

# 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 186

(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. CRONIN, JAMES, , ,

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 Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : PR2560821154013

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

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

B. THOMPSON, 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)  
United HealthCare Services IncOccupation (for Individual)  
VP Regl Affs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : PR2561358954013

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

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

C. LUND, 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 Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : PR2561457654013

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

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

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

847.20