

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
II-VI Incorporated PAC

ADDRESS (number and street) 375 Saxonburg Boulevard
 Check if different than previously reported. (ACC)
Saxonburg PA 16056

2. **FEC IDENTIFICATION NUMBER** C00377960
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 11 04 2008 in the State of _____

5. Covering Period 10 01 2008 through 11 24 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 John Almquist

Signature of Treasurer Electronically Filed by John Almquist Date 11 25 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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
II-VI Incorporated PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

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		20181.02
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	19360.96									
(c) Total Receipts (from Line 19)	8287.49	17117.43								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27648.45	37298.45								
7. Total Disbursements (from Line 31)	5000.00	14650.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22648.45	22648.45								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
II-VI Incorporated PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

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	8232.49	15879.96
(i) Itemized (use Schedule A)	55.00	1237.47
(ii) Unitemized	8287.49	17117.43
(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)	8287.49	17117.43
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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))	8287.49	17117.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8287.49	17117.43

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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	14650.00
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.....	0.00	0.00
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))..	5000.00	14650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	14650.00

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)	8287.49	17117.43
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8287.49	17117.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
II-VI Incorporated PAC

A.	Full Name (Last, First, Middle Initial) Carl Johnson		Date of Receipt
	Mailing Address 503 Applehill Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Gibsonia	PA	15044
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5583
Name of Employer II-VI Incorporated		Occupation Chairman of the Board & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

B.	Full Name (Last, First, Middle Initial) Charles J Kraisinger		Date of Receipt
	Mailing Address 1014 Redoak Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 3 / 2 0 0 8
	City	State	Zip Code
	Harrison City	PA	15636
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5585
Name of Employer II-VI Incorporated		Occupation Research Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 400.00

C.	Full Name (Last, First, Middle Initial) Mr. Francis J. Kramer		Date of Receipt
	Mailing Address 10491 Allante Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 3 / 2 0 0 8
	City	State	Zip Code
	Gibsonia	PA	15044
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5584
Name of Employer II-VI Incorporated		Occupation President & COO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 7900.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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NAME OF COMMITTEE (In Full)
II-VI Incorporated PAC

A.	Full Name (Last, First, Middle Initial) Mr. James Martinelli		Date of Receipt
	Mailing Address 1832 Liberty Way		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Valencia	PA	16059
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.5567
Name of Employer II-VI Incorporated		Occupation V. P. - Government & Military Business	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="950.00"/>	semi-monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) Mr. James Martinelli		Date of Receipt
	Mailing Address 1832 Liberty Way		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Valencia	PA	16059
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.5569
Name of Employer II-VI Incorporated		Occupation V. P. - Government & Military Business	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="1000.00"/>	semi-monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) Mr. James Martinelli		Date of Receipt
	Mailing Address 1832 Liberty Way		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Valencia	PA	16059
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.5568
Name of Employer II-VI Incorporated		Occupation V. P. - Government & Military Business	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="1050.00"/>	semi-monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 12

(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)
II-VI Incorporated PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory Quarles

Mailing Address 2122 Harbour Watch Drive

City State Zip Code
Tarpon Springs FL 34689

FEC ID number of contributing federal political committee. C

Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Director of Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.5573

Amount of Each Receipt this Period 20.00

semi-monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
Mr. Gregory Quarles

Mailing Address 2122 Harbour Watch Drive

City State Zip Code
Tarpon Springs FL 34689

FEC ID number of contributing federal political committee. C

Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Director of Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.5574

Amount of Each Receipt this Period 20.00

semi-monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
Mr. Gregory Quarles

Mailing Address 2122 Harbour Watch Drive

City State Zip Code
Tarpon Springs FL 34689

FEC ID number of contributing federal political committee. C

Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Director of Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.5575

Amount of Each Receipt this Period 20.00

semi-monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) 60.00

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 / 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
II-VI Incorporated PAC

<p>A. Full Name (Last, First, Middle Initial) Les Stearns</p> <p>Mailing Address 3605 Morley Drive</p> <p>City State Zip Code New Port Richey FL 34652</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer II-VI Incorporated, VLOC Occupation International Sales Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 310.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2008</p> <p>Transaction ID: SA11AI.5570</p> <p>Amount of Each Receipt this Period 20.00</p> <p>semi-monthly payroll deduction</p>
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<p>B. Full Name (Last, First, Middle Initial) Les Stearns</p> <p>Mailing Address 3605 Morley Drive</p> <p>City State Zip Code New Port Richey FL 34652</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer II-VI Incorporated, VLOC Occupation International Sales Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 330.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2008</p> <p>Transaction ID: SA11AI.5571</p> <p>Amount of Each Receipt this Period 20.00</p> <p>semi-monthly payroll deduction</p>
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<p>C. Full Name (Last, First, Middle Initial) Les Stearns</p> <p>Mailing Address 3605 Morley Drive</p> <p>City State Zip Code New Port Richey FL 34652</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer II-VI Incorporated, VLOC Occupation International Sales Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2008</p> <p>Transaction ID: SA11AI.5572</p> <p>Amount of Each Receipt this Period 20.00</p> <p>semi-monthly payroll deduction</p>
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SUBTOTAL of Receipts This Page (optional)	60.00
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 / 12

(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)
II-VI Incorporated PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Richard K. Stevenson

Mailing Address 4254 Ellinwood Blvd.

City State Zip Code
Palm Harbor FL 34685

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

Name of Employer
II-VI Incorporated (VLOC Subs.)

Occupation
Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.77

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.5576

Amount of Each Receipt this Period

20.83

semi-monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
Mr. Richard K. Stevenson

Mailing Address 4254 Ellinwood Blvd.

City State Zip Code
Palm Harbor FL 34685

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

Name of Employer
II-VI Incorporated (VLOC Subs.)

Occupation
Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.60

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.5577

Amount of Each Receipt this Period

20.83

semi-monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
Mr. Richard K. Stevenson

Mailing Address 4254 Ellinwood Blvd.

City State Zip Code
Palm Harbor FL 34685

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

Name of Employer
II-VI Incorporated (VLOC Subs.)

Occupation
Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.43

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.5578

Amount of Each Receipt this Period

20.83

semi-monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)

62.49

TOTAL This Period (last page this line number only)

8232.49

**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 11 / 12

<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)
II-VI Incorporated PAC

A.	Full Name (Last, First, Middle Initial) BILIRAKIS FOR CONGRESS	Transaction ID: SB23.5589
	Mailing Address 610 S. Boulevard	Date of Disbursement 10 / 29 / 2008
	City Tampa State FL Zip Code 33606	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name BILIRAKIS FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 09	

B.	Full Name (Last, First, Middle Initial) MURTHA FOR CONGRESS COMMITTEE	Transaction ID: SB23.5594
	Mailing Address Suite 120 551 Main Street BT FINANCIAL PLAZA SUITE 220	Date of Disbursement 10 / 29 / 2008
	City JOHNSTOWN State PA Zip Code 15901	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name JOHN P MR. MURTHA	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: PA District: 12	

C.	Full Name (Last, First, Middle Initial) People for English	Transaction ID: SB23.5587
	Mailing Address PO BOX 1940	Date of Disbursement 10 / 29 / 2008
	City ERIE State PA Zip Code 16507	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name People for English	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: PA District: 03	

SUBTOTAL of Disbursements This Page (optional)	3500.00
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 12 / 12

<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)
II-VI Incorporated PAC

A.	Full Name (Last, First, Middle Initial) ROGER F. WICKER		Transaction ID: SB23.5588	
	Mailing Address P. O. Box 874		Date of Disbursement 10 / 29 / 2008	
	City Tupelo	State MS	Zip Code 38802	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement		Category/ Type	
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

5000.00