

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
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

ADDRESS (number and street) 6363 OAK TREE BLVD
 Check if different than previously reported. (ACC)
INDEPENDENCE OH 44131

2. **FEC IDENTIFICATION NUMBER** C00082271
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY **STATE** **ZIP CODE**

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 11 04 2008 in the State of OH
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2008 through 10 15 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 Ms Christen Carmigiano

Signature of Treasurer Electronically Filed by Ms Christen Carmigiano Date 10 17 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

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 | 0 |

| | |
|---|---|
| D | D |
| 1 | 5 |

| | | | |
|---|---|---|---|
| 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 | | 73523.36 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 8 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 41600.32 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 2153.17 | 46497.52 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 43753.49 | 120020.88 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 16056.30 | 92323.69 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 27697.19 | 27697.19 | | | | | | | | |
| 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

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

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 | 0 |

| | |
|---|---|
| D | D |
| 1 | 5 |

| | | | |
|---|---|---|---|
| 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 | 2000.00 | 44700.00 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 100.00 | 925.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 2100.00 | 45625.00 |
| (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) | 2100.00 | 45625.00 |
| 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) | 53.17 | 872.52 |
| 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)) | 2153.17 | 46497.52 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 2153.17 | 46497.52 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| 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..... | 56.30 | 823.69 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 56.30 | 823.69 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 16000.00 | 91500.00 |
| 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)).. | 16056.30 | 92323.69 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 16056.30 | 92323.69 |

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) | 2100.00 | 45625.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2100.00 | 45625.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 56.30 | 823.69 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 53.17 | 872.52 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 3.13 | -48.83 |

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

| | |
|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 6 / 14 |
| | (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)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.

| | | | |
|---|-------------------------|---|---|
| Full Name (Last, First, Middle Initial) Mr. William Gaskin | | Date of Receipt MM / DD / YYYY 10 / 02 / 2008 | |
| Mailing Address 210 Senlac Hills Dr. | | Transaction ID: SA11AI.6302 | |
| City Chagrin Falls | State OH | Zip Code 44022-3251 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | Itemized contribution | |
| Name of Employer Precision Metalforming As- soc. | Occupation Executive | Aggregate Year-to-Date ▼ 1000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

B.

| | | | |
|---|-------------------------|---|---|
| Full Name (Last, First, Middle Initial) Mr. Carl Michaelsen, III | | Date of Receipt MM / DD / YYYY 10 / 01 / 2008 | |
| Mailing Address 10933 Fawn Trail Dr. | | Transaction ID: SA11AI.6300 | |
| City Orland Park | State IL | Zip Code 60467 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | Itemized contribution | |
| Name of Employer ODM Tool & Manufacturing Co. | Occupation Executive | Aggregate Year-to-Date ▼ 1000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 2000.00 |
| TOTAL This Period (last page this line number only) | 2000.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|--|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 7 / 14 | |
| | (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 checked="" type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------------------|---|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Full Name (Last, First, Middle Initial) PMA | | Date of Receipt | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 6363 Oak Tree Blvd. | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | / | 1 | 4 | / | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 1 | 0 | / | 1 | 4 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | | |
| City | State | Zip Code | Transaction ID: SA15.6303 | | | | | | | | | | | | | | | | | | | | |
| Independence | OH | 44131 | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 53.17 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer | Occupation | | Offsets to bank charges | | | | | | | | | | | | | | | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | 872.52 | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) | 53.17 |
| TOTAL This Period (last page this line number only) | 53.17 |

**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 8 / 14

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" 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 type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

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NAME OF COMMITTEE (In Full)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.

Full Name (Last, First, Middle Initial)

National City Bank

Mailing Address P.O. Box 5756

City
Cleveland

State
OH

Zip Code
44101-0756

Purpose of Disbursement
Bank charges

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6304

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

56.30

SUBTOTAL of Disbursements This Page (optional)

56.30

TOTAL This Period (last page this line number only)

56.30

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)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

| | | |
|-----------|---|--|
| A. | Full Name (Last, First, Middle Initial) CHRIS LEE FOR CONGRESS Mailing Address PO Box 15395 City Rochester State NY Zip Code 14615 Purpose of Disbursement Campaign contribution Candidate Name CHRISTOPHER J. LEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6334 Date of Disbursement 10 / 13 / 2008 Amount of Each Disbursement this Period 1000.00 011 Category/ Type |
| B. | Full Name (Last, First, Middle Initial) CHRIS MYERS FOR CONGRESS Mailing Address P.O. Box 785 City Mt. Holly State NJ Zip Code 08060 Purpose of Disbursement Campaign contribution Candidate Name CHRISTOPHER MYERS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6317 Date of Disbursement 10 / 13 / 2008 Amount of Each Disbursement this Period 1000.00 011 Category/ Type |
| C. | Full Name (Last, First, Middle Initial) DAN LIPINSKI FOR CONGRESS Mailing Address 4501 GRAND City WESTERN SPRINGS State IL Zip Code 60558 Purpose of Disbursement Campaign contribution Candidate Name DANIEL WILLIAM LIPINSKI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6306 Date of Disbursement 10 / 06 / 2008 Amount of Each Disbursement this Period 1000.00 011 Category/ Type |

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

| | | | |
|-----------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) FRIENDS OF ERIK PAULSEN | Transaction ID: SB23.6325 Date of Disbursement 10 / 13 / 2008 | |
| | Mailing Address P.O. Box 44369 250 Prairie Center Drive | | |
| | City Eden Prairie State MN Zip Code 55344 | Amount of Each Disbursement this Period 1000.00 | |
| | Purpose of Disbursement Campaign contribution Candidate Name ERIK PAULSEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 011 Category/ Type | |
| B. | Full Name (Last, First, Middle Initial) FRIENDS OF GLENN THOMPSON | Transaction ID: SB23.6331 Date of Disbursement 10 / 13 / 2008 | |
| | Mailing Address 198 PARK ROAD | | |
| | City HOWARD State PA Zip Code 16841 | Amount of Each Disbursement this Period 1000.00 | |
| | Purpose of Disbursement Campaign contribution Candidate Name GLENN THOMPSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 05 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 011 Category/ Type | |
| C. | Full Name (Last, First, Middle Initial) GARD FOR CONGRESS | Transaction ID: SB23.6308 Date of Disbursement 10 / 13 / 2008 | |
| | Mailing Address PO BOX 277 | | |
| | City GREEN BAY State WI Zip Code 54305 | Amount of Each Disbursement this Period 1000.00 | |
| | Purpose of Disbursement Campaign contribution Candidate Name JOHN G GARD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 011 Category/ Type | |

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.

Full Name (Last, First, Middle Initial)
GEOFF DAVIS FOR CONGRESS

Transaction ID: SB23.6307

Date of Disbursement

Mailing Address 3161 Dixie Highway
Suite F

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 9 | | 2 | 0 | 0 | 8 |

City Erlanger State KY Zip Code 41018

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
Campaign contribution

| |
|-----|
| 011 |
|-----|

Category/
Type

Candidate Name
GEOFFREY C DAVIS

Office Sought: House
 Senate
 President
State: KY District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
GUTHRIE FOR CONGRESS

Transaction ID: SB23.6311

Date of Disbursement

Mailing Address PO BOX 9639

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

City BOWLING GREEN State KY Zip Code 42102

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
Campaign contribution

| |
|-----|
| 011 |
|-----|

Category/
Type

Candidate Name
STEVEN BRETT GUTHRIE

Office Sought: House
 Senate
 President
State: KY District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
JOE DONNELLY FOR CONGRESS

Transaction ID: SB23.6340

Date of Disbursement

Mailing Address PO Box 1961

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 4 | | 2 | 0 | 0 | 8 |

City South Bend State IN Zip Code 46634

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
Campaign contribution

| |
|-----|
| 011 |
|-----|

Category/
Type

Candidate Name
JOSEPH S MR. DONNELLY

Office Sought: House
 Senate
 President
State: IN District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|---------|
| 3000.00 |
|---------|

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) LANCE FOR CONGRESS <hr/> Mailing Address PO Box 225 <hr/> City Colonia State NJ Zip Code 07067 <hr/> Purpose of Disbursement Campaign contribution Candidate Name LEONARD LANCE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6314 Date of Disbursement 10 / 13 / 2008 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) LATTA FOR CONGRESS <hr/> Mailing Address 300 North Main Street <hr/> City Bowling Green State OH Zip Code 43402 <hr/> Purpose of Disbursement Campaign contribution Candidate Name ROBERT EDWARD LATTA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6343 Date of Disbursement 10 / 01 / 2008 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) NORTHUP FOR CONGRESS <hr/> Mailing Address P.O. Box 7913 <hr/> City Louisville State KY Zip Code 40257 <hr/> Purpose of Disbursement Campaign contribution Candidate Name ANNE MEAGHER NORTHUP Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6320 Date of Disbursement 10 / 13 / 2008 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) OZINGA FOR CONGRESS <hr/> Mailing Address 19001 OLD LAGRANGE ROAD SUITE 430 <hr/> City MOKENA State IL Zip Code 60448 <hr/> Purpose of Disbursement Campaign contribution Candidate Name MARTIN III OZINGA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6322 Date of Disbursement 10 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 |
| | Category/Type: 011 |
| B. Full Name (Last, First, Middle Initial) SCHOCK FOR CONGRESS <hr/> Mailing Address PO Box 10555 <hr/> City Peoria State IL Zip Code 61612 <hr/> Purpose of Disbursement Campaign contribution Candidate Name AARON SCHOCK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6328 Date of Disbursement 10 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 |
| | Category/Type: 011 |
| C. Full Name (Last, First, Middle Initial) SCHURING FOR CONGRESS COMMITTEE <hr/> Mailing Address 400 MARKET AVE NORTH SUITE 400 <hr/> City CANTON State OH Zip Code 44702 <hr/> Purpose of Disbursement Campaign contribution Candidate Name KIRK SCHURING Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.6337 Date of Disbursement 10 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 |
| | Category/Type: 011 |

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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 14 / 14

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.

Full Name (Last, First, Middle Initial)

STEVE AUSTRIA FOR CONGRESS

Transaction ID: SB23.6305

Date of Disbursement

Mailing Address 2537 OBETZ DR

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 6 | | 2 | 0 | 0 | 8 |

City State Zip Code
BEAVERCREEK OH 45434

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
Campaign contribution

| |
|-------------------|
| 011 |
| Category/ Type |

Candidate Name
STEVE C AUSTRIA

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OH District: 07

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 1000.00 |
|---------|

TOTAL This Period (last page this line number only)

| |
|----------|
| 16000.00 |
|----------|