

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Hanger Orthopedic Group Inc. PAC

ADDRESS (number and street) 10910 Domaine Drive Suite 300
Check if different than previously reported. (ACC) Austin TX 78758

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00430397

3. IS THIS REPORT NEW OR AMENDED (N) (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 Year-End 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 M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 10 / 01 / 2011 through 10 / 31 / 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 Russell Allen

Signature of Treasurer Russell Allen [Electronically Filed] Date 11 / 18 / 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.

Table with 10 columns and 1 row for Office Use Only.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Hanger Orthopedic Group Inc. PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		134811.00
(b) Cash on Hand at Beginning of Reporting Period.....	181252.96	
(c) Total Receipts (from Line 19)	5509.87	55623.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	186762.83	190434.80
7. Total Disbursements (from Line 31).....	0.00	3671.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	186762.83	186762.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Hanger Orthopedic Group Inc. PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3040.00	22185.00
(ii) Unitemized	2466.00	33209.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5506.00	55394.00
(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)	5506.00	55394.00
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	171.97
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3.87	57.83
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5509.87	55623.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5509.87	55623.80

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	171.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	171.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	2500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	3671.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	3671.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5506.00	55394.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5506.00	55394.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	171.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	171.97
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<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. Albert P Teoli
Full Name (Last, First, Middle Initial)

Mailing Address 2460 Bradwardine Court

City Cumming State GA Zip Code 30041

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1962623222997

Amount of Each Receipt this Period **100.00**

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

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

Mailing Address 3240 E. Stanford Drive

City Paradise Valley State AZ Zip Code 85253

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1962623722997

Amount of Each Receipt this Period **50.00**

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

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

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 ▼ **1000.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1962623922997

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 7 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 801 West Fifth Street
Unit 2106

City Austin State TX Zip Code 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 ▼
1000.00

Date of Receipt
10 / 31 / 2011
Transaction ID : PR1962624022997

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 3 Pickwick Lane

City Old Saybrook State CT Zip Code 06475-1020

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 31 / 2011
Transaction ID : PR1962624122997

Amount of Each Receipt this Period
100.00

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

Full Name (Last, First, Middle Initial)
C. 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 ▼
500.00

Date of Receipt
10 / 31 / 2011
Transaction ID : PR1962624722997

Amount of Each Receipt this Period
50.00

P/R Deduction (\$25.00 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 8 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Jeffery S Lutz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 100 Shannon Road		Transaction ID : PR1962624922997
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	Amount of Each Receipt this Period 130.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	P/R Deduction (\$65.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Kevin M Carroll		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address P.O. Box 1013		Transaction ID : PR1962625922997
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	Amount of Each Receipt this Period 80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	P/R Deduction (\$40.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. Robert T Simms		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 159 Ash St		Transaction ID : PR1962626022997
City Lake Zurich	State IL	Zip Code 60047-1309
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Director, Materials Management	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
<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. Michael A Jenks
Full Name (Last, First, Middle Initial)
Mailing Address 18315 Marbor Light Blvd
City Cornelius State NC Zip Code 28031
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 10 / 31 / 2011
Transaction ID : PR1962626522997
Amount of Each Receipt this Period 40.00
P/R Deduction (\$20.00 Semi-Monthly)

B. Charles E Jordan
Full Name (Last, First, Middle Initial)
Mailing Address 207 Vixen View
City Phoenixville State PA Zip Code 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 ▼ 500.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962627122997
Amount of Each Receipt this Period 50.00
P/R Deduction (\$25.00 Semi-Monthly)

C. Thomas F Kirk
Full Name (Last, First, Middle Initial)
Mailing Address 2616 Lighthouse Bend Drive
City Ponte Vedra Beach State FL Zip Code 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 ▼ 1000.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962627522997
Amount of Each Receipt this Period 100.00
P/R Deduction (\$50.00 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 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Frank Erdeljac			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 137 Martin Road			Transaction ID : PR1962627622997
City Pittsburgh	State PA	Zip Code 15237-3726	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Practitioner - CO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Richmond L Taylor			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 23848 Skyline Dr.			Transaction ID : PR1962627722997
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. C			
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 ▼ 1000.00		P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. Kent D Lane			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 103 Segwun Drive			Transaction ID : PR1962629022997
City Lexington	State SC	Zip Code 29072	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
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 ▼ 1000.00		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: (check only one)	PAGE 11 OF 20
	<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. Hugh J Panton
Full Name (Last, First, Middle Initial)

Mailing Address 17 Island Road

City Sewalls Point State FL Zip Code 34996

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR196262972997

Amount of Each Receipt this Period **50.00**

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

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

Mailing Address 6000 Shepherd Mountain Cove Unit 1810

City Austin State TX Zip Code 78730

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 ▼ **1000.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR196263022997

Amount of Each Receipt this Period **100.00**

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

C. Jeffrey L Martin
Full Name (Last, First, Middle Initial)

Mailing Address 8009 Lake Mountain Lane

City Austin State TX Zip Code 78641

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation Director, Mergers & Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR196263062997

Amount of Each Receipt this Period **50.00**

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

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

Full Name (Last, First, Middle Initial) A. Lars V Jensen			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 701 Hawthorn Court			Transaction ID : PR1962632022997
City San Ramon	State CA	Zip Code 94583-5641	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Semi-Monthly)	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Edward S Gormanson			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 9013 Windwood			Transaction ID : PR1962632622997
City Wichita	State KS	Zip Code 67226-1510	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Semi-Monthly)	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Practice Manager	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Eric Burns			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 2925 E Racquet Court			Transaction ID : PR1962633122997
City Tucson	State AZ	Zip Code 85716-1096	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 ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
	<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. Mark A Conry
Full Name (Last, First, Middle Initial)
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 ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011
Transaction ID : PR1962633322997
Amount of Each Receipt this Period 50.00
P/R Deduction (\$25.00 Semi-Monthly)

B. Steve Prock
Full Name (Last, First, Middle Initial)
Mailing Address 1011 Higgins Rd
City Sherman State TX Zip Code 75092-6519
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011
Transaction ID : PR1962633922997
Amount of Each Receipt this Period 100.00
P/R Deduction (\$50.00 Semi-Monthly)

C. Terry D Loveless
Full Name (Last, First, Middle Initial)
Mailing Address 203 Hollyside Drive STE 201
City Ruther Glen State VA Zip Code 22546
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 ▼ 575.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011
Transaction ID : PR1962634322997
Amount of Each Receipt this Period 0.00
P/R Deduction (\$5.00 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: (check only one)	PAGE 14 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 10020 Gramercy

City Oklahoma City State OK Zip Code 73139-5416

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962634422997

Amount of Each Receipt this Period 50.00

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

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

Mailing Address 26746 Orchid Trail

City Boerne State TX Zip Code 78006-5547

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962634922997

Amount of Each Receipt this Period 50.00

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

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

Mailing Address 211 Island Falls

City Sunnyvale State TX Zip Code 75182

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962635522997

Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional).....▶ 200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Myron P Griffin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 212 Dream Spirit Drive		Transaction ID : PR1962635722997
City Santa Teresa	State NM	Zip Code 88003
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Practitioner-CPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Amount of Each Receipt this Period 50.00
		P/R Deduction (\$25.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Stacy McFarland		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 116 19th Avenue North # 203		Transaction ID : PR1962636722997
City Jacksonville Beach	State FL	Zip Code 32250
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
		Amount of Each Receipt this Period 40.00
		P/R Deduction (\$20.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. John S Hildebrand		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 5622 Billy Casper Dr		Transaction ID : PR1962638522997
City Billings	State MT	Zip Code 59106-1027
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
		Amount of Each Receipt this Period 80.00
		P/R Deduction (\$40.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 OF 20
	<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. Frank Bostock
Full Name (Last, First, Middle Initial)

Mailing Address 2 W Kaler Drive

City Phoenix State AZ Zip Code 85021-7237

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962639122997

Amount of Each Receipt this Period 100.00

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

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

Mailing Address 3121 Morgan Circle

City Bismarck State ND Zip Code 58503-0102

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962639222997

Amount of Each Receipt this Period 100.00

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

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

Mailing Address 28 San Tomas

City Rancho Santa Margarita 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 ▼ 1000.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962641522997

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: (check only one)	PAGE 17 OF 20
	<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. James A McCalmont
Full Name (Last, First, Middle Initial)

Mailing Address 40611 N. Shadow Creek Way

City Anthem	State AZ	Zip Code 85086
----------------	-------------	-------------------

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

Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2011

Transaction ID : PR196264282997

Amount of Each Receipt this Period
50.00

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

B. Bret T Bostock
Full Name (Last, First, Middle Initial)

Mailing Address 1018 W. State Ave.

City Phoenix	State AZ	Zip Code 85021
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2011

Transaction ID : PR196264292997

Amount of Each Receipt this Period
50.00

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

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

Mailing Address 4525 South Atlantic Avenue #1303

City Ponce Inlet	State FL	Zip Code 32127
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2011

Transaction ID : PR196264312997

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 20
	<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. Richard F Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 427 Holly Lane
 City Oakdale State MN Zip Code 55128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962645122997
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$25.00 Semi-Monthly)

B. Rebecca Jo Hast
 Full Name (Last, First, Middle Initial)
 Mailing Address 17344 Lafayette Drive
 City Olney State MD Zip Code 20832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation President, Linkia
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962645622997
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$30.00 Semi-Monthly)

C. Thomas Edward Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 Calistoga Court
 City Austin State TX Zip Code 78732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Vice Pres. & General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962648222997
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 20
<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. Michael R Lozano
Full Name (Last, First, Middle Initial)
Mailing Address 6007 McKenny Lane
City Eureka State CA Zip Code 95503
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 ▼ 270.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962653922997
Amount of Each Receipt this Period 30.00
P/R Deduction (\$15.00 Semi-Monthly)

B. Arthur E Price
Full Name (Last, First, Middle Initial)
Mailing Address 32076 Corte Escobar
City Temecula State CA Zip Code 92592-3662
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practitioner-CPO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962654022997
Amount of Each Receipt this Period 30.00
P/R Deduction (\$15.00 Semi-Monthly)

C. John W Tew
Full Name (Last, First, Middle Initial)
Mailing Address 15435 Manchac View Ct
City Baton Rouge State LA Zip Code 70810
FEC ID number of contributing federal political committee. **C**
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962654122997
Amount of Each Receipt this Period 40.00
P/R Deduction (\$20.00 Semi-Monthly)

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

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

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

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

A. Mark J Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Hughes Street
 City Fort Walton Beach State FL Zip Code 32548-6441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Soft Goods Fitter
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962654222997
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Semi-Monthly)

B. Thomas Vincent DiBello
 Full Name (Last, First, Middle Initial)
 Mailing Address 403 Timber Grove Place
 City Friendswood State TX Zip Code 77546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1962654322997
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Semi-Monthly)

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	3040.00