXANDER, BRADLEY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.78

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2646298652183**

Amount of Each Receipt this Period

13.87

☐ Memo Item

P/R Deduction (\$13.87 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANKIEWICZ, DENNIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2646304052183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, RENEE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2698345152183**

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

27.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 OF 309

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANIER, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Dvlp Sr Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.78

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2698404252183**

Amount of Each Receipt this Period

13.87

☐ Memo Item

P/R Deduction (\$13.87 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSENHAUS, MORGANNE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.01

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2698409852183**

Amount of Each Receipt this Period

13.99

☐ Memo Item

P/R Deduction (\$13.99 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZENICK, GEOFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
NA VP Clnt Relationship

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2698410852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.32



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROSSMAN, BEVERLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.21

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2699179852183**

Amount of Each Receipt this Period

43.47

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SELIG, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Business Development Exe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2699184652183**

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AHLSTROM, ALEXIS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

767.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2699187152183**

Amount of Each Receipt this Period

38.36

☐ Memo Item

P/R Deduction (\$38.36 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

158.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZHOU, JINGXIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2699187852183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDSON, BARBARA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.65

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2699702252183**

Amount of Each Receipt this Period

555.55

☐ Memo Item

P/R Deduction (\$555.55 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRELL, ELIZABETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2699980052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

786.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HECK, DARRYL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Principal Proj-Prgm Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700831952183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOOGERD, MICHAEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Principal Proj-Prgm Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700842352183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TERRANOVA, THOMAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Agnt Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700843652183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAGGART, ELIZABETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Agnt Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.29

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700846552183**

Amount of Each Receipt this Period

13.97

☐ Memo Item

P/R Deduction (\$13.97 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OFFIELD, MIRANDA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700857552183**

Amount of Each Receipt this Period

15.38

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEARNS, SALLIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Client Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700861752183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

43.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULBRIGHT, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
M&R Agnt Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700865852183**

Amount of Each Receipt this Period

12.28

☐ Memo Item

P/R Deduction (\$12.28 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARNER, JONATHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Acct Mgt Cons Clnt Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700873552183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRY, KIMBERLY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Sr Med Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.56

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2700918052183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCSWEENEY, ERIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
EVP, Mkt Grp CHRO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2701818052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRINGER, TRICIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2701818652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OCONNELL, DANIEL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1989.70

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2701819652183**

Amount of Each Receipt this Period

126.80

☐ Memo Item

P/R Deduction (\$126.80 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

511.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 OF 309  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUCE, JAMIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2701823052183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPARKS, KEVIN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2701825552183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UNGAR, ELIZABETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir HRIS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2702474952183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

302.35



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BREDOW, ANDREA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Assc Dir Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.62

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2702489552183**

Amount of Each Receipt this Period

15.86

☐ Memo Item

P/R Deduction (\$15.86 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRAMER, NANCY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Dir RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2702501452183**

Amount of Each Receipt this Period

38.46

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEN, RONALD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2702503852183**

Amount of Each Receipt this Period

19.23

☐ Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

73.55

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRENNER, JEFFREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Integrated Hlth Human Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3594.14

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2702506352183**

Amount of Each Receipt this Period

232.00

☐ Memo Item

P/R Deduction (\$232.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHURCHES, KATHRYN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Bus Process

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2702506752183**

Amount of Each Receipt this Period

13.90

☐ Memo Item

P/R Deduction (\$13.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, MITCHELL, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Advisory Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2702508452183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

245.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERZLICKE, CAREY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2703246952183**

Amount of Each Receipt this Period

36.00

☐ Memo Item

P/R Deduction (\$36.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANNERSTROM, EMILY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Found/Social Resp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.53

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2703253752183**

Amount of Each Receipt this Period

13.74

☐ Memo Item

P/R Deduction (\$13.74 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARVEY, CATHERINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1730.70

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2703637052183**

Amount of Each Receipt this Period

96.15

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.89

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRIPPIN, TODD, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2703639552183

Amount of Each Receipt this Period

13.69

☐ Memo Item

P/R Deduction (\$13.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SABASTEANSKI, LISA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Human Capital Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2703652052183

Amount of Each Receipt this Period

13.63

☐ Memo Item

P/R Deduction (\$13.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, DAVID, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3420.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2703655452183

Amount of Each Receipt this Period

263.15

☐ Memo Item

P/R Deduction (\$263.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.47

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROLLINS, CARISSA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2704188952183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOROHO, PATRICIA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, IncOccupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2999.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2704194652183

Amount of Each Receipt this Period

333.33

☐ Memo Item

P/R Deduction (\$333.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DELANY, ANDREW, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Cust Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2704196352183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

717.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYEK, ANDREW, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2705063452183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, CORY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Bus Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2705063552183**

Amount of Each Receipt this Period

714.00

☐ Memo Item

P/R Deduction (\$714.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHARFF, RICHARD, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2705063652183**

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1098.60

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FELLEBAUM, DANIEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Govt Affs Assc Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2705065952183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUNTEN, BRIAN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1143.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2705070552183

Amount of Each Receipt this Period

59.43

☐ Memo Item

P/R Deduction (\$59.43 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZELLER, TRISHA, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Bus Anlys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2705971452183

Amount of Each Receipt this Period

14.04

☐ Memo Item

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

87.51



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPADE, NATHAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2705987052183**

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARBARO, PHILIP, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2705988252183**

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STILLO, KATHLEEN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2706451052183**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

226.92

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 284 OF 309

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARTHOLET, DANIEL, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2706451152183

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MULDOON, ALLISON, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Govt Affs Assc Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2706452752183

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MADRID, MERLE, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Dir Govt Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : PR2740510352183

Amount of Each Receipt this Period

96.00

☐ Memo Item

P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

308.30

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KORPMAN, RALPH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Chief Scientific Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2740514652183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATHIS, BRIAN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3499.72

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2740758752183**

Amount of Each Receipt this Period

248.50

☐ Memo Item

P/R Deduction (\$248.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUHLBAUER, CYNTHIA, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

684.19

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2748019552183**

Amount of Each Receipt this Period

52.63

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

301.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 OF 309  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FEHR, STEPHANIE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
EVP, Mkt Grp CHRO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3420.95

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2748020552183**

Amount of Each Receipt this Period

263.15

☐ Memo Item

P/R Deduction (\$263.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIM, KARLTON, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.94

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2749705552183**

Amount of Each Receipt this Period

66.66

☐ Memo Item

P/R Deduction (\$66.66 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHECKA, SREENIVAS, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Sr Prod Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.56

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2750285552183**

Amount of Each Receipt this Period

26.07

☐ Memo Item

P/R Deduction (\$26.07 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

355.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMON, JOHN, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
SVP Advisory Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3420.95

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2754663252183**

Amount of Each Receipt this Period

263.15

☐ Memo Item

P/R Deduction (\$263.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOTHRA, SIDDHARTH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
SVP Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2754720752183**

Amount of Each Receipt this Period

416.66

☐ Memo Item

P/R Deduction (\$416.66 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EHLERT, KENNETH, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Bus Segment CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2755316152183**

Amount of Each Receipt this Period

0.00

☐ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

679.81

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEVILLE, KATHERINE, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
Mgr Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.68

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2755317252183**

Amount of Each Receipt this Period

35.71

☐ Memo Item

P/R Deduction (\$35.71 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEILER, KATHY, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum Services, Inc

Occupation (for Individual)  
Bus Segment CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.65

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2755347652183**

Amount of Each Receipt this Period

555.55

☐ Memo Item

P/R Deduction (\$555.55 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABRAHAM, SANTIAGO, , ,**

Mailing Address 9900 Bren Road East

City  
Minnetonka

State  
MN

Zip Code  
55343-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services Inc

Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2692.27

Date of Receipt

10 / 17 / 2018

**Transaction ID : PR2755652152183**

Amount of Each Receipt this Period

384.61

☐ Memo Item

P/R Deduction (\$384.61 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

975.87

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 OF 309

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITNEY, DEVIN, , ,

Mailing Address 9900 Bren Road East

City  
MinnetonkaState  
MNZip Code  
55343-9664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United HealthCare Services IncOccupation (for Individual)  
Govt Affs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : PR2755932352183

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$90.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
/ /

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.90

88154.52



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 290 OF 309

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Greg Pence For Congress**

Mailing Address PO Box 275

City  
TaylorsvilleState  
INZip Code  
47280

Purpose of Disbursement

Contribution

011

Candidate Name

Pence, Gregory, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	9			2	0	1	8		

FEC Identification Number

C C00658401

**Transaction ID : 42694056**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Mike Kelly For Congress**

Mailing Address PO Box 476

City  
LyndoraState  
PAZip Code  
16045

Purpose of Disbursement

Contribution

011

Candidate Name

Kelly, Mike, , Rep.,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 16

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	9			2	0	1	8		

FEC Identification Number

C C00474189

**Transaction ID : 42694057**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Dr. Raul Ruiz For Congress**

Mailing Address PO Box 3433

City  
Palm DesertState  
CAZip Code  
92261

Purpose of Disbursement

Contribution

011

Candidate Name

Ruiz, Raul, , Rep.,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 36

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C C00502575

**Transaction ID : 42725413**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional).....▶

7500.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 291 OF 309

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Salud Carbajal For Congress**

Mailing Address PO Box 1290

City  
Santa BarbaraState  
CAZip Code  
93102

Purpose of Disbursement

Contribution

011

Candidate Name

Carbajal, Salud, , Rep.,

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 24

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C C00576041

**Transaction ID : 42725415**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Vargas for Congress**Mailing Address 330 Encinitas Boulevard  
Suite 101City  
EncinitasState  
CAZip Code  
92024

Purpose of Disbursement

Contribution

011

Candidate Name

Vargas, Juan, C., Rep.,

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 51

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C C00497321

**Transaction ID : 42725416**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Charlie Crist For Congress**

Mailing Address PO Box 1547

City  
St. PetersburgState  
FLZip Code  
33731

Purpose of Disbursement

Contribution

011

Candidate Name

Crist, Charlie, , Rep.,

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C C00590067

**Transaction ID : 42725417**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional).....▶

7500.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Val Demings For Congress**

Mailing Address PO Box 536926

City  
OrlandoState  
FLZip Code  
32853

Purpose of Disbursement

Contribution

011

Candidate Name

Demings, Valdez, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2018

FEC Identification Number

C C00590489

**Transaction ID : 42725418**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Sean Patrick Maloney For Congress**

Mailing Address PO Box 270

City  
NewburghState  
NYZip Code  
12550

Purpose of Disbursement

Contribution

011

Candidate Name

Maloney, Sean, , Rep.,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2018

FEC Identification Number

C C00512426

**Transaction ID : 42725422**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Bridge the Gap PAC**

Mailing Address PO BOX 83142

City  
GAITHERSBURGState  
MDZip Code  
20883

Purpose of Disbursement

Contribution

011

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2018

FEC Identification Number

C C00655423

**Transaction ID : 42725423**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Serve America PAC**

Mailing Address PO Box 2013

City  
SalemState  
MAZip Code  
01970

Purpose of Disbursement

Contribution

Candidate Name

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	8		

FEC Identification Number

C C00571174

**Transaction ID : 42725424**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item
**SUBTOTAL** of Disbursements This Page (optional)..... ►

1500.00

**TOTAL** This Period (last page this line number only)..... ►

29000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 294 OF 309

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Pete Flores for Texas Senate**

Mailing Address 111 Live Oak Drive

City  
PleasantonState  
TXZip Code  
78064

Purpose of Disbursement

Contribution

011

Candidate Name

Flores, Pete, , ,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			09			2018					

FEC Identification Number

C

**Transaction ID : 42694059**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Friends of Mike Romano**

Mailing Address 128 South 2nd Street

City  
ClarksburgState  
WVZip Code  
26301

Purpose of Disbursement

Contribution

011

Candidate Name

Romano, Mike, , WV Sen.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			09			2018					

FEC Identification Number

C

**Transaction ID : 42694062**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Janet Buckner For Colorado**

Mailing Address 4124 S. Elkhart St

City  
AuroraState  
COZip Code  
80014

Purpose of Disbursement

Void - Janet Buckner For Colorado; check dated 8/17/18

011

Candidate Name

Buckner, Janet, , CO Rep.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			10			2018					

FEC Identification Number

C

**Transaction ID : 42702218**

Amount of Each Disbursement this Period

- 200.00

☐ Memo Item Void - Janet Buckner For Colorado; check dated 8/17/18
**SUBTOTAL** of Disbursements This Page (optional)..... ►

2800.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Trudy Wade**

Mailing Address 4205 Rose Lake Drive

City  
GreensboroState  
NCZip Code  
27407

Purpose of Disbursement

Contribution

011

Candidate Name

Wade, Trudy, , NC Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42721296**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Tony for Wisconsin**

Mailing Address PO Box 1879

City  
MadisonState  
WIZip Code  
53701

Purpose of Disbursement

Contribution

011

Candidate Name

Evers, Anthony, , ,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42721301**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Citizens for Jake Wheatley**

Mailing Address PO BOX 53044

City  
PittsburghState  
PAZip Code  
15219-0000

Purpose of Disbursement

Contribution

011

Candidate Name

Wheatley, Jake, , PA Rep., Jr.

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725425**

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

10500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 296 OF 309

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Wayne Fontana**

Mailing Address 1309 Creedmoor Ave

City  
PittsburghState  
PAZip Code  
15226-2345

Purpose of Disbursement

Contribution

011

Candidate Name

Fontana, Wayne, , PA Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

Transaction ID : 42725427

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Friends of Maria P. Donatucci**

Mailing Address 1526 Wolf St

City  
PhiladelphiaState  
PAZip Code  
19145

Purpose of Disbursement

Contribution

011

Candidate Name

Donatucci, Maria, , PA Rep.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

Transaction ID : 42725428

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Brian White for House**

Mailing Address PO Box 970

City  
AndersonState  
SCZip Code  
29622

Purpose of Disbursement

Contribution

011

Candidate Name

White, W. Brian, , SC Rep.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

Transaction ID : 42725430

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

2000.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 297 OF 309

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Alexander**

Mailing Address 150 Cleveland Drive

City  
WalhallaState  
SCZip Code  
29691

Purpose of Disbursement

Contribution

011

Candidate Name

Alexander, Thomas, , SC Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725434**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. G. Murrell Smith Jr. Candidate for State House**

Mailing Address PO Box 580

City  
SumterState  
SCZip Code  
29150

Purpose of Disbursement

Contribution

011

Candidate Name

Smith, George, , SC Rep., Jr.

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725438**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Jay Lucas for House**

Mailing Address PO Drawer 1408

City  
HartsvilleState  
SCZip Code  
29550

Purpose of Disbursement

Contribution

011

Candidate Name

Lucas, James, , SC Rep.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725442**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 298 OF 309

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Sandifer for House**

Mailing Address 112 Cardinal Drive

City  
SenecaState  
SCZip Code  
29672

Purpose of Disbursement

Contribution

011

Candidate Name

Sandifer, William, , SC Rep., III

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725445**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Simrill for House**

Mailing Address 1515 Alexander Road

City  
Rock HillState  
SCZip Code  
29732

Purpose of Disbursement

Contribution

011

Candidate Name

Simrill, J. Gary, , SC Rep.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725449**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Andrew Byrd for WV House of Delegates 2018**

Mailing Address 868 Whispering Way

City  
South CharlestonState  
WVZip Code  
25303

Purpose of Disbursement

Contribution

011

Candidate Name

Byrd, Andrew, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725454**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

3000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 299 OF 309

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Cindy Frich for House of Delegates**

Mailing Address 1248 Bakers Ridge Road

City  
MorgantownState  
WVZip Code  
26505

Purpose of Disbursement

Contribution

011

Candidate Name

Frich, Cindy, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725457**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Citizens for Amy Summers**

Mailing Address 98 Meadland Road

City  
FlemingtonState  
WVZip Code  
26347

Purpose of Disbursement

Contribution

011

Candidate Name

Summers, Amy, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725462**

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Andrew Robinson**

Mailing Address 18 California Avenue

City  
CharlestonState  
WVZip Code  
25311

Purpose of Disbursement

Contribution

011

Candidate Name

Robinson, Andrew, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725464**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

2750.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Charles S. Trump, IV**

Mailing Address 171 S. Washington Street

City  
Berkeley SpringsState  
WVZip Code  
25411

Purpose of Disbursement

Contribution

011

Candidate Name

Trump, Charles, , WV Sen., IV

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		15		2018

FEC Identification Number

C

**Transaction ID : 42725469**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Geoff Foster**

Mailing Address 10 Hawthorne Dr

City  
WinfieldState  
WVZip Code  
25213

Purpose of Disbursement

Contribution

011

Candidate Name

Foster, Geoffrey, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		15		2018

FEC Identification Number

C

**Transaction ID : 42725470**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Linda Longstreth**

Mailing Address 804 Ohio Avenue

City  
FairmontState  
WVZip Code  
26554

Purpose of Disbursement

Contribution

011

Candidate Name

Longstreth, Linda, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		15		2018

FEC Identification Number

C

**Transaction ID : 42725473**

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Tom Fast**

Mailing Address P.O. Box 332

City  
FayettevilleState  
WVZip Code  
25840

Purpose of Disbursement

Contribution

011

Candidate Name

Fast, Thomas, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725485**

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Elect Kayla Kessinger 2018**

Mailing Address 1736 Kess Springs

City  
Mount HopeState  
WVZip Code  
25880

Purpose of Disbursement

Contribution

011

Candidate Name

Kessinger, Kayla, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725486**

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Eric Householder for Delegate**

Mailing Address 212 Snooks Lane

City  
MartinsburgState  
WVZip Code  
25405

Purpose of Disbursement

Contribution

011

Candidate Name

Householder, Eric, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725489**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Barbara**Mailing Address 235 High Street  
Ste 618City  
MorgantownState  
WVZip Code  
26505

Purpose of Disbursement

Contribution

011

Candidate Name

Fleischauer, Barbara, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725502**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Friends of John Shott 2018**

Mailing Address 422 Oakhurst Avenue

City  
BluefieldState  
WVZip Code  
24701

Purpose of Disbursement

Contribution

011

Candidate Name

Shott, John, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725506**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Mike Caputo**

Mailing Address PO Box 585

City  
RivesvilleState  
WVZip Code  
26588

Purpose of Disbursement

Contribution

011

Candidate Name

Caputo, Michael, , WV Del.,

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725508**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

3000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Gaunch for Senate Committee**

Mailing Address 524 Woodbridge Drive

City  
CharlestonState  
WVZip Code  
25311

Purpose of Disbursement

Contribution

011

Candidate Name

Gaunch, Charles, , WV Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725510**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Jim Butler for West Virginia**

Mailing Address P.O. Box 296

City  
HendersonState  
WVZip Code  
25106

Purpose of Disbursement

Contribution

011

Candidate Name

Butler, Jim, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725511**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Lane for West Virginia**

Mailing Address 311 Shawnee Circle

City  
CharlestonState  
WVZip Code  
25304

Purpose of Disbursement

Contribution

011

Candidate Name

Lane, Charlotte, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725513**

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2750.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Maynard for Senate**

Mailing Address 17070 Route 152 Rd

City  
GenoaState  
WVZip Code  
25517

Purpose of Disbursement

Contribution

011

Candidate Name

Maynard, Mark, , WV Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725516**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Moore Capito for WV**

Mailing Address PO Box 2788

City  
CharlestonState  
WVZip Code  
25330

Purpose of Disbursement

Contribution

011

Candidate Name

Capito, Moore, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725518**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Moore for West Virginia**

Mailing Address 398 Stafford Lane

City  
Harpers FerryState  
WVZip Code  
25425

Purpose of Disbursement

Contribution

011

Candidate Name

Moore, Riley, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725520**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

3000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Stollings for Senate**

Mailing Address PO Box 365

City  
MadisonState  
WVZip Code  
25053

Purpose of Disbursement

Contribution

011

Candidate Name

Stollings, Ron, , WV Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

Transaction ID : 42725523

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Storch for House**

Mailing Address 5 Edgewood Street

City  
WheelingState  
WVZip Code  
26003

Purpose of Disbursement

Contribution

011

Candidate Name

Storch, Erika, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

Transaction ID : 42725532

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Sypolt for Senate**

Mailing Address PO Box 5

City  
KingwoodState  
WVZip Code  
26537

Purpose of Disbursement

Contribution

011

Candidate Name

Sypolt, Dave, , WV Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

Transaction ID : 42725535

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►

2000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. The Committee to Elect Bill Hamilton**

Mailing Address PO Box 1192

City  
BuckhannonState  
WVZip Code  
26201

Purpose of Disbursement

Contribution

011

Candidate Name

Hamilton, Bill, , ,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725566**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. The Committee to Elect Danny Hamrick**

Mailing Address 20 Lena Lane

City  
Lost CreekState  
WVZip Code  
26385

Purpose of Disbursement

Contribution

011

Candidate Name

Hamrick, Danny, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725570**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Upson for WV**

Mailing Address 336 Pebble Beach Drive

City  
Charles TownState  
WVZip Code  
25414

Purpose of Disbursement

Contribution

011

Candidate Name

Upson, Jill, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725575**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Woelfel for Senate**

Mailing Address 801 8th Street

City  
HuntingtonState  
WVZip Code  
25701

Purpose of Disbursement

Contribution

011

Candidate Name

Woelfel, Mike, , WV Sen.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725578**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Zatezalo for House**

Mailing Address 540 N 12th Street

City  
WeirtonState  
WVZip Code  
26062

Purpose of Disbursement

Contribution

011

Candidate Name

Zatezalo, Mark, , WV Del.,

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725582**

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Senate Republican Campaign Committee**

Mailing Address PO Box 792

City  
HarrisburgState  
PAZip Code  
17108

Purpose of Disbursement

Contribution

011

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : 42725586**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Kevin Rader PC**

Mailing Address 120 South Monroe Street

City  
TallahasseeState  
FLZip Code  
32301

Purpose of Disbursement

Contribution

Candidate Name

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725594**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. WV Democratic House Legislative Committee**

Mailing Address P.O. Box 11716

City  
CharlestonState  
WVZip Code  
25314

Purpose of Disbursement

Contribution

Candidate Name

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			15			2018					

FEC Identification Number

C

**Transaction ID : 42725617**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Phil Scott for Governor**

Mailing Address PO Box 988

City  
MontpelierState  
VTZip Code  
05601

Purpose of Disbursement

Contribution

Candidate Name

Scott, Phil, , Gov.,

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			16			2018					

FEC Identification Number

C

**Transaction ID : 42725921**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item Contribution
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Tony for Wisconsin**

Mailing Address PO Box 1879

City  
MadisonState  
WIZip Code  
53701

Purpose of Disbursement

Void - Tony for Wisconsin; check dated 10/15/2018

Candidate Name

Evers, Anthony, . .

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	8		

FEC Identification Number

**C****Transaction ID : 42762135**

Amount of Each Disbursement this Period

- 5000.00

☐ Memo Item Void - Tony for Wisconsin; check dated 10/15/2018

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item
**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 5000.00

48800.00