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 :		Rep File	oort		CAND	IDATE		COM	4ITTEE	✓	LOBE	BYIST						
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		CON	ISTF	RUCTO	ORS ASS	SN PAC	C (CA	PAC)							
Street Address:	800 CRANBER	RY WO	ODS DR, ST	ΓE 11	0													
City:	CRANBERRY T	WP						State:	PA	PA			Zip Code: 16066-5210					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	30 DA		POST-	3. >	(AMENDM REPORT		Yes	No	•	/				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- 5. ELECTION					AY TION	POST-	OST- 6.			ATION ?	Yes	No	•	\	
report type)	ANNUAL REPORT	7.	Year 2018					NG METH CHECK (PAPER		\	DISKE	TTE		
Name of Office S	Sought by Candidat	te:	-					DATE	OF ELI	ECTI	ON	District Number	Office Code	Par	ty Code	Coun		
								МО	DAY	Υ	'EAR	Number	code			coue		
								1:	1	6	2018		(SEE IN	STRUCTIO	ONS FOR O	ODES))	
Summary of	Receipts and	МО	DAY	YEAR	2			МО	DAY	Y	'EAR	FO	R OFFI	CE USE	ONLY			
Expenditures	from:		5 1	2	018	Т	0		5	4	2018							
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	_		58	,463.76							
B. Total Monet	ary Contributions /	And Rec	eipts (From	Sche	dule	I)	\$	\$ 2.70										
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			58	,466.46							
D. Total Expen	ditures (From Sch	edule II	I)				\$			7,	500.00							
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$			50,	966.46]						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II)	\$				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00							
				AFF	IDA	١٧٧	T SE	CTION										
PART I - If this is	s a Committee repo	ort, trea	surer sign l	nere.	If th	is is	a Car	ndidate ı	eport,	cand	idate sig	ın here.						
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedule	s filed	d on	paper	or by elec	tronic r	nediur	n, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue.	
Sworn to and subs	cribed before me this day of	:	20								Signature	of Perso	n Submit	ting Rep	ort		-	
			_				- -					Prin	ted Name	<u> </u>			-	
My Commission Ex	Signatu pires	re										Ema	il				-	
	мо	D	AY	YR			-		A	rea Co	ode		e Teleph	none Nu	mber		_	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign l	nere.								
I swear (or affirm) No 320) as amende	that to the best of m	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not viol	ated a	ny provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,	
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-	
	day of						_					Drint-	d Name				_	
	Signature						-					riiite	u Haille					
My Commission Exp	-											Ema	il				-	
	МО	D	AY	YR	1		-		Area	a Code	1	Da	aytime T	elephon	e Numb	er	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CONSTRUCTORS ASSN PAC (CAPAC)	From:	<u>5/1/201</u>	<u>8</u> To:	6/4/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	2.70
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	2.70

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 Candidate			Rep	oorting P	eriod					
F				From: To				o:		
					DATE		АМ	OUNT		
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			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.)

lame of Filing Committee or Candidate				Reporting Period					
	Fr					To	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 Car	ndidate		Report	ing Perio	d		
CONSTRUCTORS ASSN PAC (CA	APAC)		From:		<u>5/1/201</u>	<u>.8</u> To:	6/4/2018
				D	ATE		AMOUNT
Full Name PNC Bank				МО	DAY	YEAR	
Mailing Address PO Box 609							\$ 2.70
City pittsburgh	State PA	Zip Code (15230	Plus 4)	5	31	2018	
Receipt Description interes	t payment						
Enter Grand Total of Part E on	Schedule T. Detailed	l Summary Page.	Section	4.			PAGE TOTAL
	January 1, Detailed	. Jaai y 1 age,	2221011	••			\$ 2.70

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>5/1/2018</u> To:	6/4/2018
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Rep				Reporting Period					
			From:			To:			
				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 Sched	ule II. In-Kind Co	ontributions Deta	iled Sum	marv Pac	ae. [PAGE TOTAL		
Section 2.	, , , , , , , , , , , , , , , , , , , ,			, , ,	, -,	\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate					porting P	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						Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sci	nedule II, 1	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL
Summary Page, Section 3.	-, -									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
CONSTRUCTORS ASSN PAC (CAPAC)			From	<u>5/:</u>	1/2018	То:	6/4/2018
	DATE AMOU						
To Whom Paid Friends for Donna Oberlander			мо	DAY	YEAR		
Mailing Address 8623 Lexington Place	Mailing Address 8623 Lexington Place			10	2018	\$	2,500.00
City Wexford	State PA	Zip Code (Plus 4) 15090	1	Sponsor 5			
To Whom Paid Jay Costa for State Senate			МО	DAY	YEAR		
Mailing Address 314 Newport Road			5	18	2018	\$	5,000.00
City Pittsburgh	State PA	Zip Code (Plus 4) 15221	1	otion of Exp			