

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 Hanger Orthopedic Group Inc. PAC

ADDRESS (number and street) 10910 Domain Drive Suite 300 Austin TX 78758

2. FEC IDENTIFICATION NUMBER C C00430397 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 11 / 27 / 2012 through 12 / 31 / 2012

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 Russell Allen

Signature of Treasurer Russell Allen [Electronically Filed] Date 01 / 31 / 2013

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Hanger Orthopedic Group Inc. PAC

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2012"/> | | 197661.33 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 237403.96 | |
| (c) Total Receipts (from Line 19) | 7975.71 | 70218.34 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 245379.67 | 267879.67 |
| 7. Total Disbursements (from Line 31)..... | 0.00 | 22500.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 245379.67 | 245379.67 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Hanger Orthopedic Group Inc. PAC

Report Covering the Period: From: / / To: / /

| 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)..... | 5859.00 | 32465.94 |
| (ii) Unitemized | 2106.00 | 37674.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 7965.00 | 70139.94 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 7965.00 | 70139.94 |
| 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 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 10.71 | 78.40 |
| 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))..... ▶ | 7975.71 | 70218.34 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 7975.71 | 70218.34 |

DETAILED SUMMARY PAGE
of Disbursements

| 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..... | 0.00 | 22500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(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)) .. | 0.00 | 22500.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00 | 22500.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 7965.00 | 70139.94 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 7965.00 | 70139.94 |
| 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: (check only one) | PAGE 6 OF 36 |
| <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)
Hanger Orthopedic Group Inc. PAC

A. Harvey Sosnoff
Full Name (Last, First, Middle Initial)
Mailing Address 65 River Street
City Holden State MA Zip Code 01520-2301
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1962622726509
Amount of Each Receipt this Period **30.00**
P/R Deduction (\$10.00 Bi-Weekly)

B. Albert P Teoli
Full Name (Last, First, Middle Initial)
Mailing Address 2460 Bradwardine Court
City Cumming State GA Zip Code 30041
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1300.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1962623226509
Amount of Each Receipt this Period **150.00**
P/R Deduction (\$50.00 Bi-Weekly)

C. Jeffrey L Murray
Full Name (Last, First, Middle Initial)
Mailing Address 201 Pond Meadow Road
City Killingworth State CT Zip Code 06419-1122
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1962623426509
Amount of Each Receipt this Period **30.00**
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **210.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 7 OF 36 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial)
A. Brandon E Dale

Mailing Address 3240 E. Stanford Drive

City Paradise Valley State AZ Zip Code 85253

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation VP & General Manager, CARES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962623726509

Amount of Each Receipt this Period **75.00**

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

Full Name (Last, First, Middle Initial)
B. Bradford C. Deudne

Mailing Address 75 A Lake Road Box 350

City Congers State NY Zip Code 10920

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962623926509

Amount of Each Receipt this Period **150.00**

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. George E McHenry

Mailing Address 65 Treehaven Ct.

City The Hills State TX Zip Code 78738-1477

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Executive Vice President & CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962624026509

Amount of Each Receipt this Period **150.00**

P/R Deduction (\$50.00 Bi-Weekly)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Dennis J Huysman
Full Name (Last, First, Middle Initial)

Mailing Address 3 Pickwick Lane

City Old Saybrook State CT Zip Code 06475-1020

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962624126509

Amount of Each Receipt this Period **300.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. Gregory T Cerafice
Full Name (Last, First, Middle Initial)

Mailing Address 762 N W 99th Circle

City Plantation State FL Zip Code 33324-4947

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Administrative Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962624726509

Amount of Each Receipt this Period **75.00**

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

C. Jeffery S Lutz
Full Name (Last, First, Middle Initial)

Mailing Address 100 Shannon Road

City Lafayette State LA Zip Code 70503

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Zone Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1690.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962624926509

Amount of Each Receipt this Period **195.00**

P/R Deduction (\$65.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 36 |
| <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)
Hanger Orthopedic Group Inc. PAC

A. Mark P Voit
Full Name (Last, First, Middle Initial)
Mailing Address 135 Penns Way
City San Antonio State TX Zip Code 78231
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962625626509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Susan Yvonne Mellor
Full Name (Last, First, Middle Initial)
Mailing Address 8 Euclid Avenue
City Hillsborough State NJ Zip Code 08844
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Administrative Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962625826509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Kevin M Carroll
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1013
City Windermere State FL Zip Code 34786
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation VP, Lower Extremity Prosthetic
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962625926509
Amount of Each Receipt this Period 120.00
P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 10 OF 36 |
| <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)
Hanger Orthopedic Group Inc. PAC

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Robert T Simms | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962626026509 |
| Mailing Address 159 Ash St | | Amount of Each Receipt this Period 150.00 |
| City Lake Zurich | State IL | Zip Code 60047-1309 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Director, Materials Management |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1300.00 | P/R Deduction (\$50.00 Bi-Weekly) |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Susan I Van Norman | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962626226509 |
| Mailing Address 25 Connelly Ct | | Amount of Each Receipt this Period 30.00 |
| City Rising Sun | State MD | Zip Code 21911-1044 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Director, Admin Services |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 260.00 | P/R Deduction (\$10.00 Bi-Weekly) |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ernest Gramaglia | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962626426509 |
| Mailing Address 109 Brookside Way | | Amount of Each Receipt this Period 30.00 |
| City Mullica Hill | State NJ | Zip Code 08062-4302 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 260.00 | P/R Deduction (\$10.00 Bi-Weekly) |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 210.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 11 OF 36 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Michael Andrew Jenks
Full Name (Last, First, Middle Initial)
Mailing Address 9631 Denbolme street
City State Zip Code
Huntersville NC 28078
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Hanger Orthopedic Group, Inc. Area Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
520.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012
Transaction ID : PR1962626526509
Amount of Each Receipt this Period
60.00
P/R Deduction (\$20.00 Bi-Weekly)

B. Jeffrey T McGinnis
Full Name (Last, First, Middle Initial)
Mailing Address 2081 Hempstead Rd.
City State Zip Code
Rock Hill SC 29732
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Hanger Orthopedic Group, Inc. Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012
Transaction ID : PR1962626626509
Amount of Each Receipt this Period
30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Arthur J Roberts
Full Name (Last, First, Middle Initial)
Mailing Address 1901 Trolley Road
City State Zip Code
York PA 17408-1543
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Hanger Orthopedic Group, Inc. Practitioner - CO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012
Transaction ID : PR1962627226509
Amount of Each Receipt this Period
30.00
P/R Deduction (\$10.00 Bi-Weekly)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 36 |
| | <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)
Hanger Orthopedic Group Inc. PAC

A. Thomas F Kirk
Full Name (Last, First, Middle Initial)

Mailing Address 2616 Lighthouse Bend Drive

City State Zip Code
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Vice Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt
12 / 31 / 2012

Transaction ID : PR1962627526509

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Frank Erdeljac
Full Name (Last, First, Middle Initial)

Mailing Address 137 Martin Road

City State Zip Code
Pittsburgh PA 15237-3726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Practitioner - CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt
12 / 31 / 2012

Transaction ID : PR1962627626509

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Richmond L Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 23848 Skyline Dr.

City State Zip Code
Mission Viejo CA 92692-1875

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. President, HPO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt
12 / 31 / 2012

Transaction ID : PR1962627726509

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 13 OF 36 |
| <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)
Hanger Orthopedic Group Inc. PAC

A. Kyle C Hammersmith
Full Name (Last, First, Middle Initial)
Mailing Address 314 Silent Spring Dr.
City Cedar Park State TX Zip Code 78613
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Sr Software Engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012
Transaction ID : PR1962628026509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Linda Fowler
Full Name (Last, First, Middle Initial)
Mailing Address 9036 Dansforeshire Way
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Administrative Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012
Transaction ID : PR1962628726509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Kent D Lane
Full Name (Last, First, Middle Initial)
Mailing Address 103 Segwun Drive
City Lexington State SC Zip Code 29072
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012
Transaction ID : PR1962629026509
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 210.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 14 OF 36 |
| <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)
Hanger Orthopedic Group Inc. PAC

A. Hugh J Panton
Full Name (Last, First, Middle Initial)
Mailing Address 17 Island Road
City Sewalls Point State FL Zip Code 34996
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Senior Clinical Advisor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 591.94

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962629726509
Amount of Each Receipt this Period 75.00
P/R Deduction (\$25.00 Bi-Weekly)

B. Anthony Borrás
Full Name (Last, First, Middle Initial)
Mailing Address 2118 Imperial Circle
City Naples State FL Zip Code 34110
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Business Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962629926509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

c. Michael L Schlesinger
Full Name (Last, First, Middle Initial)
Mailing Address 3012 Heathmount Drive
City Cedar Park State TX Zip Code 78613
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation VP, Corp Business Development
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962630226509
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 255.00
TOTAL This Period (last page this line number only).....▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Kenneth E Cerimele
 Full Name (Last, First, Middle Initial)
 Mailing Address 1070 Fox Den Tr.
 City Canfield State OH Zip Code 44406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Director of Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962630426509
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

B. Jeffrey L Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 8009 Lake Mountain Lane
 City Austin State TX Zip Code 78641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Director, Mergers & Acquisition
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962630626509
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

C. Mark S Helle
 Full Name (Last, First, Middle Initial)
 Mailing Address 1809 Foxridge Court
 City Aurora State IL Zip Code 60502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Vice President, Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962630826509
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 16 OF 36 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Steven G Mersch
Full Name (Last, First, Middle Initial)
Mailing Address 6851 NW 40th Drive

| | | |
|---------------------|-------------|------------------------|
| City Gainesville | State FL | Zip Code 32653-8339 |
|---------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|-------------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager |
|---|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962631426509

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

P/R Deduction (\$10.00 Bi-Weekly)

B. Lars V Jensen
Full Name (Last, First, Middle Initial)
Mailing Address 701 Hawthorn Court

| | | |
|-------------------|-------------|------------------------|
| City San Ramon | State CA | Zip Code 94583-5641 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---------------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Regional Vice President |
|---|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962632026509

Amount of Each Receipt this Period

| |
|-------|
| 45.00 |
|-------|

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

C. James Spielmann
Full Name (Last, First, Middle Initial)
Mailing Address 3200 Island Club North #17

| | | |
|----------------|-------------|-------------------|
| City Racine | State WI | Zip Code 53405 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|-------------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager |
|---|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962632226509

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

P/R Deduction (\$10.00 Bi-Weekly)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 105.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Edward S Gormanson
Full Name (Last, First, Middle Initial)

Mailing Address 9013 Windwood

City State Zip Code
Wichita KS 67226-1510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Practice Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
12 / 31 / 2012

Transaction ID : PR1962632626509

Amount of Each Receipt this Period
75.00

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

B. Francis Alan Hammer
Full Name (Last, First, Middle Initial)

Mailing Address 12436 Fort West

City State Zip Code
Knoxville TN 37934-1342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Practice Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
12 / 31 / 2012

Transaction ID : PR1962632826509

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

C. Eric Burns
Full Name (Last, First, Middle Initial)

Mailing Address 2925 E Racquet Court

City State Zip Code
Tucson AZ 85716-1096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt
12 / 31 / 2012

Transaction ID : PR1962633126509

Amount of Each Receipt this Period
60.00

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

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 165.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 36 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. James R Wilkinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2840 Locksley Court
 City Tucker State GA Zip Code 30084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962633226509
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

B. Micah J Saterfield
 Full Name (Last, First, Middle Initial)
 Mailing Address 14507 Wildflower Loop
 City Fort Smith State AR Zip Code 72916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962633426509
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

C. Joann M Guilbeaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Greenfield Drive
 City Carencro State LA Zip Code 70520-5927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Administrative Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962633526509
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 90.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Pamela M Gibson
Full Name (Last, First, Middle Initial)
Mailing Address 4731 Lunsford Hollow Lane
City Friendswood State TX Zip Code 77546
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962633726509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Steve Prock
Full Name (Last, First, Middle Initial)
Mailing Address 1011 Higgins Rd
City Sherman State TX Zip Code 75092-6519
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962633926509
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

C. Ruthie Ann Boan
Full Name (Last, First, Middle Initial)
Mailing Address 605 West 11th Street
City Sulphur State OK Zip Code 73086-5409
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Administrative Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962634026509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 210.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Kirby G Shelton
Full Name (Last, First, Middle Initial)
Mailing Address 10020 Gramercy

| | | |
|-----------------------|-------------|------------------------|
| City Oklahoma City | State OK | Zip Code 73139-5416 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---------------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Regional Vice President |
|---|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962634426509

Amount of Each Receipt this Period

| |
|-------|
| 75.00 |
|-------|

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

B. Delbert Lipe
Full Name (Last, First, Middle Initial)
Mailing Address 26746 Orchid Trail

| | | |
|----------------|-------------|------------------------|
| City Boerne | State TX | Zip Code 78006-5547 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|-------------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager |
|---|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962634926509

Amount of Each Receipt this Period

| |
|-------|
| 75.00 |
|-------|

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

C. Louis Zermeno
Full Name (Last, First, Middle Initial)
Mailing Address 211 Island Falls

| | | |
|-------------------|-------------|-------------------|
| City Sunnyvale | State TX | Zip Code 75182 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---------------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Regional Vice President |
|---|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962635526509

Amount of Each Receipt this Period

| |
|--------|
| 150.00 |
|--------|

P/R Deduction (\$50.00 Bi-Weekly)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Myron P Griffin
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 Dream Spirit Drive
 City State Zip Code
 Santa Teresa NM 88003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hanger Orthopedic Group, Inc. Practitioner-CPO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : PR1962635726509
 Amount of Each Receipt this Period
 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

B. Robert J McKenzie
 Full Name (Last, First, Middle Initial)
 Mailing Address 7246 Jonathan Ave S
 City State Zip Code
 Cottage Grove MN 55016-3657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hanger Orthopedic Group, Inc. Practice Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : PR1962636226509
 Amount of Each Receipt this Period
 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

C. Glen E Goranson
 Full Name (Last, First, Middle Initial)
 Mailing Address 885 Post Road
 City State Zip Code
 Brookfield WI 53005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hanger Orthopedic Group, Inc. Practice Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : PR1962636326509
 Amount of Each Receipt this Period
 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 22 OF 36 |
| <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)
Hanger Orthopedic Group Inc. PAC

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Stacy McFarland | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962636726509 |
| Mailing Address 116 19th Avenue North # 203 | | Amount of Each Receipt this Period 60.00 |
| City Jacksonville Beach | State FL | Zip Code 32250 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Regional Director |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 | P/R Deduction (\$20.00 Bi-Weekly) |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Barry Campbell | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962638226509 |
| Mailing Address 601 E 69th St | | Amount of Each Receipt this Period 30.00 |
| City Kansas City | State MO | Zip Code 64131-1329 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Practice Manager |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 260.00 | P/R Deduction (\$10.00 Bi-Weekly) |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. John S Hildebrand | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962638526509 |
| Mailing Address 5622 Billy Casper Dr | | Amount of Each Receipt this Period 45.00 |
| City Billings | State MT | Zip Code 59106-1027 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Regional Director |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 440.00 | P/R Deduction (\$15.00 Bi-Weekly) |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 135.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 23 OF 36 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Craig V Watson
Full Name (Last, First, Middle Initial)
Mailing Address 500 N. Berkeley Way
City Medford State OR Zip Code 97504
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962638626509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Mark R Muller
Full Name (Last, First, Middle Initial)
Mailing Address 1233 S. Sweetwater Ave
City Pueblo West State CO Zip Code 81007
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962638926509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Frank Bostock
Full Name (Last, First, Middle Initial)
Mailing Address 2 W Kaler Drive
City Phoenix State AZ Zip Code 85021-7237
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962639126509
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 210.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. William Hineman
Full Name (Last, First, Middle Initial)
Mailing Address 3121 Morgan Circle
City Bismarck State ND Zip Code 58503-0102
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962639226509
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

B. Alistair Q Gibson
Full Name (Last, First, Middle Initial)
Mailing Address 1928 Lake Roberts Landing Drive
City Winter Garden State FL Zip Code 34787
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962639626509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Donald W. Meng
Full Name (Last, First, Middle Initial)
Mailing Address 1016 S. Steen Court
City Spokane Valley State WA Zip Code 99037
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Wash-Area Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962639726509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 210.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Kaia Ann Busch
Full Name (Last, First, Middle Initial)
Mailing Address 4129 228th St. SE

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Bothell | WA | 98021 |

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------------|-------------------------|
| Name of Employer | Occupation |
| Hanger Orthopedic Group, Inc. | Regional Vice President |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962640426509

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

P/R Deduction (\$10.00 Bi-Weekly)

B. Michael R George
Full Name (Last, First, Middle Initial)
Mailing Address 28 San Tomas

| | | |
|------------------------|-------|----------|
| City | State | Zip Code |
| Rancho Santa Margarita | CA | 92688 |

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------------|----------------------------|
| Name of Employer | Occupation |
| Hanger Orthopedic Group, Inc. | Vice President, Operations |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962641526509

Amount of Each Receipt this Period

| |
|--------|
| 150.00 |
|--------|

P/R Deduction (\$50.00 Bi-Weekly)

C. Kathleen A Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 829 N Chestnut St

| | | |
|----------|-------|------------|
| City | State | Zip Code |
| La Habra | CA | 90631-3008 |

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------------|-----------------------------|
| Name of Employer | Occupation |
| Hanger Orthopedic Group, Inc. | Area Administrative Manager |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962641626509

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

P/R Deduction (\$10.00 Bi-Weekly)

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 210.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

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

Mailing Address 4088 Kingston Terrace

City State Zip Code
Sarasota FL 34238-2632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Area Practice Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012

Transaction ID : PR1962642426509

Amount of Each Receipt this Period
24.00

P/R Deduction (\$8.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Geoffrey S Hemmen

Mailing Address 1505 Chatham Ct.

City State Zip Code
St. Augustine FL 32092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Area Practice Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012

Transaction ID : PR1962642526509

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. James A McCalmont

Mailing Address 8419 East Shetland Trail

City State Zip Code
Scottsdale AZ 85258

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Area Practice Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012

Transaction ID : PR1962642826509

Amount of Each Receipt this Period
75.00

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

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 129.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Bret T Bostock
 Full Name (Last, First, Middle Initial)
 Mailing Address 1018 W. State Ave.
 City Phoenix State AZ Zip Code 85021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation National Orthotics Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1962642926509
 Amount of Each Receipt this Period **75.00**
 P/R Deduction (\$25.00 Bi-Weekly)

B. Wallis Farraday
 Full Name (Last, First, Middle Initial)
 Mailing Address 4525 South Atlantic Avenue #1303
 City Ponce Inlet State FL Zip Code 32127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Zone Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1962643126509
 Amount of Each Receipt this Period **150.00**
 P/R Deduction (\$50.00 Bi-Weekly)

C. Joseph R Garcia
 Full Name (Last, First, Middle Initial)
 Mailing Address 5240 Huntington Reserve Drive
 City Parma State OH Zip Code 44134-6171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1962643726509
 Amount of Each Receipt this Period **30.00**
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **255.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 28 OF 36 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. John W Burns
Full Name (Last, First, Middle Initial)

Mailing Address 45343 Callesito Burgos

| | | |
|------------------|-------------|-------------------|
| City Temecula | State CA | Zip Code 92592 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Practitioner - CP |
|---|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962644026509

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

P/R Deduction (\$10.00 Bi-Weekly)

B. Richard F Hall
Full Name (Last, First, Middle Initial)

Mailing Address 427 Holly Lane

| | | |
|-----------------|-------------|-------------------|
| City Oakdale | State MN | Zip Code 55128 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|-------------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager |
|---|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962645126509

Amount of Each Receipt this Period

| |
|-------|
| 75.00 |
|-------|

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

C. Rebecca Jo Hast
Full Name (Last, First, Middle Initial)

Mailing Address 17344 Lafayette Drive

| | | |
|---------------|-------------|-------------------|
| City Olney | State MD | Zip Code 20832 |
|---------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---------------------------------|
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation President, Linkia |
|---|---------------------------------|

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 |
| 12 | / | 31 | / | 2012 |

Transaction ID : PR1962645626509

Amount of Each Receipt this Period

| |
|-------|
| 90.00 |
|-------|

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

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 195.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 36 |
| | <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)
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial)
A. Michael A Ross

Mailing Address 203 Landons Way

City State Zip Code
Georgetown TX 78628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Director, Manufacturing Oper.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : PR1962646326509

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Joey R Stevens

Mailing Address 148 Moultrie Crossing Lane

City State Zip Code
St Augustine FL 32086

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Account Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : PR1962647926509

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Thomas Edward Hartman

Mailing Address 12515 Calistoga Way

City State Zip Code
Austin TX 78732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hanger Orthopedic Group, Inc. Vice Pres. & General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : PR1962648226509

Amount of Each Receipt this Period
75.00

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

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 135.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. William J Dwyer III
Full Name (Last, First, Middle Initial)

Mailing Address 43 Ciccio Road

City Southington State CT Zip Code 06489

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962648426509

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. Eric W Craig
Full Name (Last, First, Middle Initial)

Mailing Address 6240 Beacon Station Dr.

City Cumming State GA Zip Code 30041

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Vice President, Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962648826509

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

C. John Rheinstein
Full Name (Last, First, Middle Initial)

Mailing Address 905 West End Apt # 94

City New York State NY Zip Code 10025-3530

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : PR1962649226509

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Dana Celeste Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 5436 S. Everett Way
City Littleton State CO Zip Code 80123
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962653326509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Scott A Klosterman
Full Name (Last, First, Middle Initial)
Mailing Address 1200 Barton Creek Boulevard Unit 20
City Austin State TX Zip Code 78735
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation General Manager - Dosteon
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962653526509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Algis J Maciunas
Full Name (Last, First, Middle Initial)
Mailing Address 34 Ox Yoke Drive
City Wethersfield State CT Zip Code 06109-3750
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962653626509
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Louis J Mestier
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207A Enfield Road
 City Austin State TX Zip Code 78703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Director, Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962653726509
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

B. Matthew D Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5292 Vernon Lake Drive
 City Dunwoody State GA Zip Code 30338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962653826509
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$10.00 Bi-Weekly)

C. Arthur E Price
 Full Name (Last, First, Middle Initial)
 Mailing Address 32076 Corte Escobar
 City Temecula State CA Zip Code 92592-3662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Practitioner-CPO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1962654026509
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 33 OF 36 |
| <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)
Hanger Orthopedic Group Inc. PAC

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. John William Tew | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962654126509 |
| Mailing Address 15435 Manchac View Ct | | Amount of Each Receipt this Period 60.00 |
| City Baton Rouge | State LA | Zip Code 70810 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 | P/R Deduction (\$20.00 Bi-Weekly) |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Mark J Harris | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962654226509 |
| Mailing Address 211 Hughes Street | | Amount of Each Receipt this Period 60.00 |
| City Fort Walton Beach | State FL | Zip Code 32548-6441 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Soft Goods Fitter |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 | P/R Deduction (\$20.00 Bi-Weekly) |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Thomas Vincent DiBello | | Date of Receipt 12 / 31 / 2012 Transaction ID : PR1962654326509 |
| Mailing Address 403 Timber Grove Place | | Amount of Each Receipt this Period 150.00 |
| City Friendswood | State TX | Zip Code 77546 |
| FEC ID number of contributing federal political committee. C | Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1300.00 | P/R Deduction (\$50.00 Bi-Weekly) |

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|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 270.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 36 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Vinit Asar
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Dawn River Cove
 City Austin State TX Zip Code 78732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation President & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1962656626509
 Amount of Each Receipt this Period **30.00**
 P/R Deduction (\$10.00 Bi-Weekly)

B. Debbie Koepsel
 Full Name (Last, First, Middle Initial)
 Mailing Address 2026 E Calle De Dulcinea
 City Tucson State AZ Zip Code 85718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation ACP Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1986227026509
 Amount of Each Receipt this Period **30.00**
 P/R Deduction (\$10.00 Bi-Weekly)

C. Marc R Kowatic
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Fox Path Drive
 City Moon Township State PA Zip Code 15108-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : PR1986227126509
 Amount of Each Receipt this Period **30.00**
 P/R Deduction (\$10.00 Bi-Weekly)

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | 90.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Nicole Lynette Simon | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2012 |
| Mailing Address 176 Mercury Street | | Transaction ID : PR1986227226509 |
| City Sulphur | State LA | Zip Code 70665 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 75.00 |
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Administrative Manager | P/R Deduction (\$25.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Deborah T Adkins | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2012 |
| Mailing Address 1907 Clubhouse Road | | Transaction ID : PR1986227426509 |
| City Lakeland | State FL | Zip Code 33813 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 30.00 |
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Director of Clinical Support | P/R Deduction (\$10.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Robert D Price | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2012 |
| Mailing Address 118 Private Drive 963 | | Transaction ID : PR1986227826509 |
| City Ironton | State OH | Zip Code 45638-9123 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 30.00 |
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation Area Practice Manager | P/R Deduction (\$10.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

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|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 135.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hanger Orthopedic Group Inc. PAC

A. Barnet R Hellman
Full Name (Last, First, Middle Initial)

Mailing Address 12403 Mellow Meadow Drive #807

City Austin State TX Zip Code 78756

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Sr Manager, IT Corp. Systems

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1986228126509

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

B. Jay Charles Wendt
Full Name (Last, First, Middle Initial)

Mailing Address 2405 Danbury Drive

City Colleyville State TX Zip Code 76034

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Zone Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1986228226509

Amount of Each Receipt this Period 90.00

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

C. Raymond Michael Hendon
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1771

City San Marcos State TX Zip Code 78667-1771

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group, Inc. Occupation Director, Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2012
Transaction ID : PR1986228326509

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 150.00 |
| TOTAL This Period (last page this line number only).....▶ | 5859.00 |