20-0-04-10-0M-00-2-47-0M

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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2019 APR 19 AM 9: 31

Office Use Only TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. SSAB Americas PAC SSAB Enterprises LLC 11 N. Water Street Suite 17,000 ADDRESS (number and street) Check if different than previously reported. (ACC) Mobile AL 33602 FEC IDENTIFICATION NUMBER ▼ CITY A STATE A ZIP CODE **AMENDED** 3. IS THIS NEW C 00513861 X REPORT OR (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Report (Non-Election Year Only) (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Electio Year Only) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jan 31 (YE) Jul 20 (M7) April 15 X Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report (TER) in the Election on State of Covering Period 0 1 0 2 1 3 3 2 0 1 1 0 through 0 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Terry Federko Type or Print Name of Treasurer i 2 Date Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office **FEC FORM 3X** Use Rev. 12/2004 Only

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

OF FEC Form 3X (Rev. 02/2003)	RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
SSAB Americas PAC SSAB Enterprises	LLC	
Report Covering the Period: From:	/ 0 1 / 2 0 1 9	o: 0 3 / 3 1 / 2 0 1 9
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
January 1, 2 0 1 9		1.7,9,9,0,0,0
(b) Cash on Hand at Beginning of Reporting Period	1,7,9,90,00	•
(c) Total Receipts (from Line 19)		
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		
7. Total Disbursements (from Line 31)	6,50000	6,5,00,00
B. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1, 4, 9, 0, 0, 0	0,0,0,0,0,0,0
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified as a multicand	lidate committee. (see FEC FORM 1M)	· · · · · · · · · · · · · · · · · · ·
Fo	or further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
· •	Toll Free 800-424-9530 Local 202-694-1100	

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WIND OF LA CON CONTANT

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name

FEC Form 3X (Rev. 06/2004)

SSAB Americas PAC SSAB Enterprises LLC

Report Covering the Period: From: 0	1 ' 0 1 ' 2 0 1 9 T	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
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		. [
(i) Itemized (use Schedule A)		n. n. ar. n. d. ar. n. n. ar. n.
(ii) Unitemized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶		
		Lux-y-v-v-v-v-v-v-v-v-v-v-v-v-v-v-v-v-v-v-
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)	Line market man	L. r. r. r. r. r. r. r. r.
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶		
12. Transfers From Affiliated/Other		
Party Committees		
13. All Loans Received	Language and the second	Lange and the second
•		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		[
(Carry Totals to Line 37, page 5)		P D MAY D D MAY D D MAY D
16. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees		
17. Other Federal Receipts		
(Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Fund	s	
(a) Non-Federal Account		
(from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
·		
	•	
40 Tabel Bassiska Andrill 12 144 12		
19. Total Receipts (add Lines 11(d)	[
12, 13, 14, 15, 16, 17, and 18(c))▶		
20 Total Cadaval Danairta		
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶		

FEC Form 3X (Rev. 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

II. Disbursements	COLUMN A	COLUMN B
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Year-to-Date
(i) Federal Share	, n , di) , n , d , di) , n , d , di) , n	a h en a a en a a a a
(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		
Federal Candidates/Committees and Other Political Committees	6,5,0,0,0	6,5,0,0,0,0
24. Independent Expenditures		
(use Schedule E)		
(2 U.S.C. §441a(d)) (use Schedule F)		
(use Schedule F)		
GC Lean Banaymenta Made		
26. Loan Repayments Made		
27 Loans Made		
27. Loans Made		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)	Linnan, and	
(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		
(i) I ederal 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
		المتلفظ المشارات والمسارات المسارا والمعتبار المسيد المسيد والمسارات المستدي
32. Total Federal Disbursements	•	
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	6,5,0,0,0,0	660_0_0_0
·		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) III. Net Contributions/Operating Ex-

penditures

(from Line 11(d), page 3)

(from Line 28(d)).....

(subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)
TEMIZED RECEIPTS	for each category of the	
	Detailed Summary Page	11a 11b 11c 12
	 	13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar	s may not be sold or used by any pand address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
SSAB Americas PAC SSAB Enterprises L	I C	·
/ COAD Americas i AC COAD Enterprises E	<u> </u>	
Full Name (Last, First, Middle Initial)	•	Date of Page:
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Date of Receipt
Mailing Address		Lyana / Laga / Lyana
City State	Zip Code	
		Amount of Each Receipt this Period
FEC ID number of contributing	* · · · · · · · · · · · · · · · · · · ·	
federal political committee.		
	Alan	
Name of Employer Occupa	ation	
Receipt For:	pate Year-to-Date ▼	-
Primary General Aggreg	Jaco Tourio Date V	•
Other (specify) ▼	# 40 # # 40 # 40 *	[] ·
Full Name (Last, First, Middle Initial)		
·	·	Date of Receipt
Mailing Address	•	Many / Laga / Lagarda
City State	Zip Code	⊣
Ony State	żih Onde	Amount of Eooh Possist this Davied
EEO ID involve of contribution		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
		has been dead and the second and the
Name of Employer Occupa	ation	
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	ate Year-to-Date ▼	
Primary General		1
Other (specify) ▼	<u> </u>	1
Full Name (Last, First, Middle Initial)		
. an Maine (Last, Filst, Middle Hillal)		Date of Receipt
Mailing Address		
City State	Zip Code	
	<u> </u>	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		
Name of Employer Occupa	ation	
		·
Receipt For: Aggree	gate Year-to-Date ▼	
Primary General	,	1
Other (specify) ▼	The season is a season of	
	// / / / / / / / / / / / / / / / / / /	
SUBTOTAL of Receipts This Page (optional)		
TOTAL TICLE OF STATE	· · · · · · · · · · · · · · · · · · ·	
TOTAL This Period (fast page this line number only)		· L

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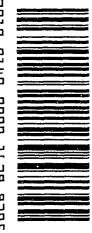
	•			•
	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b	
	y information copied from such Reports and S for commercial purposes, other than using the			
10.	NAME OF COMMITTEE (In Full)	name and address of any point	car committee to	solicit contributions from sacri confirmace.
$ \rangle$	SSAB Americas PAC SSAB Enterp	rises LLC	•	
<u>L</u>	Full Name (Last, First, Middle Initial)			,
Α.	Viscloskey For Congress			Date of Disbursement
	Mailing Address Post Office Box 10003			0 2 2 5 2 0 1 9
	City	State Zip Code		
	Merrillville Purpose of Disbursement	IN 46411		
			0 1 1	Amount of Each Disbursement this Period
	Candidate Name Viscloskey, Peter J.	·	Category/ Type	5, 0, 0, 0, 0
		ursement For:	Туре	<u></u>
	Senate	Primary General		
	State: IN District: 11	Other (specify) ▼		
_	Full Name (Last, First, Middle Initial)			
В.	Mike Bost For Congress Comm.			Date of Disbursement
	Mailing Address P.O. Box 1212			0 2 / 1 4 / 2 0 1 9
	City	State Zip Code		
	Murphysboro Purpose of Disbursement	IL 63966		•
			0 1 1	Amount of Each Disbursement this Period
	Candidate Name Michael J. Bost		Category/	1,0,0,0,0,0
		irsement For:	Туре	
	Senate	X Primary General	·	• •
	State: IL District: 12	Other (specify) ▼	•	. •
_	Full Name (Last, First, Middle Initial)			
C.				Date of Disbursement
	Mailing Address P.O. Box 4273			0_2 1_4 2_0_1_9
	City Mobile	State Zip Code		
	Purpose of Disbursement	AL 36653	-	
			0 1 1	Amount of Each Disbursement this Period
	Candidate Name	· .	Category/	5 0 0 0 0 0
	Bradley R. Byrne Office Sought: X House Disb	ursement For:	Туре	5,,0,0,0,0,0
	Senate	X Primary General		
	State: AL District: 01	Other (specify) ▼	اِ ا	
			•	1

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

TOTAL This Period (last page this line number only).....

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DATE PREPARED

(3/2015)