

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) 10910 Domain Drive Suite 300
 Check if different than previously reported. (ACC)
Austin TX 78758

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 (12G)
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 04 01 2011 through 04 30 2011

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 05 20 2011

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	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		134811.00
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	151192.53									
(c) Total Receipts (from Line 19)	5657.80	22039.33								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	156850.33	156850.33								
7. Total Disbursements (from Line 31)	585.98	585.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	156264.35	156264.35								
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:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	2150.00	4270.00
(ii) Unitemized	3500.00	17740.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5650.00	22010.00
(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)	5650.00	22010.00
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.)	7.80	29.33
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))	5657.80	22039.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5657.80	22039.33

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	85.98	85.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	85.98	85.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	500.00	500.00
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))..	585.98	585.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	585.98	585.98

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)	5650.00	22010.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5650.00	22010.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	85.98	85.98
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	85.98	85.98

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

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

A.

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

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 Market Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1481041725088

Amount of Each Receipt this Period 100.00

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

B.

Full Name (Last, First, Middle Initial)
Kevin M Carroll

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 ▼ 320.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1481042125088

Amount of Each Receipt this Period 80.00

P/R Deduction (\$40.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
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 Market Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2011

Transaction ID: PR1481042725088

Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) ► 280.00

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 / 14
(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) Frank Erdeljac		Date of Receipt MM / DD / YYYY 04 / 30 / 2011
Mailing Address 137 Martin Road		Transaction ID: PR1481042825088
City Pittsburgh	State Zip Code PA 15237-3726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Practitioner - CO	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 ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Wallis Farraday		Date of Receipt MM / DD / YYYY 04 / 30 / 2011
Mailing Address 4525 South Atlantic Avenue #1303		Transaction ID: PR1481043125088
City Ponce Inlet	State Zip Code FL 32127	
FEC ID number of contributing federal political committee. C		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 ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Michael R George		Date of Receipt MM / DD / YYYY 04 / 30 / 2011
Mailing Address 28 San Tomas		Transaction ID: PR1481043525088
City Rancho Santa Marga	State Zip Code CA 92688	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Vice President, Operations	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 ▼ 400.00	

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 8 / 14
	<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) Rebecca Jo Hast	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 17344 Lafayette Drive	Transaction ID: PR1481044425088
	City Olney State MD Zip Code 20832	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation President, Linkia	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) John S Hildebrand	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 5622 Billy Casper Dr	Transaction ID: PR1481045025088
	City Billings State MT Zip Code 59106-1027	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$40.00 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 ▼ 320.00	

C.	Full Name (Last, First, Middle Initial) William Hineman	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 3121 Morgan Circle	Transaction ID: PR1481045125088
	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	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	240.00
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 / 14
(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)
Dennis J Huysman

Mailing Address 3 Pickwick Lane

City State Zip Code
Old Saybrook CT 06475-1020

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
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: PR1481045325088

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 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 ▼
400.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: PR1481046225088

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 ▼
400.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: PR1481046925088

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 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 10 / 14
(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)
Terry D Loveless

Mailing Address 8432 Link Hills Loop

City State Zip Code
Gainesville VA 20155

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
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: PR1481047025088

Amount of Each Receipt this Period
100.00

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

B.

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

Mailing Address 100 Shannon Road

City State Zip Code
Lafayette LA 70503

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 ▼
520.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: PR1481047225088

Amount of Each Receipt this Period
130.00

P/R Deduction (\$65.00 Semi-Monthly)

C.

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

Mailing Address 801 West Fifth Street
Unit 2106

City State Zip Code
Austin TX 78703

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 ▼
400.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: PR1481047725088

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **330.00**

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 / 14
(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)
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, Corp Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	1

Transaction ID: PR1481050525088

Amount of Each Receipt this Period
100.00

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

B. 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, Materials Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	1

Transaction ID: PR1481050725088

Amount of Each Receipt this Period
100.00

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

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

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
Hanger Orthopedic Group, Inc.

Occupation
President, HPO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	1

Transaction ID: PR1481051425088

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 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 12 / 14
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Albert P Teoli

Mailing Address 2460 Bradwardine Court

City State Zip Code
Cumming GA 30041

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 4 / 3 0 / 2 0 1 1

Transaction ID: PR1481051525088

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
Louis Zermeno

Mailing Address 211 Island Falls

City State Zip Code
Sunnyvale TX 75182

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
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR1481052325088

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
Steve Prock

Mailing Address 1011 Higgins Rd

City State Zip Code
Sherman TX 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 ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: PR1504291925088

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 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 13 / 14
	(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)
Thomas Vincent DiBello

Mailing Address 403 Timber Grove Place

City Friendswood State TX Zip Code 77546-8409

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

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	1

Transaction ID: PR1858237225088

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	2150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial)
Wally Herger For Congress Committee

Mailing Address PO Box 1007

City Willows State CA Zip Code 95988

Purpose of Disbursement
Contribution

Candidate Name
Rep. Wally Herger

Office Sought: House
 Senate
 President
State: CA District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 19070292

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contribution

SUBTOTAL of Disbursements This Page (optional) ►

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