

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

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) 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

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)