

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20150033		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> Build PA PAC												
<b>Street Address:</b> 816 Highfield Court												
<b>City:</b> Coraopolis						<b>State:</b> PA		<b>Zip Code:</b> 15108				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No		
	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.	Year 2020	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b>	<input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	02			
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		1	1	2020		3	9	2020				
<b>A. Amount Brought Forward From Last Report</b>						\$ 502,190.89						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 48,975.73						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 551,166.62						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 69,072.20						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 482,094.42						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 22.46						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Build PA PAC	From: <u>1/1/2020</u> To: <u>3/9/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 42,250.00
<b>All Other Contributions (Part D)</b>	\$ 6,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 48,250.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 725.73

<b>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.)</b>	\$ 48,975.73
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Name of Filing Committee or Candidate	Reporting Period
	From: To:

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

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

<b>PAGE TOTAL</b>	
\$	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.**

<b>Name of Filing Committee or Candidate</b>  Build PA PAC	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2020</u> <b>To:</b> <u>3/9/2020</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,500.00
Chamber PAC				1	21	2020	
Mailing Address 417 Walnut Street							
City Harrisburg	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 2,500.00
FoodPac of PA				2	19	2020	
Mailing Address Post Office Box 870							
City Camp Hill	State PA	Zip Code (Plus 4) 17001					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
First Energy PAC				2	19	2020	
Mailing Address 76 South Main Street							
City Akron	State OH	Zip Code (Plus 4) 44308					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
NiSource Inc. PAC				2	19	2020	
Mailing Address 290 West Nationwide Boulevard							
City Columbus	State OH	Zip Code (Plus 4) 43215					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
Greenlee Partners State PAC				3	9	2020	
Mailing Address 230 State Street Post Office Box 291							
City Harrisburg	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
Roche Diagnostics Corp. (DxPAC)				1	21	2020	
Mailing Address 150 Clove Road 8th Floor							
City Little Falls	State NJ	Zip Code (Plus 4) 07424					

Full Name of Contributing Committee			MO	DAY	YEAR	\$750.00
Geisinger Health PAC Inc.			1	21	2020	
Mailing Address	409 North 2nd Street Suite 500					
City	Harrisburg	State	PA	Zip Code (Plus 4)	17101	

Full Name of Contributing Committee			MO	DAY	YEAR	\$7,500.00
PA HBPA PAC			1	21	2020	
Mailing Address	PA Horsemen's Benevolent & Protective Associat 777 Hollywood Boulevard					
City	Grantville	State	PA	Zip Code (Plus 4)	17028	

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
Selective Insuance Co of America PAC			3	9	2020	
Mailing Address	40 Wantage Avenue					
City	Branchville	State	NJ	Zip Code (Plus 4)	07890	

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
Chubb Group Holdings Inc. PAC			3	9	2020	
Mailing Address	436 Walnut Street WA04P					
City	Philadelphia	State	PA	Zip Code (Plus 4)	19106	

Full Name of Contributing Committee			MO	DAY	YEAR	\$10,000.00
Mid-Atlantic Laborers' Political League (MALPL)			2	19	2020	
Mailing Address	11951Freedom Drive #310					
City	Reston	State	VA	Zip Code (Plus 4)	20190	

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
Calpine Corporation PAC			1	21	2020	
Mailing Address	717 Texas Avenue Suite 1000					
City	Houston	State	TX	Zip Code (Plus 4)	77002	

Full Name of Contributing Committee			MO	DAY	YEAR	\$5,000.00
Calpine Corporation PAC			2	19	2020	
Mailing Address	717 Texas Avenue Suite 1000					
City	Houston	State	TX	Zip Code (Plus 4)	77002	

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

<b>PAGE TOTAL</b>
\$ 42,250.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  Build PA PAC	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2020</u> <b>To:</b> <u>3/9/2020</u>
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				DATE		AMOUNT	
<b>Full Name of Contributor</b> Albert Ceccoli				MO 2	DAY 19	YEAR 2020	\$ 5,000.00
<b>Mailing Address</b> 1629 White Tail Run							
<b>City</b> Moscow	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18444					
<b>Employer Name</b> Pennsylvania Coin LLC				<b>Occupation</b> Owner			
<b>Employer Mailing Address/Principal Place of Business</b> 300 Olive Street			<b>City</b> Scranton		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18509
<b>Full Name of Contributor</b> Flowers and Flowers, LLC				MO 1	DAY 21	YEAR 2020	\$ 1,000.00
<b>Mailing Address</b> 5775 Allentown Boulevard   Suite 201							
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112					
<b>Employer Name</b> Flowers and Flowers				<b>Occupation</b> Public Accountants			
<b>Employer Mailing Address/Principal Place of Business</b> 5775 Allentown Blvd.Suite 201			<b>City</b> Harrisburg		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 17112

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

<b>PAGE TOTAL</b>
\$ 6,000.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  Build PA PAC	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2020</u> <b>To:</b> <u>3/9/2020</u>
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				DATE		AMOUNT	
<b>Full Name</b> First National Bank				MO 1	DAY 31	YEAR 2020	\$  390.14
<b>Mailing Address</b> 4140 East State Street							
<b>City</b> Hermitage	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16148					
<b>Receipt Description</b> interest earned							
<b>Full Name</b> First National Bank				MO 2	DAY 28	YEAR 2020	\$  335.59
<b>Mailing Address</b> 4140 East State Street							
<b>City</b> Hermitage	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16148					
<b>Receipt Description</b> interest earned							

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

PAGE TOTAL	
\$	725.73



## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
Build PA PAC		From: <u>1/1/2020</u> To: <u>3/9/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 22.46
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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.)			\$ 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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b> \$ 0.00



# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Build PA PAC	From <u>1/1/2020</u> To: <u>3/9/2020</u>

DATE				AMOUNT
To Whom Paid				
American Express				
<b>Mailing Address</b>	PO Box 1270			
<b>City</b>	Newark	<b>State</b>	NJ	
<b>Zip Code (Plus 4)</b>	07101	<b>Description of Expenditure</b>		
credit card payment				
<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
1	10	2020		\$ 6,194.69
Mindy Houser				
<b>Mailing Address</b>	816 Highfield Court			
<b>City</b>	Coraopolis	<b>State</b>	PA	
<b>Zip Code (Plus 4)</b>	15108	<b>Description of Expenditure</b>		
reimbursement				
<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
1	21	2020		\$ 83.64
Maverick Finance				
<b>Mailing Address</b>	1426 North 3rd Street Suite 310			
<b>City</b>	Harrisburg	<b>State</b>	PA	
<b>Zip Code (Plus 4)</b>	17102	<b>Description of Expenditure</b>		
event deposit				
<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
1	28	2020		\$ 2,000.00
KC Tomlinson for State Representative				
<b>Mailing Address</b>	3271 Oakford Avenue			
<b>City</b>	Treose	<b>State</b>	PA	
<b>Zip Code (Plus 4)</b>	19053	<b>Description of Expenditure</b>		
contribution				
<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
1	31	2020		\$ 10,000.00
Maverick Finance				
<b>Mailing Address</b>	1426 North 3rd Street Suite 310			
<b>City</b>	Harrisburg	<b>State</b>	PA	
<b>Zip Code (Plus 4)</b>	17102	<b>Description of Expenditure</b>		
consulting				
<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
1	31	2020		\$ 8,000.00
Mr. Steven Miller				
<b>Mailing Address</b>	512 Kifer Street			
<b>City</b>	Bellefonte	<b>State</b>	PA	
<b>Zip Code (Plus 4)</b>	16823	<b>Description of Expenditure</b>		
reimbursement				
<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
2	6	2020		\$ 1,485.13

To Whom Paid American Express			MO	DAY	YEAR	\$ 2,592.28
Mailing Address PO Box 1270			2	6	2020	
City Newark	State NJ	Zip Code (Plus 4) 07101	Description of Expenditure credit card payment			
To Whom Paid Maverick Finance			MO	DAY	YEAR	\$ 1,347.00
Mailing Address 1426 North 3rd Street Suite 310			2	19	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure invitations			
To Whom Paid Friends of Nicole Zicarelli			MO	DAY	YEAR	\$ 25,000.00
Mailing Address 2300 Freeport Road Suite 3			2	19	2020	
City New Kensington	State PA	Zip Code (Plus 4) 15068	Description of Expenditure contribution			
To Whom Paid Jacob D Corman, III			MO	DAY	YEAR	\$ 213.39
Mailing Address 270 Edward Drive			2	20	2020	
City Bellefonte	State PA	Zip Code (Plus 4) 16823	Description of Expenditure reimbursement			
To Whom Paid Maverick Finance			MO	DAY	YEAR	\$ 8,000.00
Mailing Address 1426 North 3rd Street Suite 310			3	3	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure consulting			
To Whom Paid Friends of Stephanie Borowicz			MO	DAY	YEAR	\$ 1,000.00
Mailing Address Post Office Box 43			3	4	2020	
City McElhattan	State PA	Zip Code (Plus 4) 17748	Description of Expenditure contribution			
To Whom Paid Mr. Steven Miller			MO	DAY	YEAR	\$ 1,143.07
Mailing Address 512 Kifer Street			3	4	2020	
City Bellefonte	State PA	Zip Code (Plus 4) 16823	Description of Expenditure reimbursement			
To Whom Paid Maverick Finance			MO	DAY	YEAR	\$ 2,013.00
Mailing Address 1426 North 3rd Street Suite 310			3	9	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure event expense			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL**

\$ 69,072.20

