

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Hanger Orthopedic Group Inc. PAC

ADDRESS (number and street) 2 Bethesda Metro Center Suite 1200  
Check if different than previously reported. (ACC) Bethesda MD 20814

2. **FEC IDENTIFICATION NUMBER** C00430397  
3. IS THIS REPORT  NEW (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 Quarterly 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 \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2010 through 06 30 2010

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 Sam Reimer

Signature of Treasurer Electronically Filed by Sam Reimer Date 07 20 2010

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Hanger Orthopedic Group Inc. PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		76897.01
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	100102.07									
(c) Total Receipts (from Line 19) .....	5557.55	33794.78								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	105659.62	110691.79								
7. Total Disbursements (from Line 31) .....	0.00	5032.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	105659.62	105659.62								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Hanger Orthopedic Group Inc. PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	3170.00	11620.00
(ii) Unitemized .....	2382.00	22161.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5552.00	33781.00
(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) .....	5552.00	33781.00
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.) .....	5.55	13.78
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 Transfer (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)) .....	5557.55	33794.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5557.55	33794.78

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	32.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	32.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	5032.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	5032.17

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	5552.00	33781.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5552.00	33781.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	32.17
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	32.17

**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 / 19
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Frank Bostock	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 2 W Kaler Drive	<b>Transaction ID:</b> PR1481041723925
	City State Zip Code Phoenix AZ 85021-7237	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Eric Burns	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 2925 E Racquet Court	<b>Transaction ID:</b> PR1481042023925
	City State Zip Code Tucson AZ 85716-1096	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Semi-Monthly)
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 ▼ 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kevin M Carroll	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address P.O. Box 1013	<b>Transaction ID:</b> PR1481042123925
	City State Zip Code Windermere FL 34786	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$40.00 Semi-Monthly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation VP, Lower Extremity Prosthetic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>220.00</b>
<b>TOTAL</b> 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 / 19  
(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)  
Hanger Orthopedic Group Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mark A Conry

Mailing Address 35 Linden Avenue  
Apt 504

City Long Beach State CA Zip Code 90802-5061

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 30 / 2010

**Transaction ID:** PR1481042323925

Amount of Each Receipt this Period 50.00

P/R Deduction (\$25.00 Semi-Monthly)

**B.**

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

Mailing Address 33 Meriwether Trail

City Congers State NY Zip Code 10920-1538

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2010

**Transaction ID:** PR1481042723925

Amount of Each Receipt this Period 100.00

P/R Deduction (\$50.00 Semi-Monthly)

**C.**

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

Mailing Address 137 Martin Road

City Pittsburgh State PA Zip Code 15237-3726

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 ▼ 600.00

Date of Receipt 06 / 30 / 2010

**Transaction ID:** PR1481042823925

Amount of Each Receipt this Period 100.00

P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 250.00

**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 8 / 19  
(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.** Full Name (Last, First, Middle Initial)  
Charles P Escallier

Mailing Address 4500 Steiner Ranch Blvd.  
#2602

City Austin State TX Zip Code 78732

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation Director, Marketing Inn Inc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2010  
Transaction ID: PR1481042923925  
Amount of Each Receipt this Period 50.00  
P/R Deduction (\$25.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Wallis Farraday

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 Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2010  
Transaction ID: PR1481043123925  
Amount of Each Receipt this Period 100.00  
P/R Deduction (\$50.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Michael R George

Mailing Address 28 San Tomas

City Rancho Santa Marga State CA Zip Code 92688

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 ▼ 600.00

Date of Receipt 06 / 30 / 2010  
Transaction ID: PR1481043523925  
Amount of Each Receipt this Period 100.00  
P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 250.00

**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 9 / 19  
(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.** Full Name (Last, First, Middle Initial)  
Myron P Griffin

Mailing Address 5452 Cactus Hill

City State Zip Code  
El Paso TX 79912-6307

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 ▼ 300.00

Date of Receipt: 06 / 30 / 2010  
**Transaction ID:** PR1481044123925  
 Amount of Each Receipt this Period: 50.00  
 P/R Deduction (\$25.00 Semi-Monthly)

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

Mailing Address 17344 Lafayette Dr

City State Zip Code  
Olney MD 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 ▼ 360.00

Date of Receipt: 06 / 30 / 2010  
**Transaction ID:** PR1481044423925  
 Amount of Each Receipt this Period: 60.00  
 P/R Deduction (\$30.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
John S Hildebrand

Mailing Address 5622 Billy Casper Dr

City State Zip Code  
Billings MT 59106-1027

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

Name of Employer: Hanger Orthopedic Group, Inc.  
Occupation: Associate Market Leader

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 06 / 30 / 2010  
**Transaction ID:** PR1481045023925  
 Amount of Each Receipt this Period: 80.00  
 P/R Deduction (\$40.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.00

**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 / 19
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) William Hineman		Date of Receipt MM / DD / YYYY 06 / 30 / 2010		
	Mailing Address 3121 Morgan Circle		<b>Transaction ID:</b> PR1481045123925		
	City Bismarck	State ND	Zip Code 58503-0102	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)		
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	Aggregate Year-to-Date 600.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Dennis J Huysman		Date of Receipt MM / DD / YYYY 06 / 30 / 2010		
	Mailing Address 3 Pickwick Lane		<b>Transaction ID:</b> PR1481045323925		
	City Old Saybrook	State CT	Zip Code 06475-1020	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)		
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	Aggregate Year-to-Date 600.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael A Jenks		Date of Receipt MM / DD / YYYY 06 / 30 / 2010		
	Mailing Address 18315 Marbor Light Blvd		<b>Transaction ID:</b> PR1481045523925		
	City Cornelius	State NC	Zip Code 28031	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Semi-Monthly)		
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager	Aggregate Year-to-Date 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	240.00
<b>TOTAL</b> 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 / 19  
(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)  
Hanger Orthopedic Group Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City State Zip Code  
Phoenixville PA 19460-2115

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 ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481045923925

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Semi-Monthly)

**B.**

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

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  
Hanger Orthopedic Group, Inc.

Occupation  
President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481046223925

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Kent D Lane

Mailing Address 103 Segwun Drive

City State Zip Code  
Lexington SC 29072

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481046923925

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

**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 / 19
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Terry D Loveless		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 8432 Link Hills Loop		<b>Transaction ID:</b> PR1481047023925
	City Gainesville	State VA	Zip Code 20155
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffery S Lutz		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 100 Shannon Road		<b>Transaction ID:</b> PR1481047223925
	City Lafayette	State LA	Zip Code 70503
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 130.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	P/R Deduction (\$65.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey L Martin		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 8009 Lake Mountain Lane		<b>Transaction ID:</b> PR1481047323925
	City Austin	State TX	Zip Code 78641
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation VP, Programs and Initiatives	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	280.00
<b>TOTAL</b> 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 / 19
	<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	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Stacy McFarland	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 116 19th Avenue North # 203	<b>Transaction ID:</b> PR1481047523925
	City State Zip Code Jacksonville Beach FL 32250	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Semi-Monthly)
	Name of Employer: Hanger Orthopedic Group, Inc. Occupation: Business Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) George E McHenry	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 25205 Bonny Brook Lane	<b>Transaction ID:</b> PR1481047723925
	City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Semi-Monthly)
	Name of Employer: Hanger Orthopedic Group, Inc. Occupation: Executive Vice President & CFO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marion Leona Mullauer	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 610 Sherwood Road	<b>Transaction ID:</b> PR1481048423925
	City State Zip Code Cockeysville MD 21030	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 Semi-Monthly)
	Name of Employer: Hanger Orthopedic Group, Inc. Occupation: Vice President & CIO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	190.00
<b>TOTAL</b> 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 14 / 19  
(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.** Full Name (Last, First, Middle Initial)  
Hugh J Panton

Mailing Address 17 Island Road

City State Zip Code  
Sewalls Point FL 34996

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

**Transaction ID:** PR1481048823925

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Ambrose R Phillips

Mailing Address 14509 Clover Hill Terrace

City State Zip Code  
Bowie MD 20720

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Director, Treasury

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

**Transaction ID:** PR1481049123925

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Ivan R Sabel

Mailing Address 4819 Quebec Street NW

City State Zip Code  
Washington DC 20016-3228

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Executive Chairman

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

**Transaction ID:** PR1481050423925

Amount of Each Receipt this Period  
200.00

P/R Deduction (\$100.00 Semi-Monthly)

**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 15 / 19  
(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)  
Hanger Orthopedic Group Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
VP, Mergers & Acquisitions

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481050523925

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Kirby G Shelton

Mailing Address 10020 Gramercy

City State Zip Code  
Oklahoma City OK 73139-5416

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481050623925

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Robert T Simms

Mailing Address 159 Ash St

City State Zip Code  
Lake Zurich IL 60047-1309

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Director, Matierals Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481050723925

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

**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 16 / 19
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Richmond L Taylor	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 23848 Skyline Dr.	<b>Transaction ID:</b> PR1481051423925
	City Mission Viejo State CA Zip Code 92692-1875	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Albert P Teoli	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 2460 Bradwardine Court	<b>Transaction ID:</b> PR1481051523925
	City Cumming State GA Zip Code 30041	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Louis Zermeno	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 211 Island Falls	<b>Transaction ID:</b> PR1481052323925
	City Sunnyvale State TX Zip Code 75182	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> 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 / 19
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard F Hall	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 1650 Linson Circle	<b>Transaction ID:</b> PR1481052623925
	City State Zip Code Stillwater MN 55082	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 Semi-Monthly)
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 ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bret T Bostock	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 1018 W. State Ave.	<b>Transaction ID:</b> PR1481053923925
	City State Zip Code Phoenix AZ 85021	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 Semi-Monthly)
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 ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brandon E Dale	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 3240 E. Stanford Drive	<b>Transaction ID:</b> PR1481054523925
	City State Zip Code Paradise Valley AZ 85253	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation VP & General Manager, CARES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> 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 18 / 19  
(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)  
Hanger Orthopedic Group Inc. PAC

**A.**

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

Mailing Address 9013 Windwood

City State Zip Code  
Wichita KS 67226-1510

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 ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481055423925

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Delbert Lipe

Mailing Address 26746 Orchid Trail

City State Zip Code  
Boerne TX 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 ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481057623925

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Semi-Monthly)

**C.**

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

Mailing Address 40802 N River Bend RD

City State Zip Code  
Anthem AZ 85086

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 ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** PR1481057923925

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **150.00**

**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 19 / 19  
(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.** Full Name (Last, First, Middle Initial)  
Steve Prock

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 ▼ 600.00

Date of Receipt 06 / 30 / 2010

**Transaction ID:** PR1504291923925

Amount of Each Receipt this Period 100.00

P/R Deduction (\$50.00 Semi-Monthly)

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

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 Practice Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2010

**Transaction ID:** PR1624554123925

Amount of Each Receipt this Period 50.00

P/R Deduction (\$25.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

**TOTAL** This Period (last page this line number only) ..... ► 3170.00