

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


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

| L | $\begin{aligned} & \text { Office } \\ & \text { Use } \\ & \text { Only } \end{aligned}$ |  |  |  |  |  |  |  | FEC FORM 3X <br> Rev. 12/2004 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 02/2003)
Write or Type Committee Name
Hanger Orthopedic Group Inc. PAC

6. (a) Cash on Hand January 1,
Y-Y
2012
(b) Cash on Hand at

Beginning of Reporting Period. $\qquad$
220940.37
(c) Total Receipts (from Line 19) $\qquad$

(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$
$\square 229112.99$
$\square, 233112.99$
7. Total Disbursements (from Line 31) $\qquad$
$\square 0.00$
4000.00
8. Cash on Hand at Close of Reporting Period
(subtract Line 7 from Line 6(d))
$\square 229112.99$

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0,00
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
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

Write or Type Committee Name
Hanger Orthopedic Group Inc. PAC

11. Contributions (other than loans) From:
(a) Individuals/Persons Other

Than Political Committees
(i) Itemized (use Schedule A)............

|  | 4290.00 |
| :---: | :---: |
|  | 3876.00 |
|  | 8166.00 |
|  | 0.00 |
|  | 0.00 |


|  | 10655.00 |
| :---: | :---: |
|  | 24759.00 |
|  | ,$\quad 35414.00$ |
|  | 0.00 |
|  | 0.00 |

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) $\qquad$

|  | 8166.00 |
| :---: | :---: |
|  | 0.00 |
|  | 0.00 |


|  | 35414.00 |
| :---: | :---: |
|  | 0.00 |
|  | 0.00 |
|  | 0.00 |

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5). $\qquad$
0.00
0.00 to Federal Candidates and Other Political Committees.


| 0.00 |  |
| :--- | :--- |
| , | 37.66 |



|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | 0.00 |

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ......... $\square$
35451.66
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $\downarrow$

$\square \quad 35451.66$

FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
22. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs). $\qquad$ .
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) $\qquad$

| 0.00 |  |
| :--- | :--- |
| , | 0.00 |

$0,0.00$
30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$ ....
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).
.. $\downarrow$

| 0, | 0.00 |
| :---: | :---: |
| ,$\quad$, | 0.00 |
| 0, | 0.00 |
| 2, | 0.00 |


|  | 0.00 |
| :---: | :---: |
| ,$\quad$, | 0.00 |
| ,$\quad$, | 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
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)...........................................
0.00

DETAILED SUMMARY PAGE
of Disbursements

Page 5
FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ......
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date


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

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

FOR LINE NUMBER: $\quad$ PAGE 6 OF 19 (check only one)


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.Brandon E Dale  <br> Mailing Address 3240 E. Stanford Drive  <br> City  <br> Paradise Valley State <br> FEC ID number of contributing Zip Code <br> federal political committee. C <br> Name of Employer  <br> Hanger Orthopedic Group, Inc. Occupation <br> Receipt For: VP \& General Manager, CARES <br> $\square$ Primary $\square$ General Aggregate Year-to-Date $\boldsymbol{\nabla}$ <br> $\square$ Other (specify) $\nabla$  |

Date of Receipt


Transaction ID : PR1962623724668
Amount of Each Receipt this Period
75.00

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

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

Mailing Address 75 A Lake Road

|  | Box 350 |  |
| :--- | :---: | :---: |
| City |  | State |
| Congers | NY | Zip Code |
|  | 10920 |  |

FEC ID number of contributing federal political committee.


| Occupation <br> Regional Vice President |
| :--- | :--- |
| Aggregate Year-to-Date $\boldsymbol{\nabla}$ |

Date of Receipt

| $\begin{gathered} M 1 \\ 06 \end{gathered}$ | $30$ | $2012$ |
| :---: | :---: | :---: |

Transaction ID : PR1962623924668
Amount of Each Receipt this Period
150.00

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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $375.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................... |  |

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



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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC

| Full Name (Last, First, Middle Initial)A. George E McHenry |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 801 West Fifth Street Unit 2106 |  |  |
| City | State Zip Code | Transaction ID : PR1962624024668 |
| Austin | TX 78703 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $150.00$ |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Executive Vice President \& CFO |  |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date | P/R Deduction (\$50.00 Bi-Weekly) |

## Name (Last, First, Middle Initial)

B. Gregory T Cerafice

Mailing Address 762 N W 99th Circle

| City | State Zip Code |
| :---: | :---: |
| Plantation | FL 33324-4947 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation <br> Area Administrative Manager |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR1962624724668
Amount of Each Receipt this Period
75.00

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

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

Mailing Address 100 Shannon Road

| City <br> Lafayette | State <br> LA | Zip Code <br> 70503 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Hanger Orthopedic Group, Inc. | Zone Vice President |  |
| Receipt For: |  |  |
| $\square$ Grimary $\square$ General | Aggregate Year-to-Date $\boldsymbol{V}$ |  |
| $\square$ Other (specify) $\nabla$ |  | 845.00 |

## Date of Receipt



Transaction ID : PR1962624924668
Amount of Each Receipt this Period
$\square 195.00$

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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $420.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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



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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC



Date of Receipt


Transaction ID : PR1962626024668
Amount of Each Receipt this Period
150.00

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

## Full Name (Last, First, Middle Initial)

C. Michael Andrew Jenks

| Mailing Address 18315 Marbor Light Blvd |  |
| :---: | :---: |
| City | State Zip Code |
| Cornelius | NC 28031 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| Hanger Orthopedic Group, Inc. | Area Practice Manager |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| Other (specify) | $260.00$ |

Date of Receipt


Transaction ID : PR1962626524668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $330.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 9 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC
Full Name (Last, First, Middle Initial)
A. Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

| Mailing Address 2616 Lighthouse Bend Drive |
| :--- |
| City |
| Ponte Vedra Beach |
| FEC ID number of contributing |
| federal political committee. |
| Name of Employer |
| Hanger Orthopedic Group, Inc. |
| Receipt For: |
| $\square$ Primary $\square$ General |
| $\square$ Other (specify) $\boldsymbol{\nabla}$ |

Date of Receipt


Transaction ID : PR1962627524668
Amount of Each Receipt this Period
$\square 150.00$

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

## Full Name (Last, First, Middle Initial)

B. Frank Erdeljac

Mailing Address 137 Martin Road

| City | State | Zip Code |
| :--- | :--- | :--- |
| Pittsburgh | PA | 15237-3726 |
| FEC ID number of contributing | C |  |
| federal political committee. | Occupation |  |
| Name of Employer | Practitioner - CO |  |
| Hanger Orthopedic Group, Inc. | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ General <br> Other (specify $\boldsymbol{\nabla}$ |  |  |



Transaction ID : PR1962627624668
Amount of Each Receipt this Period
$\square 150.00$

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

Date of Receipt


Transaction ID : PR1962627724668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)................................................................ | , 450.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 10 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC


| B. Hugh J Panton |  |
| :---: | :---: |
| Mailing Address 17 Island Road |  |
| City | State Zip Code |
| Sewalls Point | FL 34996 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| Hanger Orthopedic Group, Inc. | Senior Clinical Advisor |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| Other (specify) | 300.00 |

Date of Receipt


Transaction ID : PR1962629724668
Amount of Each Receipt this Period
75.00

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

## Full Name (Last, First, Middle Initial)

C. Michael L Schlesinger

Mailing Address 3012 Heathmount Drive

| City <br> Cedar Park | State Zip Code <br> TX 78613 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation VP,Corp Business Development |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |

Date of Receipt


Transaction ID : PR1962630224668
Amount of Each Receipt this Period
150.00

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

| SUBTOTAL of Receipts This Page (optional)................................................................. | $375.00$ |
| :---: | :---: |
| 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: $\quad$ PAGE 11 OF 19 (check only one)


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)

| Mailing Address 8009 Lake Mountain Lane |  |  |
| :---: | :---: | :---: |
| City | State | Zip Code |
| Austin | TX | 78641 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupa |  |
|  | Director | s \& Acquisition |
|  | Aggreg | r-to-Date $\boldsymbol{V}$ |
|  |  |  |

Date of Receipt

| $\begin{gathered} M-M \\ 06 \end{gathered}$ | D ${ }^{\text {d }}$ ( | $2012$ |
| :---: | :---: | :---: |

Transaction ID : PR1962630624668
Amount of Each Receipt this Period
$\square 75.00$

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

| Full Name (Last, First, Middle Initial) <br> B. <br> Edward S Gormanson <br> Mailing Address 9013 Windwood <br> City <br> Wichita |
| :--- |
| FEC ID number of contributing |
| federal political committee. |
| Name of Employer |
| Hanger Orthopedic Group, Inc. |
| Receipt For: |
| $\square$ Primary $\quad \square$ General |
| $\square$ Other (specify) $\boldsymbol{\nabla}$ |

Date of Receipt


Transaction ID : PR1962632624668
Amount of Each Receipt this Period
$\square 75.00$

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

Full Name (Last, First, Middle Initial)
C. Eric Burns

Mailing Address 2925 E Racquet Court

| City Tucson | State Zip Code <br> AZ $85716-1096$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Area Practice Manager |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ | Aggregate Year-to-Date $\square$ <br> 260.00 |

Date of Receipt


Transaction ID : PR1962633124668
Amount of Each Receipt this Period


P/R Deduction (\$20.00 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: $\quad$ PAGE 12 OF 19 (check only one)


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. Steve Prock

Mailing Address 1011 Higgins Rd

| City Sherman | State Zip Code <br> TX $75092-6519$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Area Practice Manager |
|  | Aggregate Year-to-Date $650.00$ |

Date of Receipt


Transaction ID : PR1962633924668
Amount of Each Receipt this Period
$\square 150.00$

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

## Full Name (Last, First, Middle Initial)

C. Kirby G Shelton

Mailing Address 10020 Gramercy

| City <br> Oklahoma City | State Zip Code <br> OK $73139-5416$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Regional Vice President |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ <br> 325.00 |

Date of Receipt


Transaction ID : PR1962634424668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $300.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... |  |

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

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

FOR LINE NUMBER: PAGE 13 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR1962634924668
Amount of Each Receipt this Period
$\square 75.00$

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

## Full Name (Last, First, Middle Initial)

B. Louis Zermeno

Mailing Address 211 Island Falls

| City | State |
| :--- | :--- |
| Sunnyvale | Zip Code |
| TX | 75182 |

Date of Receipt


Transaction ID : PR1962635524668
Amount of Each Receipt this Period
$\square 150.00$

P/R Deduction (\$50.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)
C. Myron P Griffin

Mailing Address 212 Dream Spirit Drive

| City <br> Santa Teresa | State <br> NM | Zip Code <br> 88003 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Hanger Orthopedic Group, Inc. | Practitioner-CPO |  |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{V}$ |  |
| $\square$ Grimary $\square$ General |  |  |
| $\square$ Other (specify) $\boldsymbol{\nabla}$ |  |  |

Date of Receipt

| M 06 | / $\begin{gathered}\text { D } \\ 30\end{gathered}$ | $2012$ |
| :---: | :---: | :---: |

Transaction ID : PR1962635724668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $300.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | リ.\| |

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

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

FOR LINE NUMBER: $\quad$ PAGE 14 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC
Full Name (Last, First, Middle Initial)

| Mailing Address 116 19th Avenue North \# 203 |  |
| :---: | :---: |
| City <br> Jacksonville Beach | State Zip Code <br> FL 32250 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Regional Director |
|  | Aggregate Year-to-Date $\square$ <br> 260.00 |

Date of Receipt


Transaction ID : PR1962636724668
Amount of Each Receipt this Period
$\square 60.00$

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

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

Mailing Address 5622 Billy Casper Dr
$\left.\begin{array}{l|l|}\hline \begin{array}{l}\text { City } \\ \text { Billings }\end{array} & \begin{array}{l}\text { State } \\ \text { MT }\end{array} \\ \hline \begin{array}{l}\text { FEC ID number of contributing } \\ \text { federal political committee. }\end{array} & \text { Code } \\ \text { 59106-1027 }\end{array}\right]$

Date of Receipt


Transaction ID : PR1962638524668
Amount of Each Receipt this Period


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

Date of Receipt


Transaction ID : PR1962639124668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)........................................................................... | 255.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 15 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR1962639224668
Amount of Each Receipt this Period
$\square 150.00$

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

| Full Name (Last, First, Middle Initial) <br> B. Michael R George |  |
| :---: | :---: |
| Mailing Address 28 San Tomas |  |
| $\overline{\text { City }}$ | State Zip Code |
| Rancho Santa Margarita | CA 92688 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Vice President, Operations |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR1962641524668
Amount of Each Receipt this Period
150.00

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

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

Mailing Address 8419 East Shetland Trail

| City Scottsdale | State Zip Code <br> AZ 85258 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation <br> Area Practice Manager |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt

| 06 | 30 | $2012$ |
| :---: | :---: | :---: |

Transaction ID : PR1962642824668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $375.00$ |
| :---: | :---: |
| 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: $\quad$ PAGE 16 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC

| Full Name (Last, First, Middle Initial) Bret T Bostock |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 1018 W. State Ave. |  |  |
| City | State Zip Code |  |
| Phoenix | AZ 85021 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $75.00$ |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Area Practice Manager |  |
|  | Aggregate Year-to-Date | P/R Deduction (\$25.00 Bi-Weekly) |

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

Mailing Address 4525 South Atlantic Avenue

|  | $\# 1303$ |  |  |
| :--- | :--- | :--- | :--- |
| City | State | Zip Code |  |
| Ponce Inlet | FL | 32127 |  |

Date of Receipt


Transaction ID : PR1962643124668
Amount of Each Receipt this Period
$\square 150.00$

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

Date of Receipt


Transaction ID : PR1962645124668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)............................................................... | , 300.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: $\quad$ PAGE 17 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC
Full Name (Last, First, Middle Initial)

| Mailing Address 17344 Lafayette Drive |  |
| :---: | :---: |
| City Olney | State Zip Code <br> MD 20832 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation President, Linkia |
|  | Aggregate Year-to-Date $\square$ <br> 390.00 |

Date of Receipt


Transaction ID : PR1962645624668
Amount of Each Receipt this Period
$\square 90.00$

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

| Full Name (Last, First, Middle Initial) <br> B. Thomas Edward Hartman |  |
| :---: | :---: |
| Mailing Address 12515 Calistoga Way |  |
| City | State Zip Code |
| Austin | TX 78732 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Vice Pres. \& General Counsel |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $325.00$ |

Date of Receipt


Transaction ID : PR1962648224668
Amount of Each Receipt this Period


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

Full Name (Last, First, Middle Initial)
C. John William Tew

Mailing Address 15435 Manchac View Ct

| City <br> Baton Rouge | State Zip Code <br> LA 70810 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Area Practice Manager |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |

Date of Receipt


Transaction ID : PR1962654124668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $225.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | リ.\| |

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

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

FOR LINE NUMBER: $\quad$ PAGE 18 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC


Full Name (Last, First, Middle Initial)
B. Thomas Vincent DiBello

Mailing Address 403 Timber Grove Place

| City <br> Friendswood | State Zip Code <br> TX 77546 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Hanger Orthopedic Group, Inc. | Occupation <br> Area Practice Manager |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR1962654324668
Amount of Each Receipt this Period
$\square 150.00$

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

## Full Name (Last, First, Middle Initial)

C. Nicole Lynette Simon

Mailing Address 176 Mercury Street

| City Sulphur | State Zip Code <br> LA 70665 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Hanger Orthopedic Group, Inc. | Occupation <br> Area Administrative Manager |
|  | Aggregate Year-to-Date <br> 275.00 |

Date of Receipt


Transaction ID : PR1986227224668
Amount of Each Receipt this Period


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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $285.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... | - , - , - \|r.|. |

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

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

FOR LINE NUMBER: $\quad$ PAGE 19 OF 19 (check only one)


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name of committee (In Full)
Hanger Orthopedic Group Inc. PAC

B.

Mailing Address
City State Zip Code

FEC ID number of contributing federal political committee.


| Name of Employer | Occupation |
| :--- | :--- |
| Receipt For: |  |
| $\square$ Primary $\square$ General |  |
| Other (specify) $\nabla$ |  |$\quad$ Aggregate Year-to-Date $\boldsymbol{\nabla}$

Date of Receipt


Amount of Each Receipt this Period
$\square$

Date of Receipt
c.

| 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 $\boldsymbol{\nabla}$ |



Amount of Each Receipt this Period


| SUBTOTAL of Receipts This Page (optional)................................................................. | , 90.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only).................................................... | $4290.00$ |

