#### **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	206			Repor Filed I		CA	WDI	DATE		COM	AITTEE	<b>Y</b>	LUB	D1131			
Name of Filing C	ommittee, Candid	ate or L	obbyist:		CONST	RUCT	ORS /	ASSI	N PAC	(CAP	AC)						_	
Street Address:	800 CRANBER	RRY WO	ODS DR, S	TE 110	)													
City:	CRANBERRY T	WP					Stat	e:	PA			Zip Co	de: 16	5066-5	5210			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	~		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5. <b>X</b>	30 D		F	POST-	6.		TERMINATION REPORT?		Yes	No	~		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2019				NG MI					PAPER		V	DISKE	TTE		
Name of Office S	ought by Candida	te:	•		-		DAT	TE O	F ELE	CTIC	N	District Number	Office Code	Pa	rty Code	County Code		
							МО		DAY	YI	AR							
			_					11		5	2019		(SEE IN	STRUCT	IONS FOR	CODES)		
Summary of Expenditures	Receipts and	МО	DAY	YEAR			МО		DAY	YI	EAR	FC	R OFFI	CE USI	ONLY			
			9 17	20	019	О		10		21	2019							
A. Amount Bro	ught Forward Fror	n Last R	eport			\$					790.15							
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	;				901.24							
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	i			56,6	591.39							
D. Total Expend	ditures (From Sch	edule II	I)			\$	1			8,5	500.00							
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$				48,1	.91.39							
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$	i .				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)		\$	1				0.00						_	
				AFF	IDAVI	T SE	CTI	ON									Į	
I swear (or affirm)	that this report, incl	-	_						-		_		f my kno	wledge	and beli	ef , true		
correct and comple	ete. cribed before me this	i									``	of Davas	- C b it	tina Da				
	day of		_ 20			_					oignature	of Perso	n Submit	ting Ke	рогс			
	Signatu	re				_						Prin	ted Name	В				
My Commission Ex	· —					_						Ema						
	MO		AY	YR					Area Code Daytime Telephone Number							L		
I swear (or affirm)	a report of a cand that to the best of n				•				_		y provis	ions of th	e act of J	une 3,1	.937 (P.L	1333,	١	
No 320) as amende Sworn to and subsc	ed. ribed before me this																ı	
	day of		20									ignature (	ot Candid	ate				
						_						Printe	ed Name					
My Commission Exp	Signature ires											Ema	il					
	МО	D	AY	YR		-			Area	Code		D	aytime T	elepho	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:	9/17/201	9 <b>To</b> :	10/21/2019
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)		_	\$	400.00
TOTAL for the Reporting	y Period	(2)	\$	400.00
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)			\$	500.00
TOTAL for the Reporting	<b>Period</b>	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	1.24
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			\$	901.24

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE 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 Filing Committee or Candidate Repo			orting Po	eriod				
CONSTRUCTORS ASSN PAC (CAPAC)	CONSTRUCTORS ASSN PAC (CAPAC) From			m:	9/17/2	<u>10/21/2019</u>		
					DATE			AMOUNT
Full Name of Contributor Nicholas M. Kuntz				МО	DAY	YEAR		
Mailing Address 1602 Blackburn He	ights Drive			9	20	2010	\$	150.00
<b>City</b> Sewickley	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15143		9	20	2019		
Full Name of Contributor Anthony M Ghioldi				МО	DAY	YEAR		
Mailing Address 619 Water View Dr	ive						\$	250.00

Zip Code (Plus 4)

16066

9

26

2019

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

State

РΑ

City

Cranberry Township

**PAGE TOTAL \$** 400.00

#### **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 Candida	te		Reporting	Period				
			From:			То:		
				DA	ΛΤΕ.		Α	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							<b>\$</b>	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sc	hedule I, Detail	ed Summary P	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				Repo	orting Pe	riod			
CONSTRUCTORS ASSN PAC (CAPAC)				Fron	n:	9/17/2	019 To	<b>)</b> :	10/21/2019
					D/	<b>ATE</b>		АМ	OUNT
Full Name of Contributor Justin M. Fox					МО	DAY	YEAR		
Mailing 3826 Saxonburg Blvd							2010	\$	500.00
<b>City</b> Cheswick	<b>State</b> PA	<b>Zip Code</b> (15024	(Plus 4)	)	9	17	2019		
Employer Name Independence Excava	ating, Inc.				Occupat	ion	Contract	or	
Employer Mailing Address/Principal Plac Business	e of	City				State		Zip Code	(Plus 4)
3826 Saxonburg Blvd		Ches	wick			PA		15024	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Pa	ige, Se	ectio	on 3.			PA \$	<b>GE TOTAL</b> 500.00

## 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 Co	andidate	R	eporting Perio	od			
CONSTRUCTORS ASSN PAC (C	CAPAC)	F	rom:	9/17/201	<u>9</u> To:	10/21/2019	<u>!</u>
		•	D	ATE		AMOUNT	
<b>Full Name</b> PNC Bank			МО	DAY	YEAR		
Mailing Address PO Box 609	9					\$	1.24
<b>City</b> Pittsburgh	<b>State</b> PA	Zip Code (Plus 15230	<b>4)</b> 9	30	2019		
Receipt Description Intere	est payment						

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

**PAGE TOTAL \$** 1.24

#### **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:	<u>9/17/2019</u> <b>To:</b>	10/21/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	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	Candidate		Reporti	ng Period			
CONSTRUCTORS ASSN PAC (	(CAPAC)		From	<u>9/1</u>	7/2019	То:	10/21/2019
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Friends of Mike Turzai							
Mailing Address PO Box 92			9	26	2019	\$	2,500.00
<b>City</b> Harrisburg	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure	<u>'</u>	
-	PA	17108	Breakfa	ast event c	ontributi	on	
To Whom Paid			мо	DAY	YEAR		
Citizens for Stan Saylor						1	
Mailing Address 208 Robin	Drive		10	1	2019	\$	500.00
City Red Lion	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure	:	
PA 17356			recepti	on contribu	ution		
<b>To Whom Paid</b> Friends of Tim O'Neal			МО	DAY	YEAR		
Mailing Address 1345 Mapl	ewood Circle		10	8	2019	\$ \$	2,500.00
<b>City</b> Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	l penditure	<u> </u>	
	PA	15301		on Contrib			
<b>To Whom Paid</b> Build PA PAC			мо	DAY	YEAR		
Mailing Address 816 Highfi	eld Ct		10	18	2019	\$ \$	2,500.00
City Coraopolis	State	Zip Code (Plus 4)	Descrip	tion of Exp	) Denditure	<u> </u>	
Солисроно	PA	15108	Sen. Co		'		
<b>To Whom Paid</b> Friends of Cindy Kirk	·	·	мо	DAY	YEAR		
Mailing Address 198 Ridge	view Drive		10	18	2019	\$	500.00
City Wexford	State	Zip Code (Plus 4)	Descri	tion of Exp	l penditur <i>e</i>	<u> </u>	
WEATOIU	PA	15090	Contrib			-	
Fatou Cuand Tatal of F		mont Cover Barra Tto					PAGE TOTAL
Enter Grand Total of Exper	iuitui es on Page 1, Re	port Cover Page, Item I	<i>.</i>			\$	8,500.00