FEC FORM 1

STATEMENT OF ORGANIZATION

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FORM 1 Onda				11011						
						FEC MALLUSCENTER				
1. NAME OF COMMITTEE (in	full)	(Check if is change		Example:If typover the lines		12FE4	М5			
SSAB Ame	ericas	PAC SSA	B _E nte	erprises	ĻĻÇ _{, ,}				<u> </u>	
ADDRESS (number a	nd street)	801 Warı	enville	₽ Rd, Su	ite 800					<u>.</u>
(Check if address is changed)		Lisle					60	532	J- <u>L-</u> _	
			CI	TY		STATE		ZIP (ODE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide o	•	_	com			111		
COMMITTEE'S WEB	PAGE ADD	RESS (URL)								
(Check if is change			 							
2. DATE 03	3 19	° ′ 2012	, ,	No. 1 Taxes	esse de esse	er en	D to go			
3. FEC IDENTIFIC	CATION NU	MBER	C 00	513861						
4. IS THIS STATE	MENT	NEW (N)	OR	X AME	NDED (A)					
I certify that I have of Type or Print Name		s Statement and to			e and belief it	is true, co	rrect and o	complete.		
Signature of Treasure	er <i>G</i>	Mes =				Date ("3"	19°	[′] 2012	ž
NOTE: Submission of		ous, or incomplete in		• • •			•	enalties o	f 2 U.S.C. §	437g.
Office Use Only				Federal El	er Information co ection Commissio 600-424-9530			EC FO	ORM 1 02/2009)	

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. TYP	E OF C	OMMITTEE						
Cai	ndidate	Committee:						
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	ne of ididate							
	ididato ly Affiliatio	Office State On Sought: House Senate President District						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	ne of ididate							
Pai	rty Con	nmittee:						
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.						
Pol	itical A	ction Committee (PAC):						
(e)	\boxtimes	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:						
		Corporation Wo Capital Stock Labor Organization						
		Membership Organization Trade Association Cooperative						
		In addition, this committee is a Lobbyist/Registrant PAC.						
(f)	П	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party						
	ш	committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lebbyist/Rogistrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joir	nt Fund	Iraising Representative:						
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
	Com	mittees Participating in Joint Fundraiser						
	1.							
	2.	FEC ID number C						
	3.	FEC ID number C						
	4.							

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Write or Type Committee Nam	e				
SSAB Americas	PAC SSAB Enterpris	es LLC		•	
6. Name of Any Connected	Organization, Affiliated Committee, Joint	r Fundraising Repre	sentative, or	Leadership PAC Sponsor	
1				11111111	i I
			<u> </u>		'
Mailing Address	ı801 Warrenville⊦Rd, Şu	ite 800			
Walling / Garage					
	Lisle		L,	60532, -	
	CITY		STATE	ZIP CODE	
Relationship: Connecte	ed Organization Affiliated Committee	Joint Fundraising I	Representative	Leadership PAC Spon	sor
		_		_	
 Custodian of Records: Ide books and records. 	entify by name, address (phone number	optional) and position	n of the perso	on in possession of commit	tee
₋ Patric	cia Sņyder,				. 1
Tui Name	ı801 Warrenville Rd, Suit	te.800	<u> </u>		<u>. </u>
Mailing Address					
	ıLisle		<u> </u>	60532	
Title or Position	CITY		STATE	ZIP CODE	
_	OIII		SINIE	ZIF GODE	
Treasurer		Telephone numl	ber [630]		
8. Treasurer: List the name all any designated agent (e.g.,	nd address (phone number optional) of assistant treasurer).	the treasurer of the	committee; an	d the name and address o	f
Full Name Patric	cia Snyder				. 1
of freasurer	ı801 Warrenville Rd, Suit	e 800	. 1 . 1 . 1 . 1		.
Mailing Address		 			
	Lisle		114 1	60532 -	
Title on Decition	CITY	· · · · · · · · · · · · · · · · · · ·	STATE	ZIP CODE	
Title or Position	ı		1630	i 1810 14747	

CITY

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ZIP CODE

STATE

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Michele Klebuc-Simes

Full Name of Designated

Mailing Address

Agent

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