



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Hanger Orthopedic Group Inc. PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		197661.33
(b) Cash on Hand at Beginning of Reporting Period.....	244461.53	
(c) Total Receipts (from Line 19) .....	7942.43	62242.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	252403.96	259903.96
7. Total Disbursements (from Line 31).....	15000.00	22500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	237403.96	237403.96
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**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).....	5801.94	26606.94
(ii) Unitemized .....	2134.00	35568.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7935.94	62174.94
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7935.94	62174.94
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	6.49	67.69
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))..... ▶	7942.43	62242.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7942.43	62242.63

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	22500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15000.00	22500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15000.00	22500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7935.94	62174.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7935.94	62174.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 37
	<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**

Full Name (Last, First, Middle Initial) <b>A. Harvey Sosnoff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962622726069</b>
Mailing Address 65 River Street		Amount of Each Receipt this Period 30.00
City Holden	State MA	Zip Code 01520-2301
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
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 ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. Albert P Teoli</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962623226069</b>
Mailing Address 2460 Bradwardine Court		Amount of Each Receipt this Period 150.00
City Cumming	State GA	Zip Code 30041
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>C. Jeffrey L Murray</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962623426069</b>
Mailing Address 201 Pond Meadow Road		Amount of Each Receipt this Period 30.00
City Killingworth	State CT	Zip Code 06419-1122
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 37
	<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. 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 ▼ **575.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962623726069**  
 Amount of Each Receipt this Period **75.00**  
 P/R Deduction (\$25.00 Bi-Weekly)

**B. 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 Regional Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962623926069**  
 Amount of Each Receipt this Period **150.00**  
 P/R Deduction (\$50.00 Bi-Weekly)

**C. George E McHenry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 65 Treehaven Ct.  
 City The Hills State TX Zip Code 78738-1477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Executive Vice President & CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962624026069**  
 Amount of Each Receipt this Period **150.00**  
 P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 37
<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. Dennis J Huysman**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 Pickwick Lane

City Old Saybrook State CT Zip Code 06475-1020

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962624126069**

Amount of Each Receipt this Period **300.00**

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

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

Mailing Address 762 N W 99th Circle

City Plantation State FL Zip Code 33324-4947

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962624726069**

Amount of Each Receipt this Period **75.00**

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

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

Mailing Address 100 Shannon Road

City Lafayette State LA Zip Code 70503

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1495.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962624926069**

Amount of Each Receipt this Period **195.00**

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<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 P Voit**  
Full Name (Last, First, Middle Initial)  
Mailing Address 135 Penns Way  
City San Antonio State TX Zip Code 78231  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962625626069**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

**B. Susan Yvonne Mellor**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8 Euclid Avenue  
City Hillsborough State NJ Zip Code 08844  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Administrative Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962625826069**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

**C. Kevin M Carroll**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 1013  
City Windermere State FL Zip Code 34786  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation VP, Lower Extremity Prosthetic  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 920.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962625926069**  
Amount of Each Receipt this Period 120.00  
P/R Deduction (\$40.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 37
	<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) <b>A. Robert T Simms</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2012
Mailing Address 159 Ash St		<b>Transaction ID : PR1962626026069</b>
City Lake Zurich	State IL	Zip Code 60047-1309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Director, Materials Management	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 ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>B. Susan I Van Norman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2012
Mailing Address 25 Connelly Ct		<b>Transaction ID : PR1962626226069</b>
City Rising Sun	State MD	Zip Code 21911-1044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Director, Admin Services	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>C. Ernest Gramaglia</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2012
Mailing Address 109 Brookside Way		<b>Transaction ID : PR1962626426069</b>
City Mullica Hill	State NJ	Zip Code 08062-4302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 37
<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) <b>A. Michael Andrew Jenks</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2012 <b>Transaction ID : PR1962626526069</b>
Mailing Address 9631 Denbolme street		Amount of Each Receipt this Period 60.00
City Huntersville	State NC	Zip Code 28078
FEC ID number of contributing federal political committee. C	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Jeffrey T McGinnis</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2012 <b>Transaction ID : PR1962626626069</b>
Mailing Address 2081 Hempstead Rd.		Amount of Each Receipt this Period 30.00
City Rock Hill	State SC	Zip Code 29732
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 ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Arthur J Roberts</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2012 <b>Transaction ID : PR1962627226069</b>
Mailing Address 1901 Trolley Road		Amount of Each Receipt this Period 30.00
City York	State PA	Zip Code 17408-1543
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 ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Thomas F Kirk</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2012
Mailing Address 2616 Lighthouse Bend Drive		<b>Transaction ID : PR1962627526069</b>
City Ponte Vedra Beach	State FL	Zip Code 32082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Vice Chairman	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 ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>B. Frank Erdeljac</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2012
Mailing Address 137 Martin Road		<b>Transaction ID : PR1962627626069</b>
City Pittsburgh	State PA	Zip Code 15237-3726
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Practitioner - CO	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 ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>C. Richmond L Taylor</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2012
Mailing Address 23848 Skyline Dr.		<b>Transaction ID : PR1962627726069</b>
City Mission Viejo	State CA	Zip Code 92692-1875
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
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 ▼ 1150.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 37
	<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) <b>A. Kyle C Hammersmith</b>		Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1962628026069</b>
Mailing Address 314 Silent Spring Dr.		Amount of Each Receipt this Period 30.00
City Cedar Park    State TX    Zip Code 78613	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Sr Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. Linda Fowler</b>		Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1962628726069</b>
Mailing Address 9036 Dansforeshire Way		Amount of Each Receipt this Period 30.00
City Wake Forest    State NC    Zip Code 27587	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Administrative Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>C. Kent D Lane</b>		Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1962629026069</b>
Mailing Address 103 Segwun Drive		Amount of Each Receipt this Period 150.00
City Lexington    State SC    Zip Code 29072	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Regional Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Hugh J Panton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 17 Island Road  
City Sewalls Point State FL Zip Code 34996  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Senior Clinical Advisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **516.94**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962629726069**  
Amount of Each Receipt this Period **41.94**  
P/R Deduction (\$25.00 Bi-Weekly)

**B. Anthony Borrás**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2118 Imperial Circle  
City Naples State FL Zip Code 34110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Business Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962629926069**  
Amount of Each Receipt this Period **30.00**  
P/R Deduction (\$10.00 Bi-Weekly)

**C. Michael L Schlesinger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3012 Heathmount Drive  
City Cedar Park State TX Zip Code 78613  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation VP, Corp Business Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962630226069**  
Amount of Each Receipt this Period **150.00**  
P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>221.94</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 37
	<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. Kenneth E Cerimele**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1070 Fox Den Tr.  
 City Canfield State OH Zip Code 44406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Director of Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962630426069**  
 Amount of Each Receipt this Period **30.00**  
 P/R Deduction (\$10.00 Bi-Weekly)

**B. Jeffrey L Martin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8009 Lake Mountain Lane  
 City Austin State TX Zip Code 78641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Director, Mergers & Acquisition  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **575.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962630626069**  
 Amount of Each Receipt this Period **75.00**  
 P/R Deduction (\$25.00 Bi-Weekly)

**C. Mark S Helle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1809 Foxridge Court  
 City Aurora State IL Zip Code 60502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Vice President, Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962630826069**  
 Amount of Each Receipt this Period **30.00**  
 P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>135.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 37
<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) <b>A. Steven G Mersch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962631426069</b>
Mailing Address 6851 NW 40th Drive		Amount of Each Receipt this Period 30.00
City Gainesville	State FL	Zip Code 32653-8339
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Lars V Jensen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962632026069</b>
Mailing Address 701 Hawthorn Court		Amount of Each Receipt this Period 45.00
City San Ramon	State CA	Zip Code 94583-5641
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Regional Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	
		P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. James Spielmann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962632226069</b>
Mailing Address 3200 Island Club North #17		Amount of Each Receipt this Period 30.00
City Racine	State WI	Zip Code 53405
FEC ID number of contributing federal political committee.	C	
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
		P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Edward S Gormanson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9013 Windwood  
City Wichita State KS Zip Code 67226-1510  
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 ▼ 575.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962632626069**  
Amount of Each Receipt this Period 75.00  
P/R Deduction (\$25.00 Bi-Weekly)

**B. Francis Alan Hammer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12436 Fort West  
City Knoxville State TN Zip Code 37934-1342  
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 ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962632826069**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

**C. Eric Burns**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2925 E Racquet Court  
City Tucson State AZ Zip Code 85716-1096  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962633126069**  
Amount of Each Receipt this Period 60.00  
P/R Deduction (\$20.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. James R Wilkinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2840 Locksley Court  
 City Tucker State GA Zip Code 30084  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962633226069**  
 Amount of Each Receipt this Period 30.00  
 P/R Deduction (\$10.00 Bi-Weekly)

**B. Micah J Saterfield**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14507 Wildflower Loop  
 City Fort Smith State AR Zip Code 72916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962633426069**  
 Amount of Each Receipt this Period 30.00  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. Joann M Guilbeaux**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 Greenfield Drive  
 City Carencro State LA Zip Code 70520-5927  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Administrative Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962633526069**  
 Amount of Each Receipt this Period 30.00  
 P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 37
	<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) <b>A. Pamela M Gibson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962633726069</b>
Mailing Address 4731 Lunsford Hollow Lane		Amount of Each Receipt this Period 30.00
City Friendswood    State TX    Zip Code 77546	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
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 ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. Steve Prock</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962633926069</b>
Mailing Address 1011 Higgins Rd		Amount of Each Receipt this Period 150.00
City Sherman    State TX    Zip Code 75092-6519	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>C. Ruthie Ann Boan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962634026069</b>
Mailing Address 605 West 11th Street		Amount of Each Receipt this Period 30.00
City Sulphur    State OK    Zip Code 73086-5409	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Administrative Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 37
	<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. Kirby G Shelton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10020 Gramercy  
City Oklahoma City State OK Zip Code 73139-5416  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962634426069**  
Amount of Each Receipt this Period 75.00  
P/R Deduction (\$25.00 Bi-Weekly)

**B. Delbert Lipe**  
Full Name (Last, First, Middle Initial)  
Mailing Address 26746 Orchid Trail  
City Boerne State TX Zip Code 78006-5547  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Area Practice Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962634926069**  
Amount of Each Receipt this Period 75.00  
P/R Deduction (\$25.00 Bi-Weekly)

**C. Louis Zermeno**  
Full Name (Last, First, Middle Initial)  
Mailing Address 211 Island Falls  
City Sunnyvale State TX Zip Code 75182  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962635526069**  
Amount of Each Receipt this Period 150.00  
P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 37
	<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) <b>A. Myron P Griffin</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962635726069</b>
Mailing Address 212 Dream Spirit Drive		Amount of Each Receipt this Period 75.00
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 ▼ 575.00	
		P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Robert J McKenzie</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962636226069</b>
Mailing Address 7246 Jonathan Ave S		Amount of Each Receipt this Period 30.00
City Cottage Grove	State MN	Zip Code 55016-3657
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 ▼ 230.00	
		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Glen E Goranson</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962636326069</b>
Mailing Address 885 Post Road		Amount of Each Receipt this Period 30.00
City Brookfield	State WI	Zip Code 53005
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 ▼ 230.00	
		P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 37
	<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. Stacy McFarland**  
Full Name (Last, First, Middle Initial)

Mailing Address 116 19th Avenue North  
# 203

City Jacksonville Beach State FL Zip Code 32250

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962636726069**

Amount of Each Receipt this Period 60.00

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

**B. Barry Campbell**  
Full Name (Last, First, Middle Initial)

Mailing Address 601 E 69th St

City Kansas City State MO Zip Code 64131-1329

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962638226069**

Amount of Each Receipt this Period 30.00

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

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

Mailing Address 5622 Billy Casper Dr

City Billings State MT Zip Code 59106-1027

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962638526069**

Amount of Each Receipt this Period 45.00

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

**SUBTOTAL** of Receipts This Page (optional).....▶ 135.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 37
	<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. Craig V Watson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 N. Berkeley Way  
City Medford State OR Zip Code 97504  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962638626069**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

**B. Mark R Muller**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1233 S. Sweetwater Ave  
City Pueblo West State CO Zip Code 81007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962638926069**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

**C. Frank Bostock**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2 W Kaler Drive  
City Phoenix State AZ Zip Code 85021-7237  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962639126069**  
Amount of Each Receipt this Period 150.00  
P/R Deduction (\$50.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3121 Morgan Circle

City Bismarck State ND Zip Code 58503-0102

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962639226069**

Amount of Each Receipt this Period 150.00

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

**B. Alistair Q Gibson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1928 Lake Roberts Landing Drive

City Winter Garden State FL Zip Code 34787

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962639626069**

Amount of Each Receipt this Period 30.00

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

**C. Donald W. Meng**  
Full Name (Last, First, Middle Initial)

Mailing Address 1016 S. Steen Court

City Spokane Valley State WA Zip Code 99037

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962639726069**

Amount of Each Receipt this Period 30.00

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 210.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 37
	<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. Kaia Ann Busch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4129 228th St. SE

City Bothell	State WA	Zip Code 98021
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

**Transaction ID : PR1962640426069**

Amount of Each Receipt this Period  

30.00
-------

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

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

City 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 ▼ **1150.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

**Transaction ID : PR1962641526069**

Amount of Each Receipt this Period  

150.00
--------

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

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

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

**Transaction ID : PR1962641626069**

Amount of Each Receipt this Period  

30.00
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P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 37
	<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) <b>A. Geoffrey S Hemmen</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962642526069</b>
Mailing Address 1505 Chatham Ct.			Amount of Each Receipt this Period 30.00
City St. Augustine	State FL	Zip Code 32092	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer Hanger Orthopedic Group, Inc.		
Occupation Area Practice Manager		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00

Full Name (Last, First, Middle Initial) <b>B. James A McCalmont</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962642826069</b>
Mailing Address 8419 East Shetland Trail			Amount of Each Receipt this Period 75.00
City Scottsdale	State AZ	Zip Code 85258	P/R Deduction (\$25.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer Hanger Orthopedic Group, Inc.		
Occupation Area Practice Manager		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00

Full Name (Last, First, Middle Initial) <b>C. Bret T Bostock</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 <b>Transaction ID : PR1962642926069</b>
Mailing Address 1018 W. State Ave.			Amount of Each Receipt this Period 75.00
City Phoenix	State AZ	Zip Code 85021	P/R Deduction (\$25.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer Hanger Orthopedic Group, Inc.		
Occupation National Orthotics Specialist		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 37
	<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. Wallis Farraday**  
Full Name (Last, First, Middle Initial)

Mailing Address 4525 South Atlantic Avenue  
#1303

City Ponce Inlet      State FL      Zip Code 32127

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

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

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962643126069**

Amount of Each Receipt this Period **150.00**

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

**B. Joseph R Garcia**  
Full Name (Last, First, Middle Initial)

Mailing Address 5240 Huntington Reserve Drive

City Parma      State OH      Zip Code 44134-6171

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

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

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962643726069**

Amount of Each Receipt this Period **30.00**

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

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

Mailing Address 45343 Callesito Burgos

City Temecula      State CA      Zip Code 92592

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

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

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962644026069**

Amount of Each Receipt this Period **30.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 37
	<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. 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 ▼ **575.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962645126069**

Amount of Each Receipt this Period **75.00**

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

**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 ▼ **690.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962645626069**

Amount of Each Receipt this Period **90.00**

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

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

Mailing Address 203 Landons Way

City Georgetown State TX Zip Code 78628

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962646326069**

Amount of Each Receipt this Period **30.00**

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

**SUBTOTAL** of Receipts This Page (optional)..... **195.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 37
	<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. Joey R Stevens**  
Full Name (Last, First, Middle Initial)  
Mailing Address 148 Moultrie Crossing Lane  
City St Augustine State FL Zip Code 32086-5242  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Account Representative  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962647926069**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

**B. Thomas Edward Hartman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12515 Calistoga Way  
City Austin State TX Zip Code 78732-2451  
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 ▼ 575.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962648226069**  
Amount of Each Receipt this Period 75.00  
P/R Deduction (\$25.00 Bi-Weekly)

**C. William J Dwyer III**  
Full Name (Last, First, Middle Initial)  
Mailing Address 43 Ciccio Road  
City Southington State CT Zip Code 06489-2163  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Sales Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962648426069**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 37
	<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. Eric W Craig**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6240 Beacon Station Dr.  
City Cumming State GA Zip Code 30041  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Vice President, Operations  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962648826069**  
Amount of Each Receipt this Period **30.00**  
P/R Deduction (\$10.00 Bi-Weekly)

**B. John Rheinstein**  
Full Name (Last, First, Middle Initial)  
Mailing Address 905 West End Apt # 94  
City New York State NY Zip Code 10025-3530  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962649226069**  
Amount of Each Receipt this Period **30.00**  
P/R Deduction (\$10.00 Bi-Weekly)

**C. Dana Celeste Johnson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5436 S. Everett Way  
City Littleton State CO Zip Code 80123-2232  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Regional Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1962653326069**  
Amount of Each Receipt this Period **30.00**  
P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 37
	<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. Scott A Klosterman**  
Full Name (Last, First, Middle Initial)

Mailing Address 1200 Barton Creek Boulevard  
Unit 20

City Austin State TX Zip Code 78735-1612

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation General Manager - Dosteon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962653526069**

Amount of Each Receipt this Period 30.00

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

**B. Algis J Maciunas**  
Full Name (Last, First, Middle Initial)

Mailing Address 34 Ox Yoke Drive

City Wethersfield State CT Zip Code 06109-3750

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962653626069**

Amount of Each Receipt this Period 30.00

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

**C. Louis J Mestier**  
Full Name (Last, First, Middle Initial)

Mailing Address 1207A Enfield Road

City Austin State TX Zip Code 78703-4030

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012  
**Transaction ID : PR1962653726069**

Amount of Each Receipt this Period 30.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 37
<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. Matthew D Nelson**  
Full Name (Last, First, Middle Initial)

Mailing Address 5292 Vernon Lake Drive

City Dunwoody State GA Zip Code 30338

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962653826069**

Amount of Each Receipt this Period **30.00**

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

**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 ▼ **345.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962654026069**

Amount of Each Receipt this Period **45.00**

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

**C. John William 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 ▼ **460.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1962654126069**

Amount of Each Receipt this Period **60.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 37
	<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) <b>A. Mark J Harris</b>			Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1962654226069</b>
Mailing Address 211 Hughes Street			Amount of Each Receipt this Period 60.00
City Fort Walton Beach	State FL	Zip Code 32548-6441	P/R Deduction (\$20.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Soft Goods Fitter		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) <b>B. Thomas Vincent DiBello</b>			Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1962654326069</b>
Mailing Address 403 Timber Grove Place			Amount of Each Receipt this Period 150.00
City Friendswood	State TX	Zip Code 77546-8409	P/R Deduction (\$50.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Practice Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>C. Vinit Asar</b>			Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1962656626069</b>
Mailing Address 108 Dawn River Cove			Amount of Each Receipt this Period 30.00
City Austin	State TX	Zip Code 78732-1987	P/R Deduction (\$10.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer Hanger Orthopedic Group, Inc.	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	240.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 37
	<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) <b>A. Debbie Koepsel</b>		Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1986227026069</b>
Mailing Address 2026 E Calle De Dulcinea		Amount of Each Receipt this Period 30.00
City Tucson	State AZ	Zip Code 85718-2087
FEC ID number of contributing federal political committee. C	Name of Employer Hanger Orthopedic Group, Inc.	Occupation ACP Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Marc R Kowatic</b>		Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1986227126069</b>
Mailing Address 117 Fox Path Drive		Amount of Each Receipt this Period 30.00
City Moon Township	State PA	Zip Code 15108-9779
FEC ID number of contributing federal political committee. C	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Regional Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Nicole Lynette Simon</b>		Date of Receipt 11 / 26 / 2012 <b>Transaction ID : PR1986227226069</b>
Mailing Address 176 Mercury Street		Amount of Each Receipt this Period 75.00
City Sulphur	State LA	Zip Code 70665
FEC ID number of contributing federal political committee. C	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Area Administrative Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
		P/R Deduction (\$25.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 37
	<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. Deborah T Adkins**  
Full Name (Last, First, Middle Initial)

Mailing Address 1907 Clubhouse Road

City Lakeland State FL Zip Code 33813

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation Director of Clinical Support

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1986227426069**

Amount of Each Receipt this Period **30.00**

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

**B. Robert D Price**  
Full Name (Last, First, Middle Initial)

Mailing Address 118 Private Drive 963

City Ironton State OH Zip Code 45638-9123

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 ▼ **210.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1986227826069**

Amount of Each Receipt this Period **30.00**

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

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

Mailing Address 12403 Mellow Meadow Drive #807

City Austin State TX Zip Code 78750-1845

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 26 / 2012**

**Transaction ID : PR1986228126069**

Amount of Each Receipt this Period **30.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 37
	<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. Jay Charles Wendt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2405 Danbury Drive  
City Colleyville State TX Zip Code 76034-5427  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Zone Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **630.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1986228226069**  
Amount of Each Receipt this Period **90.00**  
P/R Deduction (\$30.00 Bi-Weekly)

**B. Raymond Michael Hendon**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1771  
City San Marcos State TX Zip Code 78667-1771  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hanger Orthopedic Group, Inc. Occupation Director, Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 26 / 2012**  
**Transaction ID : PR1986228326069**  
Amount of Each Receipt this Period **30.00**  
P/R Deduction (\$10.00 Bi-Weekly)

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>5801.94</b>

**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**

Full Name (Last, First, Middle Initial)

**A. National Republican Senatorial Committee**

Mailing Address 425 Second Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**National Republican Senatorial Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : 48914722**

Amount of Each Disbursement this Period

10000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Texans For Senator John Cornyn, Inc.**

Mailing Address PO Box 13026

City Austin State TX Zip Code 78711

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. John Cornyn**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : 48914723**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00

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

15000.00