

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 Saxonburg PA 16056 Check if different than previously reported. (ACC)

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, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 11 28 2006 through 12 31 2006

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 01 31 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
II-VI Incorporated PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		22661.18
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	15218.61									
(c) Total Receipts (from Line 19) .....	377.49	12534.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	15596.10	35196.10								
7. Total Disbursements (from Line 31) .....	0.00	19600.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	15596.10	15596.10								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	332.49	11172.45
(i) Itemized (use Schedule A) .....	45.00	1362.47
(ii) Unitemized .....	377.49	12534.92
(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) .....	377.49	12534.92
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)) .....	377.49	12534.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	377.49	12534.92

**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.....	0.00	19600.00
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))..	0.00	19600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.00	19600.00

**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) .....	377.49	12534.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	377.49	12534.92
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 10
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> J. Bruce Glick		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 41 Fieldstone Place		Transaction ID: SA11A1.5100
City State Zip Code Zelienople PA 16063	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer eV Products, division of II-VI Inc.	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B.</b> J. Bruce Glick		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 41 Fieldstone Place		Transaction ID: SA11A1.5101
City State Zip Code Zelienople PA 16063	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer eV Products, division of II-VI Inc.	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>C.</b> J. Bruce Glick		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 41 Fieldstone Place		Transaction ID: SA11A1.5102
City State Zip Code Zelienople PA 16063	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer eV Products, division of II-VI Inc.	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	30.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 10
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James Martinelli		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1832 Liberty Way		Transaction ID: SA11A1.5106
City State Zip Code Valencia PA 16059	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated Occupation V. P. - Government & Military Business	Aggregate Year-to-Date ▼ 1100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James Martinelli		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1832 Liberty Way		Transaction ID: SA11A1.5107
City State Zip Code Valencia PA 16059	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated Occupation V. P. - Government & Military Business	Aggregate Year-to-Date ▼ 1150.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James Martinelli		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 1832 Liberty Way		Transaction ID: SA11A1.5108
City State Zip Code Valencia PA 16059	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated Occupation V. P. - Government & Military Business	Aggregate Year-to-Date ▼ 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 10
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gregory Quarles		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 2122 Harbour Watch Drive		<b>Transaction ID:</b> SA11A1.5112
City State Zip Code Tarpon Springs FL 34689	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Director of Research	Aggregate Year-to-Date ▼ 440.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Gregory Quarles		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 2122 Harbour Watch Drive		<b>Transaction ID:</b> SA11A1.5113
City State Zip Code Tarpon Springs FL 34689	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Director of Research	Aggregate Year-to-Date ▼ 460.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Gregory Quarles		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 2122 Harbour Watch Drive		<b>Transaction ID:</b> SA11A1.5114
City State Zip Code Tarpon Springs FL 34689	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Director of Research	Aggregate Year-to-Date ▼ 480.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 10
	<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

Full Name (Last, First, Middle Initial) <b>A. Les Stearns</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 3605 Morley Drive		Transaction ID: SA11A1.5115
City State Zip Code New Port Richey FL 34652	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer Occupation II-VI Incorporated, VLOC International Sales Specialist	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Les Stearns</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 3605 Morley Drive		Transaction ID: SA11A1.5116
City State Zip Code New Port Richey FL 34652	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer Occupation II-VI Incorporated, VLOC International Sales Specialist	Aggregate Year-to-Date ▼ 230.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Les Stearns</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 3605 Morley Drive		Transaction ID: SA11A1.5117
City State Zip Code New Port Richey FL 34652	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	semi-monthly payroll deduction	
Name of Employer Occupation II-VI Incorporated, VLOC International Sales Specialist	Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	30.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 10
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard K. Stevenson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 4254 Ellinwood Blvd.		Transaction ID: SA11A1.5118
City State Zip Code Palm Harbor FL 34685	Amount of Each Receipt this Period 20.83	
FEC ID number of contributing federal political committee. <b>C</b>	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Controller	Aggregate Year-to-Date ▼ 458.26	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard K. Stevenson		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 4254 Ellinwood Blvd.		Transaction ID: SA11A1.5119
City State Zip Code Palm Harbor FL 34685	Amount of Each Receipt this Period 20.83	
FEC ID number of contributing federal political committee. <b>C</b>	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Controller	Aggregate Year-to-Date ▼ 479.09	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard K. Stevenson		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 4254 Ellinwood Blvd.		Transaction ID: SA11A1.5120
City State Zip Code Palm Harbor FL 34685	Amount of Each Receipt this Period 20.83	
FEC ID number of contributing federal political committee. <b>C</b>	semi-monthly payroll deduction	
Name of Employer II-VI Incorporated (VLOC Subs.) Occupation Controller	Aggregate Year-to-Date ▼ 499.92	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	62.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	332.49