

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 / 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) Ms. Lisa Habe		Date of Receipt	
	Mailing Address 6936 Eagle Mills Rd.		M M / D D / Y Y Y Y Y 0 4 / 0 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.6126
	Willoughby	OH	44094-9629	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Interlake Stamping		Occupation Executive		Itemized contribution
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. Dale Harrison		Date of Receipt	
	Mailing Address 272 Harrison Rd.		M M / D D / Y Y Y Y Y 0 4 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.6129
	Turtle Creek	PA	15145-1042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer E.H. Schwab Company		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) Mr. Thomas Jagemann		Date of Receipt	
	Mailing Address 2304 Hunters Ridge Ct.		M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.6138
	Manitowoc	WI	54220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		2000.00	
Name of Employer Jagemann Stamping Company		Occupation Executive		Itemized contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	