

Campaign Finance Report

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

Filer Identification Number :		20150033		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Build PA PAC												
Street Address:												
City: Coraopolis						State: PA		Zip Code: 15108				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2016	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	02			
						11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	29	2016		12	31	2016				
A. Amount Brought Forward From Last Report						\$ 204,746.67						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 13,037.02						
C. Total Funds Available (Sum Of Lines A and B)						\$ 217,783.69						
D. Total Expenditures (From Schedule III)						\$ 9,198.09						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 208,585.60						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Build PA PAC	From: <u>11/29/2016</u> To: <u>12/31/2016</u>

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)	\$ 0.00
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
All Other Contributions (Part D)	\$ 13,000.00
TOTAL for the Reporting Period (3)	\$ 13,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 37.02

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 13,037.02
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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	Reporting Period
	From: To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL	
\$	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 Build PA PAC	Reporting Period From: <u>11/29/2016</u> To: <u>12/31/2016</u>
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				DATE	AMOUNT		
Full Name of Contributor Ballard Spahr, LLP				MO	DAY	YEAR	\$ 2,500.00
Mailing Address				12	6	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19103					
Employer Name Ballard Spahr, LLP				Occupation Law Firm			
Employer Mailing Address/Principal Place of Business			City Philadelphia	State PA	Zip Code (Plus 4) 19103		
Full Name of Contributor Jeffrey A. Romoff				MO	DAY	YEAR	\$ 2,500.00
Mailing Address				12	30	2016	
City Allison Park	State PA	Zip Code (Plus 4) 15101					
Employer Name UPMC				Occupation CEO			
Employer Mailing Address/Principal Place of Business			City Pittsburgh	State PA	Zip Code (Plus 4) 15219		
Full Name of Contributor Sean M. Reilly				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				12	19	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19111					
Employer Name Roscommon International				Occupation President			
Employer Mailing Address/Principal Place of Business			City Bala Cynwyd	State PA	Zip Code (Plus 4) 19004		
Full Name of Contributor Saul Ewing LLP				MO	DAY	YEAR	\$ 2,000.00
Mailing Address				12	19	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19102					
Employer Name				Occupation Law Firm			
Employer Mailing Address/Principal Place of Business			City Philadelphia	State PA	Zip Code (Plus 4) 19102		

Full Name of Contributor Matt Shaner			MO 12	DAY 2	YEAR 2016	\$ 5,000.00
Mailing Address						
City Sewickley	State PA	Zip Code (Plus 4) 15143				
Employer Name Shaner Investments			Occupation CEO			
Employer Mailing Address/Principal Place of Business		City State College	State PA	Zip Code (Plus 4) 16801		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 13,000.00

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 Candidate Build PA PAC	Reporting Period From: <u>11/29/2016</u> To: <u>12/31/2016</u>
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				DATE		AMOUNT	
Full Name First National Bank				MO 11	DAY 30	YEAR 2016	\$ 17.88
Mailing Address							
City Hermitage	State PA	Zip Code (Plus 4) 16148					
Receipt Description interest earned							
Full Name First National Bank				MO 12	DAY 30	YEAR 2016	\$ 19.14
Mailing Address							
City Hermitage	State PA	Zip Code (Plus 4) 16148					
Receipt Description interest earned							

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

PAGE TOTAL
\$ 37.02

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	
Build PA PAC		From: <u>11/29/2016</u> To: <u>12/31/2016</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						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: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Build PA PAC	From <u>11/29/2016</u> To: <u>12/31/2016</u>

				DATE		AMOUNT			
To Whom Paid				MO	DAY	YEAR	\$		
PayPal									
Mailing Address				12	2	2016			
City		San Jose	State	CA	Zip Code (Plus 4)		95131	Description of Expenditure	contribution transaction fee
To Whom Paid				MO	DAY	YEAR	\$		
American Express									
Mailing Address				12	13	2016			
City		Newark	State	NJ	Zip Code (Plus 4)		07101	Description of Expenditure	credit card payment
To Whom Paid				MO	DAY	YEAR	\$		
Maverick Finance									
Mailing Address				12	1	2016			
City		Harrisburg	State	PA	Zip Code (Plus 4)		17101	Description of Expenditure	consulting
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL		
							\$		9,198.09

