FEO MAIL

## TMS INTERNATIONAL CORPORATION PAC

2016 JUN 24 A. . .

June 22, 2016

Via Federal Express

Federal Election Commission 999 E Street, N.W. Washington, DC 20463

Re:

TMS International Corporation PAC

Dear Sir or Madam:

Enclosed herewith is FEC Form-1 (Statement of Organization) for immediate filing with your office. Kindly acknowledge our timely filing of the enclosed by date-stamping the copy provided and returning it to us in the self-addressed, postage paid envelope, also provided.

If you have any questions regarding the above, do not hesitate to contact me.

Sincerely,

James Leonard

Director, Public Relations

Encs.

cc:

L. Johnson

J. Fingeret

## 2016 · 06 · 24 · 08 · 00078806

FEC FORM 1

## STATEMENT OF ORGANIZATION



2016 JUN 24 AM 10: 54

NAME OF     COMMITTEE (in full)	(Check if name is changed)	e Example: If typing, type over the lines.	12FE4M5	1				
(iv i2)	is snanges,	over the image.						
TMS INTERNATIONAL	CORPORATION	PAC						
ADDRESS (number and street) 12 MONONGAHELA AVENUE								
(Check if address is changed)								
	GLASSPORT: I		PA 1 5045 STATE ▲	ZIP CODE ▲				
COMMITTEE'S E-MAIL ADDRES	ss							
(Check if address is changed)	PAC@TMSINTE	RNATIONAL.COM	<u> </u>	1 1 1 1 1				
	Optional Second E-Ma	nil Address	1 1 1 1 1 1 1 1 1	1111				
	<u>-</u>							
COMMITTEE'S WEB PAGE ADD	DRESS (URL)							
(Check if address is changed)			1 1 1 1 1 1 1					
		<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	1 ( 1 1 1 1				
2. DATE								
3. FEC IDENTIFICATION NUMBER ▶ C 00470062								
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)								
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.								
Type or Print Name of Treasurer  KIRK D. PETERS, ASSISTANT TREASURER								
1/1/14								
Signature of Treasurer	110101		Date 06 22	2016				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.								
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion FEL	C FORM 1 vised 06/2012)				

	FEC Fo	orm 1 (Revised 02/2009)	Page 2					
		COMMITTEE						
Cai	ndidate	e Committee:						
(a)		This committee is a principal campaign committee. (Complete the candidate information below	ow.)					
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	ne of didate		<u> </u>					
	didate y Affiliati	on Office Sought: House Senate President	State					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	Secretary D. Control					
	ne of didate							
Par	ty Con	nmittee:						
(d)		This committee is a (National, State or subordinate) cornmittee of the	(Democratic, Republican, etc.) Party.					
Pol	itical A	Action Committee (PAC):						
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected organization is a					
		Corporation Corporation w/o Capital Stock	Labor Organization					
		Membership Organization Trade Association	Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.						
(f)	0	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lobbyist/Registrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joir	nt Fund	draising Representative:						
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds fo committees/organizations, at least one of which is an authorized committee of a federal candida						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds fo committees/organizations, none of which is an authorized committee of a federal candidate.	r two or more political					
	Com	nmittees Participating in Joint Fundraiser						
	1.	FEC ID number						
	2.	FEC ID number						
	3.	FEC ID number						
	4.							

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Write or Type Committee	Name				
6. Name of Any Connec	cted Organization, Affiliated Co	mmittee, Joint Fu	ndraising Repres	sentative, or Leaders	ship PAC Sponsor
					1
		1	<u> </u>		
Mailing Address					
	<u> </u>				
	C	ITY		STATE	ZIP CODE
Relationship: Con	nnected Organization Affiliated	Committee D	oint Fundraising R	epresentative DLe	adership PAC Sponsor
<ol> <li>Custodian of Records books and records.</li> </ol>	s: Identify by name, address (pho	one number optio	onal) and position	of the person in po	ssession of committee
Full Name	<u>j                                      </u>	<u>i I I I I I</u>	1 1 1 1	1 1 1 1 1 1	11111
Mailing Address	1	1 1 1 1 1 1	1111	<u> </u>	<u> </u>
		! ! ! ! 1 1	1111		1 1 1 1 1 1
		1	1 1 1		<u> </u>
Title or Position	C	ITY	· S	TATE	ZIP CODE
11111			Telephone number	er	1   -
	me and address (phone number (e.g., assistant treasurer).	optional) of the t	reasurer of the c	ommittee; and the na	ame and address of
Full Name of Treasurer	<u> </u>	. ** 		<u> </u>	 
Mailing Address	1 1 1 1 1 1 1	1 1 1 1 1	1111:	11111	1 1 1 1 1 1
	<u> </u>	11111	<u> </u>	1 1 1 1 1	1 1 1 1 1 1 1 1
	CI	ITY	ı ı ı	TATE	ZIP CODE
Title or Position	<u> </u>	1	Telephone numbe	er	

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

Full Name of

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GLASSPORT, PA 15045 UNITED STATES US

TO FEDERAL ELECTION COMMISSION

999 E STREET, N.W.

4427/3886/22046

MASHINGTON DC 20463

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Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
PREPARER (3/2015)	6/24/16 DATE PREPARED