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 :			Repo Filed	-		CANDI	DATE		СОМ	1ITTEE	✓	LOBI	BYIST				
Name of Filing C	Committee, Candid	ate or Lo	obbyist:	ı	Constr	ucto	rs A	ssn PAC	C (CAP	AC)						-	
Street Address:	1201 BANKSV	/ILLE RD)														
City:	PITTSBURGH						9	State:	PA			Zip Co	de: 15	216			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY		DAY [MAI		POST- 3. X			AMENDM REPORT	Yes	Ν	0	\checkmark			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION						POST- 6.			TERMIN/ REPORT	Yes	N	0	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2003					G METHO HECK OI				PAPER		\checkmark	DISK	ETTE	
Name of Office S	L Sought by Candida	te:					ľ	DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Cod	e Cou Cod	
							I	ю	DAY	Y	EAR		10000			100-	
										4	2003	·	(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR	1		-	мо	DAY	Y	EAR	FC	R OFFIC	E USE	ONLY	,	
Expenditures	s from:		1 1	-	1	то		6		9	2003						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			70,	483.23						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$				26.06						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			70,	509.29						
D. Total Expen	ditures (From Sch	edule II	I)				\$				0.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			70,5	509.29						
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$				0.00	-					
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)			\$				0.00						
				AFF	IDAV	IT S	SEC	TION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. I	If this i	is a C	Cano	lidate re	eport, o	andi	date sig	gn here.					
I swear (or affirm correct and comple) that this report, incl ete.	uding the	e attached sc	hedules	s filed o	n pape	er o	r by electi	ronic m	edium	, are to i	the best o	f my know	vledge	and be	lief , tı	rue
Sworn to and subs	cribed before me this day of	5	20							9	Signature	e of Perso	n Submitt	ing Rep	oort		-
	Signatu	re				_						Prin	ted Name				-
My Commission Ex	-											Ema	il				-
	мо	D	AY	YR					Are	ea Coo	le	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	didate's	authorized	l Comm	nittee,	Cand	lida	te shall :	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n ed.	ny knowle	edge and bel	ief this	politica	l com	nmit	tee has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P	L. 133	з,
Sworn to and subso	ribed before me this day of		20								s	ignature o	of Candida	ite			-
Printed Name								-									
My Commission Exp	Signature					_						Ema	il				_
	мо	D	AY	YR		_			Area	Code		D	aytime Te	elephon	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Constructors Assn PAC (CAPAC) From: To: 6/9/2003 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 26.06 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 26.06 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Re	porting	Period			
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							ſ	PAGE TOTAL

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

\$

0.00

Use this Part to ite	mize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an 1g per	aggreg iod.			°om
Name of Filing Committee or Candidat	e		Rep Fror	orting P	eriod	Τα):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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 Can	didate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	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	Reporting I	Period	
	From:		То:
		DATE	AMOUNT

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

PART E **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 Ca	Indidate		Report	ing Perio	d			
Constructors Assn PAC (CAPAC	2)		From:			То:		<u>6/9/2003</u>
				D	ATE			AMOUNT
Full Name PNC Bank				мо	DAY	YEAR		
Mailing Address PO Box 609)						\$	26.06
City Pittsburgh	State PA	Zip Code (1523097	-	5	30	2003	3	
Receipt Description Intere	st Payment							
Enter Grand Total of Part E on	Schodulo I. Dotailod	Summary Page	Section	л				PAGE TOTAL
	Schedule I, Detalled	Summaly Paye,	Section	7.			\$	26.06

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:	То:	<u>6/9/2003</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate Re						
	From:						
				DATE		АМО	UNT
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 Schedule II, In-Kind Contributions Detaile Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Rep	oorting P	eriod			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption o	f Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
	From						
				DATE			AMOUNT
To Whom Paid	To Whom Paid				YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrij	otion of Ex	penditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
	Ji Page 1, Report C	over Page, Item I				\$	0.00