

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)

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 04 01 2008 through 04 30 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 05 13 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
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

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	79071.81									
(c) Total Receipts (from Line 19)	21481.68	32215.91								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	100553.49	105739.27								
7. Total Disbursements (from Line 31)	52.65	5238.43								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	100500.84	100500.84								
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
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

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	21300.00	31600.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	100.00	325.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	21400.00	31925.00
(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)	21400.00	31925.00
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)	81.68	290.91
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))	21481.68	32215.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21481.68	32215.91

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.....	52.65	238.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	52.65	238.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
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))..	52.65	5238.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52.65	5238.43

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)	21400.00	31925.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21400.00	31925.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	52.65	238.43
37. Offsets to Operating Expenditures (from Line 15, page 3)	81.68	290.91
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-29.03	-52.48

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 / 13
	<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)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.	Full Name (Last, First, Middle Initial) Ms. Karla Aaron	Date of Receipt MM / DD / YYYY 04 / 10 / 2008
	Mailing Address 11261 NW 5th St.	Transaction ID: SA11AI.6133
	City State Zip Code Plantation FL 33325	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Itemized contribution
	Name of Employer Occupation Hialeah Metal Spinning Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Robert Earl Clay	Date of Receipt MM / DD / YYYY 04 / 24 / 2008
	Mailing Address 6861 Goldenrod	Transaction ID: SA11AI.6141
	City State Zip Code Rockford MI 49507	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Itemized contribution
	Name of Employer Occupation Pridgeon & Clay Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jody Fledderman	Date of Receipt MM / DD / YYYY 04 / 16 / 2008
	Mailing Address 4212 Stockpile Rd.	Transaction ID: SA11AI.6137
	City State Zip Code Batesville IN 47006-7416	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Itemized contribution
	Name of Employer Occupation Batesville Tool & Die Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3500.00
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 7 / 13
(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)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A. Full Name (Last, First, Middle Initial)
Ms. Lisa Habe

Mailing Address 6936 Eagle Mills Rd.

City Willoughby State OH Zip Code 44094-9629

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

Name of Employer Interlake Stamping Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 03 / 2008
Transaction ID: SA11AI.6126
Amount of Each Receipt this Period: 500.00
Itemized contribution

B. Full Name (Last, First, Middle Initial)
Mr. Dale Harrison

Mailing Address 272 Harrison Rd.

City Turtle Creek State PA Zip Code 15145-1042

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

Name of Employer E.H. Schwab Company Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 07 / 2008
Transaction ID: SA11AI.6129
Amount of Each Receipt this Period: 1000.00
Itemized contribution

C. Full Name (Last, First, Middle Initial)
Mr. Thomas Jagemann

Mailing Address 2304 Hunters Ridge Ct.

City Manitowoc State WI Zip Code 54220

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

Name of Employer Jagemann Stamping Company Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 04 / 16 / 2008
Transaction ID: SA11AI.6138
Amount of Each Receipt this Period: 2000.00
Itemized contribution

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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 8 / 13

(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)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Laystrom

Mailing Address 1920 S. Falcon Dr.

City State Zip Code
Libertyville IL 60048-4619

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

Name of Employer
Laystrom Manufacturing Co-
mpany

Occupation
Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.6135

Amount of Each Receipt this Period

500.00

Itemized contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Robert J. McCoy

Mailing Address 7356 Pickway Dr.

City State Zip Code
Cincinnati OH 45233-4249

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

Name of Employer
ART Technologies Inc.

Occupation
Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.6134

Amount of Each Receipt this Period

500.00

Itemized contribution

C.

Full Name (Last, First, Middle Initial)

Mr. David Mealman

Mailing Address 25201 Cedar Ave. S.

City State Zip Code
Farmington MN 55024

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

Name of Employer
Morrissey, Inc.

Occupation
Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.6125

Amount of Each Receipt this Period

1000.00

Itemized contribution

SUBTOTAL of Receipts This Page (optional) ►

2000.00

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 / 13
	<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)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.	Full Name (Last, First, Middle Initial) Mr. John Seeger, Jr.		Date of Receipt
	Mailing Address 12071 State Rd. 48 PO Box 169		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 4 / 2 0 0 8
	City	State	Zip Code
	Grantsburg	WI	54840
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6136
Name of Employer Dayton Rogers		Occupation Executive	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"/> 1000.00
			Itemized contribution

B.	Full Name (Last, First, Middle Initial) Mr. Frank Semcer		Date of Receipt
	Mailing Address 360 Lake Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 3 / 2 0 0 8
	City	State	Zip Code
	Far Hills	NJ	07931
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6127
Name of Employer Micro Stamping Corporation		Occupation Executive	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"/> 2000.00
			Itemized contribution

C.	Full Name (Last, First, Middle Initial) Mr. Wallace Smith		Date of Receipt
	Mailing Address 25535 Shoreline Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Novi	MI	48374
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6140
Name of Employer E & E Manufacturing Co., Inc.		Occupation Executive	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
			Itemized contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5500.00
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 10 / 13
	<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)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.	Full Name (Last, First, Middle Initial) Mr. William Sopko	Date of Receipt MM / DD / YYYY 04 / 07 / 2008
	Mailing Address 26500 Lakeland Blvd.	Transaction ID: SA11AI.6128
	City State Zip Code Euclid OH 44132-2643	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Itemized contribution
	Name of Employer Occupation Stamco Industries, Inc. Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Brian Swanson	Date of Receipt MM / DD / YYYY 04 / 24 / 2008
	Mailing Address 25641 Hillsdale	Transaction ID: SA11AI.6139
	City State Zip Code Novi MI 48374	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Itemized contribution
	Name of Employer Occupation Globe Tech LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Mark Symonds	Date of Receipt MM / DD / YYYY 04 / 24 / 2008
	Mailing Address 8040 Ortonville Rd.	Transaction ID: SA11AI.6143
	City State Zip Code Clarkston MI 48348-4468	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Itemized contribution
	Name of Employer Occupation Plexus Systems, LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
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 11 / 13
	<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)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

A.	Full Name (Last, First, Middle Initial) Mr. Nick Tarkany		Date of Receipt	
	Mailing Address 2190 Dalton Ct.		M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.6144
	Miamisburg	OH	45342-6702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer International Mold Steel		Occupation Executive		Itemized contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) Mr. Bruce Walker		Date of Receipt	
	Mailing Address 16689 Edge Gate Dr.		M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.6130
	Riverside	CA	92504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Walker Corporation		Occupation Executive		Itemized contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

C.	Full Name (Last, First, Middle Initial) Ms Gretchen Zierick		Date of Receipt	
	Mailing Address 24 Sherwood Rd.		M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.6142
	Upper Saddle River	NJ	07458-1634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		3000.00	
Name of Employer Zierick Manufacturing Corp.		Occupation Executive		Itemized contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional)	▶	4300.00
TOTAL This Period (last page this line number only)	▶	21300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 13	
	(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>0</td><td>4</td><td></td><td>1</td><td>1</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	0	4		1	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		1	1		2	0	0	8														
	City Independence State OH Zip Code 44131		Transaction ID: SA15.6145																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 81.68																					
Name of Employer Occupation		Offsets to bank charges																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.91																						

SUBTOTAL of Receipts This Page (optional)	▶	81.68
TOTAL This Period (last page this line number only)	▶	81.68

**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)

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<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

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)

National City Bank

Mailing Address P.O. Box 5756

City
Cleveland

State
OH

Zip Code
44101-0756

Purpose of Disbursement
Bank charges

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6146

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)