

**FEC FORM 3X**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

12 FE4M5

**CENTURY ALUMINUM COMPANY PAC**

ADDRESS (number and street)

1627 STATE HIGHWAY 3543

Check if different than previously reported. (ACC)

HAWESVILLE

KY

42348

2. **FEC IDENTIFICATION NUMBER ▼**

**CITY ▲**

**STATE ▲**

**ZIP CODE ▲**

C C0055532

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

4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day **PRE-Election** Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day **POST-Election** Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. **Covering Period**

[MM][DD] / [MM][DD] / [YYYY] 01 / 01 / 2015 through [MM][DD] / [MM][DD] / [YYYY] 03 / 31 / 2015

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 Mr. Jesse Gary

Signature of Treasurer

Mr. Jesse Gary

[Electronically Filed]

Date

[MM][DD] / [MM][DD] / [YYYY] 12 / 23 / 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.

Office Use Only										
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**CENTURY ALUMINUM COMPANY PAC**

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="2015"/>	<input type="text" value="6400.00"/>	<input type="text" value="6400.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6400.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="9435.00"/>	<input type="text" value="9435.00"/>
(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" value="15835.00"/>	<input type="text" value="15835.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1070.00"/>	<input type="text" value="1070.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14765.00"/>	<input type="text" value="14765.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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 Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**CENTURY ALUMINUM COMPANY PAC**

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

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).....	50.00	50.00
(ii) Unitemized .....	520.00	520.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	570.00	570.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	570.00	570.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	6465.00	6465.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	2400.00	2400.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	9435.00	9435.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9435.00	9435.00

**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:		
(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.....	2600.00	2600.00
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 .....	100.00	100.00
(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)).....	100.00	100.00
29. Other Disbursements .....	-1630.00	-1630.00
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)) ..	1070.00	1070.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1070.00	1070.00

**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) (from Line 11(d), page 3) .....	570.00	570.00
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	470.00	470.00
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).....	6465.00	6465.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-6465.00	-6465.00

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

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

FOR LINE NUMBER: PAGE 6 OF 12  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**CENTURY ALUMINUM COMPANY PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Century Aluminum Company**

Mailing Address One South Wacker Drive  
Suite 1000

City Chicago State IL Zip Code 60606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6515.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2015

**Transaction ID : SA11AI.4592**

Amount of Each Receipt this Period  
50.00

Receipt from connected organization to correct an incorrect depsiit into connected org. account.

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	50.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4592

Alfred Breaux intended to make an individual contribution to the PAC on 1/27/15, in the amount of \$50. However, Mr. Breaux check was inadvertently deposited into the connected organizations bank account. The transaction recorded in this report is the receipt from the connected organization to correct this mistake.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 8 OF 12  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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
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NAME OF COMMITTEE (In Full)  
**CENTURY ALUMINUM COMPANY PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Century Aluminum Company**

Mailing Address One South Wacker Drive  
Suite 1000

City Chicago State IL Zip Code 60606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6465.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2015

**Transaction ID : SA15.4588**

Amount of Each Receipt this Period  
6465.00

Per FEC analyst, reimbursement for solicitation expense. FEC AO 2003-39

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6465.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6465.00



: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: SA15

Transaction ID : SA15.4588

This transaction is reimbursement from the connected organization to the PAC for the charitable contribution matches, for the following; 12/31/14 Am. Cancer Society \$50, Autism Res. Inst \$50 - Autism Speaks \$50 - Boy Scout Troop 3030 \$20, Cliff Hagan Boys and Girls Club, \$100, Epiworth Methodist Church \$75, First Assembly of God \$50, First Presp. Church of Eville \$100, H-son Gen. Bapt. Church \$100, Home of the Innocents \$50, Macculate Conception Church \$1000, Mary Carrico Catholic School \$100, Monroe Central Sliders \$50, New Hope Animal Rescue \$50, Newburgh Un. Methodist Church \$300, Oboro Hum. Society \$100, Perry Co. Animal Shelter \$50, Potter Children's Home \$250, Potter's House \$50, Puzzle Pieces Inc. \$100, Riley's Childrens Foundtation \$50, Saint Bon. Parrish \$50, Salv. Army of H-son \$20, Sebree First Christian Church \$50, Shelter for Women and Children \$250, Special Olympics of KY \$50, Saint Anthony's Hospiece \$50, Saint Columba Catholic Church \$100, St. Jude's Children Research Hospital \$1480, St. William Catholic Church \$500, Daniel Pitino Shelter \$50, Masters Hand \$50, Toys for Tots \$150, United Way of Ohio Valley \$450, Webster County Food Bank \$50, Wounded Warriors \$50, 01/07/15 - St. Anthony's Hospice \$150, St. Jude Child's Hosp. \$20, Harbor House \$100 1/28/15 - Un. Way. Oh Valley \$50, Beach Gr. FD \$50

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 10 OF 12  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**CENTURY ALUMINUM COMPANY PAC**

**A. MCCONNELL SENATE COMMITTEE '14**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1496

City LOUISVILLE	State KY	Zip Code 40201
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00193342

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2015  
**Transaction ID : SA16.4595**

Amount of Each Receipt this Period  
2400.00

Refund of portion of campaign contribution, original check # 1002, 3/26/14/, \$5000

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2400.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**CENTURY ALUMINUM COMPANY PAC**

Full Name (Last, First, Middle Initial)

**A. RAND PAUL VICTORY COMMITTEE**

Mailing Address PO BOX 72190

City NEWPORT State KY Zip Code 41072

Purpose of Disbursement  
Contribution to Joint Fundraising Committee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2015

**Transaction ID : SB23.4596**

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2600.00

2600.00

**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)

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CENTURY ALUMINUM COMPANY PAC**

Full Name (Last, First, Middle Initial)

**A. Conway for Governor**

Mailing Address PO Box 7803

City Louisville State KY Zip Code 40257

Purpose of Disbursement  
Original campaign contribution, check #001066, 12/16/14, \$1000 was  
returned by bank  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 08 / 2015

**Transaction ID : SB29.4594**

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

**B. Conway for Governor**

Mailing Address PO Box 7803

City Louisville State KY Zip Code 40257

Purpose of Disbursement  
Transaction voided. Original contribution, check #1111, on 2/12/15 was  
returned by candidate  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2015

**Transaction ID : SB29.4642**

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

**C. Edelen for Auditor**

Mailing Address PO Box 4679

City Frankfort State KY Zip Code 40604

Purpose of Disbursement  
Original campaign contribution, check #1065, on 12/16/14; returned by  
bank  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 02 / 2015

**Transaction ID : SB29.4614**

Amount of Each Disbursement this Period

-1000.00

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

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

-3000.00

-3000.00