Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 8100	0206				port ed B		CANDI	DATE		СОМ	ITTEE	✓	LOBB	YIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		Con	nstru	ctors	Assn PA	C (CAP	AC)						
Street Address:	Street Address: 1201 Banksville Road															
City:	Pittsburgh _							State:	PA Zip Code: 15216							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	\
report type)	ANNUAL REPORT	7.	Year 2013				FILING METHOD () CHECK ONE				PAPER	PAPER DISKETTE				
Name of Office S	Sought by Candida	nte:	•					DATE 0	F ELE	СТІО	N	District Number	Office Code	Part	y Code	County Code
								МО	DAY	YE	AR	Number	code			Code
				11 5 2013					2013		(SEE IN	ISTRUCTIO	NS FOR C	ODES)		
Summary of Expenditures	Receipts and	МО	DAY	YEAR	l			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures			4 2	2	013	3 T	0	5		6	2013					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			204,2	216.47					
B. Total Monet	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$			1	168.58					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			204,3	885.05					
D. Total Expend	ditures (From Sch	edule II	I)				\$				0.00					
E. Ending Cash	Balance (Subtra	t Line D	From Line C))			\$		7	204,3	85.05					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedu	le II	Ί)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			1		
				AFF	ΊD	AVI	T SE	CTION								
	s a Committee rep	•	_													
I swear (or affirm) correct and complete) that this report, inc ete.	luding the	e attached sche	edules	file	ed on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	ınd belie	f , true
Sworn to and subs	cribed before me the	s	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signate	ire					- -					Prin	ted Nam	e		
My Commission Ex	_											Emai	il			—
	мо	D	AY	YR			_		Are	ea Cod	le	Daytim	e Telep	hone Nur	nber	
Part II- If this is	a report of a can	didate's	authorized C	Comn	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of	my knowl	edge and belief	f this	poli	itical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of I	lune 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candid	late		
	day of 		_ 20				_					Dular-	d Nama			
	Signature						-					Printe	d Name			
My Commission Exp	-											Ema	il			
	МО	D	AY	YR	,		-		Area	Code		Da	ytime 1	Telephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period								
Constructors Assn PAC (CAPAC)	structors Assn PAC (CAPAC) From: 4/2/								
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor									
TOTAL for the Reporting) Period	(1)	\$	0.00					
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)									
Contributions Received From Political Committees (Part A)			\$	0.00					
All Other Contributions (Part B)			\$	165.00					
TOTAL for the Reporting	Period	(2)	\$	165.00					
3. Contributions Received Over \$250.00 (From Part C and Part D)									
Contributions Received From Political Committees (Part C)			\$	0.00					
All Other Contributions (Part D)			\$	0.00					
TOTAL for the Reporting) Period	(3)	\$	0.00					
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)									
TOTAL for the Reporting) Period	(4)	\$	3.58					
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	168.58					

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Committee or Candidate			Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contributin	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	•	•			•		

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL\$ 0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candida	Reporting P	porting Period							
Constructors Assn PAC (CAPAC)	From:	4/2/	o:	5/6/2013					
		'		DATE		1	AMOUNT		
Full Name of Contributor Carol H. Brady			МО	DAY	YEAR				
Mailing Address 252 Seanor Churc	h Road			1.5	2012	\$	45.00		
City New Stanton	State PA	Zip Code (Plus 4) 15672	4	15	2013				
Full Name of Contributor Nicole Kurpiel			МО	DAY	YEAR				
Mailing Address 630 Edwards Lane						\$	120.00		
City Ligonier	State PA	Zip Code (Plus 4) 15658	4	15	2013				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$ 165.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate Rep			Reporting Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00	

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate				Reporting Period					
			From:				То:		
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	, Secti	on 3.			P \$	PAGE TOTAL 0.00	

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	porting Perio	rting Period						
Constructors Assn PAC (CAPAC)		Fro	From: 4/2/2013 To:			<u>5/6/2013</u>		
			D	ATE		AMOUNT		
Full Name PNC Bank			МО	DAY	YEAR			
Mailing Address PO Box 609						\$	3.58	
City Pittsburgh	State PA	Zip Code (Plus 4	4	30	2013			

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

Interest Payment

Receipt Description

PAGE TOTAL \$ 3.58

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
Constructors Assn PAC (CAPAC)	From:	<u>4/2/2013</u> To:	<u>5/6/2013</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate				Reporting Period					
	From:			То:					
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:									
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL		
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL		
						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting Period					
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Reporting Period						
			From			То:	
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)) Description of Expenditure				
							PAGE TOTAL
Enter Grand Total of Expe	naitures on Page 1, Re	port Cover Page, Item L).			\$	0.00