

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SSAB Americas PAC SSAB Enterprises LLC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		<input type="text" value="1799000"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1799000"/>	
(c) Total Receipts (from Line 19).....	<input type="text"/>	<input type="text"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text"/>	<input type="text"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="650000"/>	<input type="text" value="650000"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1149000"/>	<input type="text" value="1149000"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	

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 Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6 5 0 0 0 0	6 5 0 0 0 0
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6 5 0 0 0 0	6 5 0 0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6 5 0 0 0 0	6 5 0 0 0 0

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE		OF	
<input 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			

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)
SSAB Americas PAC SSAB Enterprises LLC

A. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		<input type="text"/>	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/>	

B. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		<input type="text"/>	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/>	

C. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		<input type="text"/>	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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)

PAGE OF

<input 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

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NAME OF COMMITTEE (In Full)

SSAB Americas PAC SSAB Enterprises LLC

Full Name (Last, First, Middle Initial)

A.

Viscloskey For Congress

Date of Disbursement

MM	DD	YYYY
02	25	2019

Mailing Address

Post Office Box 10003

City

Merrillville

State

IN

Zip Code

46411

Purpose of Disbursement

0	1	1
---	---	---

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Candidate Name

Viscloskey, Peter J.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: IN

District: 11

Full Name (Last, First, Middle Initial)

B.

Mike Bost For Congress Comm.

Date of Disbursement

MM	DD	YYYY
02	14	2019

Mailing Address

P.O. Box 1212

City

Murphysboro

State

IL

Zip Code

63966

Purpose of Disbursement

0	1	1
---	---	---

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Candidate Name

Michael J. Bost

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: IL

District: 12

Full Name (Last, First, Middle Initial)

C.

Byrne For Congress

Date of Disbursement

MM	DD	YYYY
02	14	2019

Mailing Address

P.O. Box 4273

City

Mobile

State

AL

Zip Code

36653

Purpose of Disbursement

0	1	1
---	---	---

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Candidate Name

Bradley R. Byrne

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: AL

District: 01

SUBTOTAL of Disbursements This Page (optional).....▶

6	5	0	0	0	0
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TOTAL This Period (last page this line number only).....▶

6	5	0	0	0	0
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AB Americas PAC
18 Enterprise LLC
10 Water Street
Bible, AL 33602

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Federal Election Commission
Reports Analysis Division
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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	4-19-19 DATE PREPARED

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