

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 (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 03 01 2008 through 03 31 2008

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 Hai Tran

Signature of Treasurer Electronically Filed by Hai Tran Date 04 17 2008

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	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		33744.07
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	35069.18									
(c) Total Receipts (from Line 19)	7243.59	21568.70								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	42312.77	55312.77								
7. Total Disbursements (from Line 31)	6258.67	19258.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	36054.10	36054.10								
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	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4739.00	13624.00
(i) Itemized (use Schedule A)	2419.00	7667.00
(ii) Unitemized	7158.00	21291.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7158.00	21291.00
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.)	85.59	277.70
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))	7243.59	21568.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7243.59	21568.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	258.67	258.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	258.67	258.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	16000.00
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.....	1000.00	3000.00
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))..	6258.67	19258.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6258.67	19258.67

DETAILED SUMMARY PAGE
of Disbursements

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)	7158.00	21291.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7158.00	21291.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	258.67	258.67
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	258.67	258.67

**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 / 22
	<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) Eric A Green	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 1120 Park Avenue, Apt. 3A	Transaction ID: 15247202
	City State Zip Code New York NY 10128-1242	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CastleHill Investment Management, Inc Occupation Investment Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Thomas Cooper	Date of Receipt MM / DD / YYYY 03 / 25 / 2008
	Mailing Address 4715 Viewridge Avenue, Suite 230	Transaction ID: 15247203
	City State Zip Code San Diego CA 92123-1680	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer VeriCare Management, Inc. Occupation C.E.O./Member, Hanger Board of Directors Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Michael O'Donnell	Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 20 Ashwood Drive	Transaction ID: 15247205
	City State Zip Code Vienna WV 26105-3310	Amount of Each Receipt this Period 250.00
	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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
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 / 22
(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

<p>A. Full Name (Last, First, Middle Initial) Robert L Borengasser</p> <p>Mailing Address 381 W. Larona Lane</p> <p>City State Zip Code Tempe AZ 85284</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hanger Orthopedic Group, Inc.</p> <p>Occupation Director, Operations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 380.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1481041620418</p> <p>Amount of Each Receipt this Period 40.00</p> <p>P/R Deduction (\$20.00 Bi-Weekly)</p>
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<p>B. Full Name (Last, First, Middle Initial) Frank Bostock</p> <p>Mailing Address 2 W Kaler Drive</p> <p>City State Zip Code Phoenix AZ 85021-7237</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hanger Orthopedic Group, Inc.</p> <p>Occupation Market Leader</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1481041720418</p> <p>Amount of Each Receipt this Period 100.00</p> <p>P/R Deduction (\$50.00 Bi-Weekly)</p>
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<p>C. Full Name (Last, First, Middle Initial) Kevin M Carroll</p> <p>Mailing Address P.O. Box 1013</p> <p>City State Zip Code Windermere FL 34786</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hanger Orthopedic Group, Inc.</p> <p>Occupation Vice President, Lower Extremity Prosthetics</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1481042120418</p> <p>Amount of Each Receipt this Period 80.00</p> <p>P/R Deduction (\$40.00 Bi-Weekly)</p>
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SUBTOTAL of Receipts This Page (optional)	220.00
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 / 22	
	<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	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 35 Linden Avenue, Apt 504	Transaction ID: PR1481042320418
	City State Zip Code Long Beach CA 90802-5061	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
	Name of Employer Hanger Orthopedic Group, Inc.	
Occupation Market Leader	Aggregate Year-to-Date 350.00	

B.	Full Name (Last, First, Middle Initial) Bradford C Deudne	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 33 Meriwether Trail	Transaction ID: PR1481042720418
	City State Zip Code Congers NY 10920-1538	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
	Name of Employer Hanger Orthopedic Group, Inc.	
Occupation Market Leader	Aggregate Year-to-Date 350.00	

C.	Full Name (Last, First, Middle Initial) Frank Erdeljac	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 137 Martin Road	Transaction ID: PR1481042820418
	City State Zip Code Pittsburgh PA 15237-3726	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
	Name of Employer Hanger Orthopedic Group, Inc.	
Occupation Associate Market Leader	Aggregate Year-to-Date 350.00	

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 9 / 22
	<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.	Full Name (Last, First, Middle Initial) Wallis Farraday	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 4997 Keeneland Cr	Transaction ID: PR1481043120418
	City Orlando State FL Zip Code 32819-3142	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
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 ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Michael R George	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 28 San Tomas	Transaction ID: PR1481043520418
	City Rancho Santa Marga State CA Zip Code 92688	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Vice President, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Rebecca Jo Hast	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 17344 Lafayette Drive	Transaction ID: PR1481044420418
	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 Bi-Weekly)
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 ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	260.00
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 / 22
(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
							17

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

A.

Full Name (Last, First, Middle Initial)
John N Hathaway

Mailing Address 4825 Leland Street

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer
Hanger Orthopedic Group, Inc.

Occupation
Director, Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR1481044520418

Amount of Each Receipt this Period
100.00

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

B.

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

Mailing Address 5622 Billy Casper Drive

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 ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR1481045020418

Amount of Each Receipt this Period
80.00

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

C.

Full Name (Last, First, Middle Initial)
William Hineman

Mailing Address 3121 Morgan Circle

City State Zip Code
Bismarck ND 58503-0102

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 ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR1481045120418

Amount of Each Receipt this Period
100.00

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

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 11 / 22
(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 ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1481045320418

Amount of Each Receipt this Period
100.00

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

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 & Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1481046220418

Amount of Each Receipt this Period
100.00

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

C.

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

Mailing Address 178 Hunters Ridge Drive

City State Zip Code
Lexington SC 29072-7681

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 ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1481046920418

Amount of Each Receipt this Period
100.00

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: (check only one)	PAGE 12 / 22		
	<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

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

A.	Full Name (Last, First, Middle Initial) Terry D Loveless		Date of Receipt
	Mailing Address 104 Whitley Way		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Lynchburg	VA	24503
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Hanger Orthopedic Group, Inc.		Occupation Associate Market Leader	Transaction ID: PR1481047020418
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 350.00	Amount of Each Receipt this Period <input type="text"/> 100.00
			P/R Deduction (\$50.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Jeffery S Lutz		Date of Receipt
	Mailing Address 100 Shannon Road		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Lafayette	LA	70503
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Hanger Orthopedic Group, Inc.		Occupation Market Leader	Transaction ID: PR1481047220418
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 455.00	Amount of Each Receipt this Period <input type="text"/> 130.00
			P/R Deduction (\$65.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) George E McHenry		Date of Receipt
	Mailing Address 25205 Bonny Brook Lane		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Gaithersburg	MD	20882
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Hanger Orthopedic Group, Inc.		Occupation Vice President & Chief Financial Offic	Transaction ID: PR1481047720418
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 700.00	Amount of Each Receipt this Period <input type="text"/> 200.00
			P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 430.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 22
(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
							17

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

A.

Full Name (Last, First, Middle Initial)
Thomas A Mesick

Mailing Address P.O. Box 370, 21 High Street

City State Zip Code
West Brookfield MA 01585-0370

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 ▼
269.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1481048020418

Amount of Each Receipt this Period
49.00

P/R Deduction (\$5.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
David E Osborne

Mailing Address 9206 Kopachuck Drive NW

City State Zip Code
Gig Harbor WA 98335

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 ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1481048720418

Amount of Each Receipt this Period
100.00

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

C.

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 ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1481048820418

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **249.00**

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 / 22
	<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.	Full Name (Last, First, Middle Initial) John J Rush	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 11419 Patriot Lane	Transaction ID: PR1481050320418
	City Potomac State MD Zip Code 20854	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Bi-Weekly)
	Name of Employer Hanger Orthopedic Group, Inc. Occupation Chief Medical Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

B.	Full Name (Last, First, Middle Initial) Ivan R Sabel	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 4819 Quebec Street NW	Transaction ID: PR1481050420418
	City Washington State DC Zip Code 20016-3228	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Bi-Weekly)
	Name of Employer Hanger Orthopedic Group, Inc. Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

C.	Full Name (Last, First, Middle Initial) Michael L Schlesinger	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 830 Riverhaven Drive	Transaction ID: PR1481050520418
	City Suwanee State GA Zip Code 30024	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
	Name of Employer Hanger Orthopedic Group, Inc. Occupation Vice President, Mergers & Acquisitions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	500.00
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 / 22
	<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) Kirby G Shelton	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 10020 Gramercy	Transaction ID: PR1481050620418
	City State Zip Code Oklahoma City OK 73139-5416	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
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 ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Robert T Simms	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 159 Ash St	Transaction ID: PR1481050720418
	City State Zip Code Lake Zurich IL 60047-1309	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) John Spaeth	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 18325 Rathbun Hills Road	Transaction ID: PR1481051020418
	City State Zip Code Wildwood MO 63069	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
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 ▼ 350.00	

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:	PAGE 16 / 22
	(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.	Full Name (Last, First, Middle Initial) Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 23848 Skyline Dr.		Transaction ID: PR1481051420418
	City Mission Viejo	State CA	Zip Code 92692-1875
	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 President, HPO	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

B.	Full Name (Last, First, Middle Initial) Albert P Teoli		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 7610 St. Marlo Country Club Pk		Transaction ID: PR1481051520418
	City Duluth	State GA	Zip Code 30097-1620
	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 Associate Market Leader	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

C.	Full Name (Last, First, Middle Initial) Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 8 Hawk Road		Transaction ID: PR1481051920418
	City Lawrenceville	State NJ	Zip Code 08648
	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, Human Resources	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

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:	PAGE 17 / 22
	(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) Louis Zermeno		Date of Receipt
Mailing Address 2108 Pecan Creek Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
Mesquite	TX	75181
FEC ID number of contributing federal political committee.		Transaction ID: PR1481052320418
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 100.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 350.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 100.00
TOTAL This Period (last page this line number only)	<input type="text"/> 4739.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 22
(check only one)

<input 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 checked="" type="checkbox"/>	17						

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

A.

Full Name (Last, First, Middle Initial)
Vanguard Group

Mailing Address 455 Devon Park Drive

City State Zip Code
Wayne PA 19087-1815

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: 15339724

Amount of Each Receipt this Period
85.59

SUBTOTAL of Receipts This Page (optional)	▶	85.59
TOTAL This Period (last page this line number only)	▶	85.59

**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 19 / 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

Bank of America - Checking

Mailing Address P.O. Box 27025

City
Richmond

State
VA

Zip Code
23261-7025

Purpose of Disbursement
Federal 2007 1120-POL Taxes

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 15341793

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

258.67

Federal 2007 1120-POL Taxes

SUBTOTAL of Disbursements This Page (optional)

258.67

TOTAL This Period (last page this line number only)

258.67

**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)

<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) Dave Camp For Congress 2008	Transaction ID: 15341465 Date of Disbursement 03 / 07 / 2008
	Mailing Address 5915 Eastman Ave. Suite 100	
	City Midland State MI Zip Code 48640	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Contribution Candidate Name Rep. David Camp Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 04	Contribution

B.	Full Name (Last, First, Middle Initial) Wyden For Senate	Transaction ID: 15341466 Date of Disbursement 03 / 07 / 2008
	Mailing Address 232 Ne 9th Avenue	
	City Portland State OR Zip Code 97232	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Contribution Candidate Name Sen. Ron Wyden Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	Contribution

C.	Full Name (Last, First, Middle Initial) Lincoln Diaz-Balart For Congress	Transaction ID: 15341467 Date of Disbursement 03 / 11 / 2008
	Mailing Address 95 Merrick Way Suite 250	
	City Coral Gables State FL Zip Code 33134	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Rep. Lincoln Diaz-Balart Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 21	Contribution

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 22

<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)
Mario Diaz-Balart For Congress

Mailing Address 95 Merrick Way, Suite 250

City State Zip Code
Coral Gables FL 33134

Purpose of Disbursement
Contribution

Candidate Name
Rep. Mario Diaz-Balart

Office Sought: House
 Senate
 President
State: FL District: 25

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 15341472

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)

**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 22 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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) Friends of Peter Kinder <hr/> Mailing Address P.O. Box 712 <hr/> City Jefferson City State MO Zip Code 65102 Purpose of Disbursement Peter Kinder, STATE SENATE MO Candidate Name MO Sen. Peter Kinder Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 MO Primary Elec	Transaction ID: 15341485 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2008
	Category/Type 011	Amount of Each Disbursement this Period 675.00
B. Full Name (Last, First, Middle Initial) Friends of Peter Kinder <hr/> Mailing Address P.O. Box 712 <hr/> City Jefferson City State MO Zip Code 65102 Purpose of Disbursement Peter Kinder, STATE SENATE MO Candidate Name MO Sen. Peter Kinder Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15341487 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2008
	Category/Type 011	Amount of Each Disbursement this Period 325.00

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00