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FEC FORM 3X

Only

FEGAND26

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2019 FEB -1 AM 11: 13

Rev. 12/2004

Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. IS, S, A, B, ¡A,m¡e;r;i;c;a;s; <u>P, A,C; ¡S, S,A, B, ¡E, n;t;e;r;p;r;i;s;e</u>;s; _LW₁ a_tt₁e₁r₁ Stirle eiti ADDRESS (number and street) Check if different X than previously ·Mobile 3,3,6,0,2 reported. (ACC) CITY A STATE A ZIP CODE 2. FEC IDENTIFICATION NUMBER Y 3. IS THIS NFW **AMENDED** C 0 0 5 1 3 8 6 1 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-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 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 (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of 0 46 2 0 5. Covering Period through 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 Terry Federko 50 31 2019 Signature of Treasurer Date 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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name	
SSAB Americas PAC SSAB Enterprises L	LC

Report Covering the Period:

From:

4 ′ º01′

2018 * - '

т...

*0 *6 / *3 *0 / *2 *0 *1 *8

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Janu	Hand 2 0 1 8		1 2 3 4 0 0 0
(b) Cash on Beginning	Hand at of Reporting Period	111,840000	
(c) Total Rec	eipts (from Line 19)		1, 0,0 0,0 0
6(c) for C	add Lines 6(b) and olumn A and Lines 6(c) for Column B)	1, 1, 8, 4, 0, 0, 0	1,3,3,4,0,0,0
7. Total Disburse	ments (from Line 31)	3,00000	4,5 0 0 0 0
8. Cash on Hand Reporting Peri (subtract Line		8,8,4,0,0,0	8,84.0.00
the Committee	ligations Owed TO (Itemize all on and/or Schedule D)		
	ligations Owed BY e (Itemize all on and/or Schedule D)		

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SSAB Americas PAC SSAB Enterprises LLC

Report Covering the Period: From: 0 4 0 1 2 0 1 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:		·
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)		
(ii) Unitemized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶		
(b) Political Party Committees		Market State of the second
(c) Other Political Committees		
(such as PACs)		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶		
2. Transfers From Affiliated/Other		
Party Committees		
3. All Loans Received		· · · · · · · · · · · · · · · · · · ·
1. Loan Repayments Received		
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)		.
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees		1,0,0,0,0
7. Other Federal Receipts		
(Dividends, Interest, etc.)		
3. Transfers from Non-Federal and Levin Funds	Mary Complete of Land Complete of Complete	L
(a) Non-Federal Account		
(from Schedule H3)		
•		
(b) Levin Funds (from Schedule H5)		
•		
(c) Total Transfers (add 18(a) and 18(b))		
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶		1 0 0 0
· , · · · · · · · · · · · · · · · · · ·	Land Market	1,0,0,0.0
0. Total Federal Receipts		processor accepts as a comment of the comment of th
(subtract Line 18(c) from Line 19)▶		4 0 0 0
, , , , , , , , , , , , , , , , , , , ,	[1,0,0,0,0,0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:	- Total Tills Feriod	Calendal Teal-to-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(i) rederal Strate		
(ii) Non-Federal Share		8 d (3) B d (3) 0 0 0 0
(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	<u> </u>	4,5,0,0,0
24. Independent Expenditures		
(use Schedule E)25. Coordinated Party Expenditures		Line nanana and
(2 U.S.C. §441a(d))		
(use Schedule F)		
26. Loan Repayments Made		
·		
27. Loans Made	Language management	Language of the second
(a) Individuals/Persons Other		
Than Political Committees	Langer and a second	Lasin range and a
(b) Political Party Committees	[[
(c) Other Political Committees		
(such as PACs)		
(d) Total Contribution Refunds		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
(add Lines zo(a), (b), and (c))		
29. Other Disbursements		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(2	2011	
(a) Allocated Federal Election Activity	5))	•
(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))	II :	
31. Total Disbursements (add Lines 21(c), 22		
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	3,0,0,0,0,0	4, 5, 0, 0, 0, 0
	[Landy Care a Sylve a Care and	
32. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		f
from Line 31)	3,0,0,0,0	4,50000
·		[

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans)	Mark of Control of Advantage (Francisco
(from Line 11(d), page 3)		Ď.
34. Total Contribution Refunds	beta te Delinera de la	
(from Line 28(d))	Lange of the second	
35. Net Contributions (other than loans)		
(subtract Line 34 from Line 33)	hine and an an and an an and an an and an and an an an	The street of the second control of the seco
36. Total Federal Operating Expenditures		
(add Line 21(a)(i) and Line 21(b))▶	The second secon	the state of the s
37. Offsets to Operating Expenditures		
(from Line 15, page 3)	The house of the second	(manufilia o Bornadge in Manor Broadge in Providence Anno Africa (Providence in Providence in Provid
38. Net Operating Expenditures		
(subtract Line 37 from Line 36)	Land of the state	Light with the start of the start and the start of the st

SCHEDULE A (FEC FORM 3X)	1	Lise separate schedulo(s)	FOR LINE NUMBER: PAGE OF
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
Any information conied from such Beneda and Ch	utomosto ===		13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the	name and a	ddress of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	- -		
SSAB Americas PAC SSAB Enterpr	rises LLC		
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address	-	_	MOM / TOUD / TYPE
City State Zip Code		Amount of Each Possint this Period	
FEC ID number of contributing		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Amount of Each Receipt this Period
federal political committee.		· :	
Name of Employer	Occupation	<u> </u>	
Receipt For:		Year-to-Date ▼	7
Primary General Other (specify)		چىندىيىت ئىسىن شەرەر ئىي سىن ئىلىدىس. د	
	L.,	<u> </u>	
Full Name (Last, First, Middle Initial) B.			Date of Receipt
Mailing Address			Mamily Lordi , Langerge Al
City State Zip Code		Annual Care Barrier Care Care Care Care Care Care Care Ca	
FEC ID number of contributing	him in		Amount of Each Receipt this Period
federal political committee.	C	of and a control of the family	. A592-AAAAAAAA
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	_
Primary General			Ţ
Other (specify) ▼			
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MVM / DLD / Y.Y.Y.Y
City	State	Zip Code	
550 10			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		etheral call and call	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	-
Primary General		Teal-to-bate ▼	a
Other (specify) ▼	lington Bur	5 - 5 - 3 - 9 - 1 - 1 - 20 - Earl	
SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page this line number of			
TOTAL THIS FEHOU (last page this line number of	лиу)	·······	by the second was the second course of the second s

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE OF
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Staten			
NAME OF COMMITTEE (In Full)			
SSAB Americas PAC SSAB Enterprise	es LLC		
Full Name (Last, First, Middle Initial)			
1.			Date of Disbursement
Mailing Address			M = M = / (D = D) / (Y = Y) Y = Y)
City	State Zip Code		
Purpose of Disbursement			
Candidate Name Category/			Amount of Each Disbursement this Period
Office Sought: House Disburser	nent For:	Туре	The first of the second of the second of
Senate Senate	Primary General		
President	Other (specify) ▼		
State: District:			
3.			Date of Disbursement
	ongress C	omm.	0 6 2 2 2 0 1 8
Mailing Address POBox1212			0.00 2 2 2 0 1 0
	State Zip Code		
Murphysboro Purpose of Disbursement	IL 63966		
	:	0_1_1	Amount of Each Disbursement this Period
Candidate Name Michael J Bost		Category/ Type	1,000000
	ment For:	1,700	
Senate	Primary General		
State: President State: District: 1 2	Other (specify) ▼	i	
Full Name (Last, First, Middle Initial)	- , , , 		
C. Byrne For Cong	ress Inc.	Ì	Date of Disbursement
Mailing Address			06222018
PO Box 4273	7:- 0:-1		
Mobile	State	3	·
Purpose of Disbursement			
Candidate Name	_ 7 .	0 1 1	Amount of Each Disbursement this Period
Bradley R Byrne		Category/ Type	2,000,00
Office Sought: Youse Disburse	ment For: Primary X General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)			3 0 0 0 0
		<u> </u>	, .3,00.0.0.0
TOTAL This Period (last page this line number only)		3,00000

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DEBORAH CHACONA, AST. STAF DIR

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