

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Hanger Orthopedic Group Inc. PAC

ADDRESS (number and street) 2 Bethesda Metro Center Suite 1200  
 Check if different than previously reported. (ACC)  
Bethesda MD 20814

2. **FEC IDENTIFICATION NUMBER** C00430397  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2008 through 07 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ken Abod

Signature of Treasurer Electronically Filed by Ken Abod Date 08 14 2008

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Hanger Orthopedic Group Inc. PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		33744.07
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	22831.68									
(c) Total Receipts (from Line 19) .....	9556.21	51452.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	32387.89	85196.56								
7. Total Disbursements (from Line 31) .....	22000.00	74808.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10387.89	10387.89								
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: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6300.00	32864.00
(i) Itemized (use Schedule A) .....	3018.00	17884.00
(ii) Unitemized .....	9318.00	50748.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9318.00	50748.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	200.00	200.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	38.21	504.49
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9556.21	51452.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9556.21	51452.49

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	258.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	258.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	49900.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements.....	14500.00	24650.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	22000.00	74808.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22000.00	74808.67

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	9318.00	50748.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9318.00	50748.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	258.67
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	258.67

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 30	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Johanns For Senate Incorporated		Date of Receipt
	Mailing Address 1201 O Street Suite 101		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Lincoln	NE	68506
	FEC ID number of contributing federal political committee.		Transaction ID: 15695260
	C C00439802		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="200.00"/>
Receipt For: 2008		Aggregate Year-to-Date ▼	Refund of contribution
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="200.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="200.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="200.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 30	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) Vanguard Group		Date of Receipt
Mailing Address 455 Devon Park Drive		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
City	State	Zip Code
Wayne	PA	19087-1815
FEC ID number of contributing federal political committee.		Transaction ID: 15800814
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="38.21"/>
Name of Employer	Occupation	Bank Interest
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="504.49"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="38.21"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="38.21"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 30  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Robert L Borengasser

Mailing Address 381 W. Laron Lane

City State Zip Code  
Tempe AZ 85284

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Director, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
560.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2008

**Transaction ID:** PR1481041620982

Amount of Each Receipt this Period  
60.00

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

**B.**

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

Mailing Address 2 W Kaler Drive

City State Zip Code  
Phoenix AZ 85021-7237

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2008

**Transaction ID:** PR1481041720982

Amount of Each Receipt this Period  
150.00

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

**C.**

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

Mailing Address 2925 E Racquet Court

City State Zip Code  
Tucson AZ 85716-1096

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 ▼  
320.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2008

**Transaction ID:** PR1481042020982

Amount of Each Receipt this Period  
60.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **270.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kevin M Carroll		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address P.O. Box 1013		<b>Transaction ID:</b> PR1481042120982
	City Windermere	State FL	Zip Code 34786
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Vice President, Lower Extremity Prosth	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark A Conry		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 35 Linden Avenue, Apt 504		<b>Transaction ID:</b> PR1481042320982
	City Long Beach	State CA	Zip Code 90802-5061
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Bradford C Deudne		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 33 Meriwether Trail		<b>Transaction ID:</b> PR1481042720982
	City Congers	State NY	Zip Code 10920-1538
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	420.00
<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 10 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Frank Erdeljac		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 137 Martin Road		<b>Transaction ID:</b> PR1481042820982
	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. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Associate Market Leader Aggregate Year-to-Date ▼ 800.00	P/R Deduction (\$50.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Pierre Escallier		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 112 Nighthawk		<b>Transaction ID:</b> PR1481042920982
	City Irvine	State CA	Zip Code 92604
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer Hanger Orthopedic Group, Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director of Sales, Innovative Neurotro Aggregate Year-to-Date ▼ 340.00	P/R Deduction (\$25.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Wallis Farraday		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 4997 Keeneland Cr		<b>Transaction ID:</b> PR1481043120982
	City Orlando	State FL	Zip Code 32819-3142
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer Hanger Orthopedic Group, Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Market Leader Aggregate Year-to-Date ▼ 800.00	P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	375.00
<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 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address 28 San Tomas

City Rancho Santa Marga 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 ▼ 800.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481043520982

Amount of Each Receipt this Period 150.00

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

**B.** Full Name (Last, First, Middle Initial)  
Myron P Griffin

Mailing Address 5452 Cactus Hill

City El Paso State TX Zip Code 79912-6307

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 ▼ 400.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481044120982

Amount of Each Receipt this Period 75.00

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

**C.** Full Name (Last, First, Middle Initial)  
Rebecca Jo Hast

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 ▼ 480.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481044420982

Amount of Each Receipt this Period 90.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... **315.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 30  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) John N Hathaway		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
Mailing Address 4825 Leland Street		<b>Transaction ID:</b> PR1481044520982
City Chevy Chase	State MD	Zip Code 20815
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, Real Estate	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 ▼ 800.00	

**B.**

Full Name (Last, First, Middle Initial) John S Hildebrand		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
Mailing Address 5622 Billy Casper Drive		<b>Transaction ID:</b> PR1481045020982
City Billings	State MT	Zip Code 59106-1027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Associate Market Leader	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

**C.**

Full Name (Last, First, Middle Initial) William Hineman		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
Mailing Address 3121 Morgan Circle		<b>Transaction ID:</b> PR1481045120982
City Bismarck	State ND	Zip Code 58503-0102
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 Associate Market Leader	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	420.00
<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 13 / 30  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

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

Mailing Address 3 Pickwick Lane

City State Zip Code  
Old Saybrook CT 06475-1020

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 07 / 31 / 2008  
Transaction ID: PR1481045320982  
Amount of Each Receipt this Period: 150.00  
P/R Deduction (\$50.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Michael A 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: Hanger Orthopedic Group, Inc. Occupation: Area Practice Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2008  
Transaction ID: PR1481045520982  
Amount of Each Receipt this Period: 60.00  
P/R Deduction (\$20.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Lars V Jensen

Mailing Address 701 Hawthorn Court

City State Zip Code  
San Ramon CA 94583-5641

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 07 / 31 / 2008  
Transaction ID: PR1481045620982  
Amount of Each Receipt this Period: 45.00  
P/R Deduction (\$15.00 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 14 / 30  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City Phoenixville State PA Zip Code 19460-2115

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481045920982

Amount of Each Receipt this Period 75.00

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

**B.** Full Name (Last, First, Middle Initial)  
Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

City Ponte Vedra Beach State FL Zip Code 32082

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation President & Chief Operating Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481046220982

Amount of Each Receipt this Period 150.00

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

**C.** Full Name (Last, First, Middle Initial)  
Conrad Vincent Kufra

Mailing Address 2549 Bear Den Road

City Frederick State MD Zip Code 21701

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481046620982

Amount of Each Receipt this Period 75.00

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 15 / 30  
(check only one)

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

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

**A.**

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

Mailing Address 178 Hunters Ridge Drive

City Lexington State SC Zip Code 29072-7681

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481046920982

Amount of Each Receipt this Period 150.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Terry D Loveless

Mailing Address 104 Whitley Way

City Lynchburg State VA Zip Code 24503

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481047020982

Amount of Each Receipt this Period 150.00

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

**C.**

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

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 Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481047220982

Amount of Each Receipt this Period 195.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **495.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 30  
(check only one)

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

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

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

**A.**

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

Mailing Address 20533 Anndyke Way

City State Zip Code  
Germantown MD 20874-2825

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
President, Innovative Neurotronics

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2008

**Transaction ID:** PR1481047320982

Amount of Each Receipt this Period  
75.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Stacy McFarland

Mailing Address 116 19th Avenue North, # 203

City State Zip Code  
Jacksonville Beach FL 32250

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 ▼  
320.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2008

**Transaction ID:** PR1481047520982

Amount of Each Receipt this Period  
60.00

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

**C.**

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

Mailing Address 25205 Bonny Brook Lane

City State Zip Code  
Gaithersburg MD 20882

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

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Vice President & Chief Financial Offic

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2008

**Transaction ID:** PR1481047720982

Amount of Each Receipt this Period  
300.00

P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **435.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas A Mesick	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address P.O. Box 370, 21 High Street	<b>Transaction ID:</b> PR1481048020982
	City State Zip Code West Brookfield MA 01585-0370	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	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 ▼ 314.00	P/R Deduction (\$5.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Marion Leona Mullauer	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 610 Sherwood Road	<b>Transaction ID:</b> PR1481048420982
	City State Zip Code Cockeysville MD 21030	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Hanger Orthopedic Group, Inc. Occupation Vice President & Chief Information Off Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$25.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) David E Osborne	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 9206 Kopachuck Drive NW	<b>Transaction ID:</b> PR1481048720982
	City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Hanger Orthopedic Group, Inc. Occupation Market Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>240.00</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 18 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Hugh J Panton	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 17 Island Road	<b>Transaction ID:</b> PR1481048820982
	City State Zip Code Sewalls Point FL 34996	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Otis V Petties	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 5202 Blackwell Road	<b>Transaction ID:</b> PR1481049020982
	City State Zip Code Memphis TN 38134-3104	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 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 ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ambrose R Phillips	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 14509 Clover Hill Terrace	<b>Transaction ID:</b> PR1481049120982
	City State Zip Code Bowie MD 20720	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Director, Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<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 19 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) John J Rush		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 11419 Patriot Lane		<b>Transaction ID:</b> PR1481050320982
	City Potomac	State MD	Zip Code 20854
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Chief Medical Officer	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ivan R Sabel		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 4819 Quebec Street NW		<b>Transaction ID:</b> PR1481050420982
	City Washington	State DC	Zip Code 20016-3228
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Chief Executive Officer	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael L Schlesinger		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 830 Riverhaven Drive		<b>Transaction ID:</b> PR1481050520982
	City Suwanee	State GA	Zip Code 30024
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
	Name of Employer Hanger Orthopedic Group, Inc.	Occupation Vice President, Mergers & Acquisitions	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 ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<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 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kirby G Shelton	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 10020 Gramercy	<b>Transaction ID:</b> PR1481050620982
	City State Zip Code Oklahoma City OK 73139-5416	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert T Simms	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 159 Ash St	<b>Transaction ID:</b> PR1481050720982
	City State Zip Code Lake Zurich IL 60047-1309	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John Spaeth	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 18325 Rathbun Hills Road	<b>Transaction ID:</b> PR1481051020982
	City State Zip Code Wildwood MO 63069	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</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: PAGE 21 / 30  
(check only one)

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

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

**A.**

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

Mailing Address 23848 Skyline Dr.

City Mission Viejo State CA Zip Code 92692-1875

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

Name of Employer Hanger Orthopedic Group, Inc. Occupation President, HPO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481051420982

Amount of Each Receipt this Period 150.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Albert P Teoli

Mailing Address 7610 St. Marlo Country Club Pk

City Duluth State GA Zip Code 30097-1620

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481051520982

Amount of Each Receipt this Period 150.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Brian A Wheeler

Mailing Address 8 Hawk Road

City Lawrenceville State NJ Zip Code 08648

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2008

**Transaction ID:** PR1481051920982

Amount of Each Receipt this Period 150.00

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: (check only one)	PAGE 22 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Louis Zermeno	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 2108 Pecan Creek Drive	<b>Transaction ID:</b> PR1481052320982
	City State Zip Code Mesquite TX 75181	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Hanger Orthopedic Group, Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard F Hall	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 250 Oak Knoll Drive	<b>Transaction ID:</b> PR1481052620982
	City State Zip Code Marine On St. Croi MN 55047	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 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 ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bret T Bostock	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 1018 W. State Ave.	<b>Transaction ID:</b> PR1481053920982
	City State Zip Code Phoenix AZ 85021	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$25.00 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 ▼ 325.00	

<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: PAGE 23 / 30

(check only one)

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

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

**A.**

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

Mailing Address 3240 E. Stanford Drive

City State Zip Code  
Paradise Valley AZ 85253

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

Name of Employer Occupation  
Hanger Orthopedic Group, Inc. Managing Director, CARES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2008

Transaction ID: PR1481054520982

Amount of Each Receipt this Period

75.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Edward S Gormanson

Mailing Address 9013 Windwood

City State Zip Code  
Wichita KS 67226-1510

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

Name of Employer Occupation  
Hanger Orthopedic Group, Inc. Practitioner, Prosthetist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2008

Transaction ID: PR1481055420982

Amount of Each Receipt this Period

75.00

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

**C.**

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

Mailing Address 26746 Orchid Trail

City State Zip Code  
Boerne TX 78006-5547

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  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2008

Transaction ID: PR1481057620982

Amount of Each Receipt this Period

75.00

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

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

225.00

**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 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) James A McCalmont	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 41504 N. Congressional Dr.	<b>Transaction ID:</b> PR1481057920982
	City State Zip Code Anthem AZ 85086	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Hanger Orthopedic Group, Inc. Occupation Practice Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Nancy Alice Voisin	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 6004 28th Street, N.W.	<b>Transaction ID:</b> PR1481060520982
	City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Hanger Orthopedic Group, Inc. Occupation Chief Legal Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Steve Prock	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 1011 Higgins Rd	<b>Transaction ID:</b> PR1504291920982
	City State Zip Code Sherman TX 75092-6519	Amount of Each Receipt this Period 150.00
	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 ▼ 350.00	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) .....	6300.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Kratovil For Congress  Mailing Address 222 Main Sail Drive PO Box 518  City Stevensville State MD Zip Code 21666  Purpose of Disbursement Contribution Candidate Name Mr. Frank Kratovil Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15695247 Date of Disbursement 07 / 01 / 2008	Amount of Each Disbursement this Period 1000.00  Contribution
B.	Full Name (Last, First, Middle Initial) Duncan For Congress  Mailing Address PO Box 2646  City Knoxville State TN Zip Code 37901  Purpose of Disbursement Contribution Candidate Name Rep. John Duncan, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15801136 Date of Disbursement 07 / 14 / 2008	Amount of Each Disbursement this Period 2000.00  Contribution
C.	Full Name (Last, First, Middle Initial) Onder For Congress  Mailing Address PO Box 1771  City Columbia State MO Zip Code 65205  Purpose of Disbursement Contribution Candidate Name Mr. Robert Onder Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15801175 Date of Disbursement 07 / 28 / 2008	Amount of Each Disbursement this Period 2500.00  Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 30

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Price For Congress  Mailing Address P.O. Box 425  City Roswell State GA Zip Code 30077  Purpose of Disbursement Contribution Candidate Name Rep. Thomas Price, M.D. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15801185 Date of Disbursement 07 / 30 / 2008
	Amount of Each Disbursement this Period 1000.00  Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Kirk For Congress  Mailing Address P.O. Box 8  City Winnetka State IL Zip Code 60093  Purpose of Disbursement Contribution Candidate Name Rep. Mark Kirk Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15801187 Date of Disbursement 07 / 31 / 2008
	Amount of Each Disbursement this Period 1000.00  Contribution

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

2000.00

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

7500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
Hanger Orthopedic Group Maryland PAC

Mailing Address Two Bethesda Metro Center, Suite 1

City Bethesda State MD Zip Code 20814-6320

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 15801130  
Date of Disbursement

07 / 09 / 2008

Amount of Each Disbursement this Period

5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Chuck Kleckley Campaign Committee

Mailing Address P.O. Box 4085

City Lake Charles State LA Zip Code 70606

Purpose of Disbursement  
Charles Kleckley, STATE HOUSE 36th LA

Candidate Name  
LA Rep. Charles Kleckley

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: LA District: 36

Transaction ID: 15801137  
Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

2500.00

Charles Kleckley, STATE HOUSE 36th LA

**C.** Full Name (Last, First, Middle Initial)  
Chris Roy Campaign Committee

Mailing Address 504 Walden Drive

City Alexandria State LA Zip Code 71301

Purpose of Disbursement  
Chris Roy, STATE HOUSE 25th LA

Candidate Name  
LA Rep. Chris Roy, Jr.

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: LA District: 25

Transaction ID: 15801167  
Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

1000.00

Chris Roy, STATE HOUSE 25th LA

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

8500.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 28 / 30

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

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

A.	Full Name (Last, First, Middle Initial) Damon Baldone Campaign Committee	Transaction ID: 15801168 Date of Disbursement 07 / 22 / 2008
	Mailing Address 162 New Orleans Boulevard	Amount of Each Disbursement this Period 1000.00
	City Houma State LA Zip Code 70364	
	Purpose of Disbursement Damon Baldone, STATE HOUSE 53rd LA	011 Category/ Type
	Candidate Name LA Rep. Damon Baldone	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 53	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Damon Baldone, STATE HOUSE 53rd LA

B.	Full Name (Last, First, Middle Initial) Kirk Talbot Campaign Committee	Transaction ID: 15801169 Date of Disbursement 07 / 22 / 2008
	Mailing Address 312 Berclair Avenue	Amount of Each Disbursement this Period 500.00
	City River Ridge State LA Zip Code 70123	
	Purpose of Disbursement Kirk Talbot, STATE HOUSE 78th LA	011 Category/ Type
	Candidate Name LA Rep. Kirk Talbot	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 78	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Kirk Talbot, STATE HOUSE 78th LA

C.	Full Name (Last, First, Middle Initial) Page Cortez Campaign Committee	Transaction ID: 15801170 Date of Disbursement 07 / 22 / 2008
	Mailing Address 111 Southwark Drive	Amount of Each Disbursement this Period 500.00
	City Lafayette State LA Zip Code 70508	
	Purpose of Disbursement Patrick Cortez, STATE HOUSE 43rd LA	011 Category/ Type
	Candidate Name LA Rep. Patrick Cortez	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 43	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Patrick Cortez, STATE HOU- SE 43rd LA

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Dale Erdey Campaign Committee	Transaction ID: 15801171 Date of Disbursement
	Mailing Address P.O. Box 400	<input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Livingston State LA Zip Code 70754	Amount of Each Disbursement this Period
	Purpose of Disbursement Dale Erdey, STATE SENATE 13th LA	<input type="text" value="2000.00"/>
	Candidate Name LA Sen. Dale Erdey	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District:	Dale Erdey, STATE SENATE 13th LA

B.	Full Name (Last, First, Middle Initial) Cravins for Senate	Transaction ID: 15801172 Date of Disbursement
	Mailing Address P.O. Box 2507	<input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Opelousas State LA Zip Code 70570	Amount of Each Disbursement this Period
	Purpose of Disbursement Donald Cravins, STATE SENATE 24th LA	<input type="text" value="1000.00"/>
	Candidate Name LA Sen. Donald Cravins	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District:	Donald Cravins, STATE SENATE 24th LA

C.	Full Name (Last, First, Middle Initial) Julie Quinn Campaign Committee	Transaction ID: 15801173 Date of Disbursement
	Mailing Address 418 Northline	<input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Metairie State LA Zip Code 70005	Amount of Each Disbursement this Period
	Purpose of Disbursement Julie Quinn, STATE SENATE 6th LA	<input type="text" value="500.00"/>
	Candidate Name LA Sen. Julie Quinn	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District:	Julie Quinn, STATE SENATE 6th LA

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 30

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

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

A.

Full Name (Last, First, Middle Initial)  
Troy Hebert Campaign Committee

Mailing Address P.O. Box 918

City State Zip Code  
Jeanerette LA 70544

Purpose of Disbursement  
Troy Hebert, STATE SENATE 22nd LA

Candidate Name  
LA Sen. Troy Hebert

Office Sought:  House  
 Senate  
 President

State: LA District:

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 15801174

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

500.00

Troy Hebert, STATE SENATE  
22nd LA

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

500.00

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

14500.00