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 2015	0033			Rep File			CAND	IDATE		СОМ	ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		Build	d PA	PAC										
Street Address:	816 Highfield	Court															
City:	Coraopolis							State: PA				Zip Code: 15108					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2.	30 DA PRIMA		POST-				IENT	Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- 5. 30 DA ELECTION						POST- 6.			TERMINA REPORT?		Yes	No		\
report type)	ANNUAL REPORT	7.	Year 2020	FILING METHO () CHECK ON								PAPER / DI			DISKE	TTE	
Name of Office S	ought by Candida	te:	-					DATE C)F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	AR		1			02	
								1		14	2020		(SEE IN	STRUCTI	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR				МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		1 1	20	020	Т	0	1	. :	24	2020						
A. Amount Bro	ught Forward Fro	n Last R	eport				\$			502,	190.89						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 12,750.00																	
C. Total Funds Available (Sum Of Lines A and B) \$ 514,940.89																	
D. Total Expenditures (From Schedule III) \$ 6,278.33																	
E. Ending Cash Balance (Subtract Line D From Line C)							\$		Ī	508,6	62.56						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Scl	hedul	le II	:)	\$				22.46						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00						
				AFF	IDA	١٧٢	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	[f thi	is is	a Can	didate r	eport, d	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	edules	filed	d on	paper (or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tr	ue,
Sworn to and subs	cribed before me thi day of	5	20							5	Signature	of Perso	n Submit	ting Re _l	oort		_
	Signatu	re					-					Prin	ted Name	•			_
My Commission Ex	cpires						_					Ema	il				_
	МО	D	AY	YR					Arc	ea Cod	le	Daytim	e Teleph	one Nu	mber		╝
Part II- If this is	a report of a can	didate's	authorized C	Comm	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of i	ny knowle	edge and belief	f this	politi	tical	commi	ittee has r	not viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	ate			_
	_						_					Printe	d Name				-
My Commission Exp	Signature ires						-					Ema	il				-
	мо	D	AY	YR			-		Area	Code		Da	aytime T	elephor	ie Numbe	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
Build PA PAC	From:	1/1/202	<u>0</u> To:	1/24/2020
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)			\$	11,750.00
All Other Contributions (Part D)			\$	1,000.00
TOTAL for the Reporting) Period	(3)	\$	12,750.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
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			\$	12,750.00

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			Reporting Period					
		F	rom:		То	:		
				DATE			AMOUNT	
Full Name of Contributing Committee			МО	DAY	YEAR			
Mailing Address		_				\$	0.00	
City	State	Zip Code (Plus 4)						

PAGE TOTAL
0.00

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

PART B 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.

Name of Filing Commit	tee or Candidate		Reporting	Period				
					Т	Го:		
		•		DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)			Ī			

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 Candid	ate		Reporting	Period				
Build PA PAC			From:	<u>1,</u>	/1/2020	То:		<u>1/24/2020</u>
				DA	\TE		-	AMOUNT
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Chamber PAC							\$	1,500.00
Mailing Address 417 Walnut Stre	eet			1	21	2020		
City Harrisburg	State	Zip Cod	e (Plus 4)					
	PA	17101					l	
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Roche Diagnostics Corp. (DxPAC)							_ \$	1,000.00
Mailing Address 150 Clove Road	8th Floor			1	21	2020		•
City Little Falls	State	Zip Cod	e (Plus 4)]				
	NJ	07424						
Full Name of Contributing Committe	e	-		мо	DAY	YEAR		
Geisinger Health PAC Inc.				140	DAI	ILAK	_ s	750.00
Mailing Address 409 North 2nd S	Street Suite 500			1	21	2020		
City Harrisburg	State	Zip Cod	e (Plus 4)]				
	PA	17101						
Full Name of Contributing Committe	e	-		мо	DAY	YEAR		
PA HBPA PAC							\$	7,500.00
Mailing Address PA Horsemen's Hollywood Boule	Benevolent & I evard	Protective Assoc	ciat 777	1	21	2020		
City Grantville	State	Zip Cod	e (Plus 4)					
	PA	17028		I	l	I	I	
Full Name of Contributing Committe	e	-		мо	DAY	YEAR		
Calpine Corporation PAC							\$	1,000.00
Mailing Address 717 Texas Aven		T		1	21	2020	Ī	
City Houston	State		e (Plus 4)					
	TX	77002		<u> </u>	1	<u> </u>		
								PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	11,750.00

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	Name of Filing Committee or Candidate			eporting Per	riod				
Build PA PAC			Fı	rom:	1/1/2	<u>020</u> To	To: <u>1/24/2020</u>		
	DATE						AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	1 000 00	
Flowers and Flowers, LLC								1,000.00	
Mailing Address 5775 Allentown Boulevard Suite 201					21	2020			
City Harrisburg	State	Zip Cod	e (Plus 4)	□ •		2020			
	PA	17112					1		
Employer Name Flowers and Flowers				Occupation Public Accountants				tants	
Employer Mailing Address/Principal Plac	e of Business	City	,		State		Zip Code (Plus 4)		
5775 Allentown Blvd.Suite 201		Har	risburg		PA		1711	2	
Enter Grand Total of Part C on Scheo	tion 3				PAGE TOTAL				
Lines Grand Total of Part Con Sched	idie 1, Detailed 30	illilliai y	rage, sec	cion 3.			\$	1,000.00	

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		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Pl	us 4)					
Receipt Description	'	<u>'</u>					·	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	I Communication of the Communi		4			F	PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	i Summary Page, S	ection	4.			\$	0.00

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>1/1/2020</u> To:	1/24/2020						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	22.46						
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,		\$	22.46						

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:	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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Re	porting	Period					
	From:						rom: To:				
						DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$		0.00	
City	State		Zip Code(Plus 4)								
Employer of Contributor					Occup	ation					
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	Code(Plus 4)	Descr	iptio	n of Contribution	on	
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	ΓAL	
Summary Page, Section 3.										0.00	

6,278.33

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period				
Build PA PAC	From	From <u>1/1/2020</u> To:						
				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
American Express								
Mailing Address PO Box 1270				10	2020	\$	6,194.69	
City Newark	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	NJ	07101	credit card payment					
To Whom Paid			МО	DAY	YEAR			
Mindy Houser			MO	ואמן	LAK			
Mailing Address 816 Highf	ield Court		1	21	2020	\$	83.64	
City Coraopolis	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	15108	reimbu	rsement				
							PAGE TOTAL	
Enter Grand Total of Expe	nditures on Page 1, Re	eport Cover Page, Item I).			Ι.		