

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

AMERICAN INSTITUTE OF STEEL CONSTRUCTION PAC

ADDRESS (number and street) ONE EAST WACKER DRIVE, STE. 700

Check if different than previously reported. (ACC)

CHICAGO IL 60601

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00542308

3. IS THIS REPORT NEW (N) OR AMENDED (A) X

Table with 4 columns: (a) Quarterly Reports, (b) Monthly Report Due On, (c) 12-Day PRE-Election Report for the, (d) 30-Day POST-Election Report for the. Includes dates like April 15, July 15, etc.

5. Covering Period 10 01 2014 through 11 24 2014

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 ROGER E FERCH

Signature of Treasurer [Handwritten Signature]

Date 02 25 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 10 columns, first column labeled 'Office Use Only'.

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2 of 6

Write or Type Committee Name

**AMERICAN INSTITUTE OF STEEL CONSTRUCTION PAC**

Report Covering the Period: From: **10 01 2014** To: **11 24 2014**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2014</b>		<b>10,500.00</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>10,500.00</b>	
(c) Total Receipts (from Line 19).....	<b>0.00</b>	<b>10,500.00</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>10,500.00</b>	<b>10,500.00</b>
7. Total Disbursements (from Line 31).....	<b>1,000.00</b>	<b>1,000.00</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>9,500.00</b>	<b>9,500.00</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0.00</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0.00</b>	

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

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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 .....	0.00	0.00
(ii) Non-Federal Share .....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	1,000.00	1,000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	0.00	0.00
26. Loan Repayments Made .....	0.00	0.00
27. Loans Made .....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1,000.00	1,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	1,000.00	1,000.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

11000 1410 0011 10011

**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 <u>6</u> OF <u>6</u>
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a
	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c
	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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)  
**American Institute of Steel Construction PAC**

A. <b>Portman for Senate Committee</b>		Date of Disbursement
Mailing Address <b>P.O. Box 39</b>		<b>11 24 2014</b>
City	State	Zip Code
<b>Terrace Park</b>	<b>OH</b>	<b>45174</b>
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
<b>Rob Portman</b>		
Office Sought:	Disbursement For:	Category/ Type
House <input checked="" type="checkbox"/> Senate President	Primary <input checked="" type="checkbox"/> General Other (specify)	
State: <b>OH</b>	District:	

B.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	Category/ Type
House Senate President	Primary General Other (specify)	
State:	District:	

C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	Category/ Type
House Senate President	Primary General Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	▶
TOTAL This Period (last page this line number only).....	▶

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LAURENCEY VIRGILI

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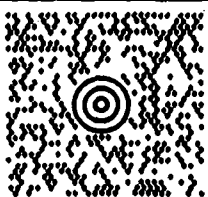
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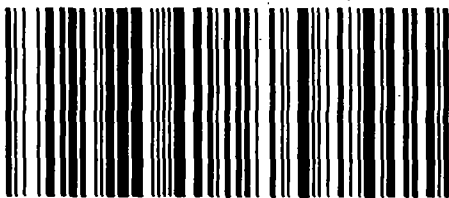
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*JB*  
 PREPARER

*7/26/2015*  
 DATE PREPARED

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