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 81	.00206				Rep File	oort		CANDI	ANDIDATE COMMITTEE LOBBYIST								
Name of Filing C	Committee, Can	didate or	Lobb	yist:		CON	ISTF	RUCTO	DRS ASSI	N PAC	(CAP	AC)	<u>_</u>	•				
Street Address:	1201 BANk	(SVILLE F	RD															
City:	PITTSBURG	SH							State:	PA			Zip Cod	ie: 15	5216-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ID FRIDAY	/ PRE	- :	2. X	30 DA PRIMA		POST- 3.		AMENDMENT REPORT?		Yes	No	•	/	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ID FRIDAY ECTION	/ PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPO	RT 7.	Ye	ear 2015					NG METHO				PAPER / DIS			DISKE	TTE	
Name of Office S	- Sought by Candi	date:							DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	ty
									МО	DAY	ΥI	AR		10000	<u> </u>			
									11		3	2015		(SEE IN	ISTRUCTI	ONS FOR	CODES)	
Summary of Expenditures		МО		DAY	YEAR			_	МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures			3	31	2	015	Т	0	5		4	2015						
A. Amount Bro	ught Forward F	rom Last	Repo	ort				\$			114,9	902.98						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 791.48																		
C. Total Funds Available (Sum Of Lines A and B)						\$			115,6	594.46								
D. Total Expenditures (From Schedule III)						\$				0.00								
E. Ending Cash Balance (Subtract Line D From Line C)						\$			115,6	94.46								
F. Value Of In-	Kind Contributi	ons Recei	ved ((From Sc	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From	Sche	edule IV)			\$				0.00			•			
					AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is	s a Committee r	eport, tre	easur	rer sign h	ere. I	[f th	is is	a Can	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple		including t	he att	tached sch	edules	filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	ie,
Sworn to and subs	cribed before me day of	this	20)							5	Signature	of Perso	n Submit	ting Re	oort		_
	- Eign	ature	_					- -					Prin	ted Name	e			_
My Commission Ex	_	ature											Ema	il				-
	мо	ı	DAY		YR			-		Arc	ea Cod	le	Daytim	e Telepi	none Nu	mber		_
Part II- If this is	a report of a c	andidate'	s aut	thorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		of my know	/ledge	e and belie	ef this	polit	ical	commi	ittee has n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	,
Sworn to and subso	ribed before me t	his										s	ignature o	of Candid	ate			- [
	day of		20	o				_										_
	Signatu	re						-					Frinte	d Name				
My Commission Exp	_												Ema	il				-
	мо		DAY		YR			•		Area	Code		Da	aytime T	elephor	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CONSTRUCTORS ASSN PAC (CAPAC)	From:	3/31/201	<u>.5</u> To :	<u>5/4/2015</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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)	\$	0.00		
TOTAL for the Reporting	\$	0.00		
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)			\$	785.00
TOTAL for the Reporting	g Period	(3)	\$	785.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	y Period	(4)	\$	6.48
				_
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			\$	791.48

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	Use this Part to itemize only contributions reconstructions with an aggregate value from \$50.01 to Name of Filing Committee or Candidate										
Name of Filling Committee of Candidate			From:			То	:				
					DATE			AMOUNT			
Full Name of Contribut	ing Committee			МО	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus 4))								
	!	I			<u> </u>			DAGE TOTAL			

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 Fining Committee of Candidate			Reporting Period From: To:					
					DATE			AMOUNT
Full Name of Contributor				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

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 Candi	ame of Filing Committee or Candidate Repo		Reporting	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

PART D 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	nme of Filing Committee or Candidate				porting Period					
CONSTRUCTORS ASSN PAC (CAPAC)			Fron	om: <u>3/31/2015</u>			To: <u>5/4/2015</u>			
				D/	ATE		АМО	UNT		
Full Name of Contributor Peter J. Caruso IV				МО	DAY	YEAR				
iling 107 Gardenia Drive dress					_	2045	\$	785.00		
City Bethel Park	State	Zip Code (Plus	5 4)	4	6	2015	·			
	PA	15102								
Employer Name Peter J. Caruso & Son	s, Inc.			Occupation Contractor						
Employer Mailing Address/Principal Place Business	e of	City			State		Zip Code (Plus 4)		
352 Baldwin Road		Pittsburg	h		PA		15207			
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	785.00		

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	Reporting Period						
CONSTRUCTORS ASSN PAC (CAPAC)	From:	From: <u>3/31/2015</u> To:		<u>5/4/2015</u>			
	DATE			AMOUNT			
Full Name							
PNC Bank	МО	DAY	YEAR				

Full Name PNC Bank			МО	DAY	YEAR	
Mailing Address PO Box 609)					\$ 6.48
City Pittsburgh	State PA	Zip Code (Plus 4) 15230	4	30	2015	
Receipt Description Intere	st Paymen	·				

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

PAGE TOTAL
\$ 6.48

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 Perio	od						
CONSTRUCTORS ASSN PAC (CAPAC)	From:	3/31/2015 To :	<u>5/4/2015</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,		\$	0.00					

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	lame 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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period							
					Fro	om:		To:			
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor Occupation											
Employer Mailing Address/Principal Place of Business		City		State		Zip Code(Plus 4)		Descri	Description of Contribution		
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			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 Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00		