

Clerk of the House of Representatives  
Legislative Resource Center  
B-106 Cannon Building  
Washington, DC 20515

Secretary of the Senate  
Office of Public Records  
232 Hart Building  
Washington, DC 20510

SECRETARY OF T

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# LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name Precision Metalforming Association			
2. Address <input type="checkbox"/> Check if different than previously reported 6363 Oak Tree Blvd., Independence, OH 44131			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Christopher E. Howell	Telephone 216-901-8800	E-mail (optional)	5. Senate ID 32043
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID 32579

**TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-I

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  ⇨ Termination Date \_\_\_\_\_

11. No Lobby

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

**12. Lobbying Firms**  
INCOME relating to lobbying activities for this reporting period was:  
Less than \$10,000   
\$10,000 or more  ⇨ \$ \_\_\_\_\_  
Income (nearest \$20,000)  
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).

**13. Organizations**  
EXPENSES relating to lobbying activities for this period were:  
Less than \$10,000   
\$10,000 or more  ⇨ \$ \_\_\_\_\_  
Expenses (near

**14. REPORTING METHOD.** Check box to indicate accounting method. See instructions for description  
 Method A. Reporting amounts using LDA def  
 Method B. Reporting amounts under section ( Internal Revenue Code  
 Method C. Reporting amounts under section Internal Revenue Code

Signature

Printed Name and Title Christopher E. Howell, Director of Govt & Public Aff

LD-2 (REV. 6/98)



Registrant Name Precision Metalforming ASSOC. Client Name Self

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each information as requested. Attach additional page(s) as needed.

15. General issue area code \_\_\_\_\_ (one per page)

16. Specific lobbying issues

17. House(s) of Congress and Federal agencies contacted  Check if None

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

Signature *C E Howell* Date 7/26/

