Campaign Finance Report

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

Filer Identificat Number :	ion 8100	206			Repor Filed E		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST		
Name of Filing (Committee, Candida	ate or L	obbyist:	-	CONST	RUCT	ORS ASS	n pac	(CAP	AC)						
Street Address:	Street Address: 800 CRANBERRY WOODS DR, STE 110															
City:	CRANBERRY T	WP					State:	PA			Zip Co	de: 16	: 16066-5210			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA PRIM		POST-	3. X		AMENDN REPORT		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		POST-	6.		TERMIN/ REPORT		Yes	No	\checkmark	
report type)							NG METH				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candidat	te:			₽		DATE O)F ELE	стіо	N	District Number	Office Code	Par	ty Code	County Code	
							мо	DAY	YE	AR						
							11		2	2021		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	1		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		5 4	20	021 T	0	6		7	2021						
A. Amount Bro	ught Forward Fron	n Last R	eport			\$			37,0	91.01						
B. Total Monet	ary Contributions	And Rec	eipts (From	1 Sche	dule I)	\$	\$ 0.16									
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			37,0	91.17						
D. Total Expen	ditures (From Scho	edule II	1)			\$			11,5	500.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			25,5	91.17	-					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$				0.00	4					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')		\$				0.00						
				AFF	IDAVI	T SE	CTION									
	s a Committee repo		-								-	¢ 1			6	
correct and compl) that this report, incl ete.	uaing the	e attached sci	neaules	s filed on	paper	or by elect		eaium	, are to	the best o	т ту кпоч	leage	and bell	er, true	
Sworn to and subs	scribed before me this day of	5	20						S	ignatur	e of Perso	n Submitt	ing Rep	oort		
	Signatu	re				_					Prin	ted Name				
My Commission E	xpires					_					Ema	il				
	МО	D	AY	YR				Ar	ea Cod	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ef this	political	comm	ittee has n	iot viola	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subso	cribed before me this day of		20							s	ignature	of Candida	ite			
			-~			_					Printe	ed Name				
My Commission Exp	Signature					-					Ema	il				
						_										
	мо	D	AY	YR				Area	Code		D	aytime Te	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CONSTRUCTORS ASSN PAC (CAPAC) From: <u>5/4/2021</u> **To:** 6/7/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.16 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.16 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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			Re	porting l	Period			
Fr				om:		:		
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)			4)					
							Γ	PAGE TOTAL

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

0.00

\$

PAGE 3

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. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candidat	e			orting P	eriod	_		
	From: To:							
					DATE			AMOUNT
Full Name of Contributor				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								

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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detail	led Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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 Ca	ndidate		Report	ing Perio	d				
CONSTRUCTORS ASSN PAC (CAPAC)			From: <u>5/4/2021</u> To			<u>1</u> To:	: <u>6/7/2021</u>		
				D	ATE			AMOUNT	
Full Name PNC Bank				мо	DAY	YEAR			
Mailing Address PO Box 609							\$	0.16	
City Pittsburgh	State PA	Zip Code (15230	Plus 4)	5	28	202			
Receipt Description Interes	t Payment	·							
Enter Grand Total of Part E on	Schedule I. Detailed	Summary Page	Section	Д				PAGE TOTAL	
		, callinary i age,	Section				\$	0.16	

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>5/4/2021</u> To:	<u>6/7/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
Fr					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 Schedule II, In-Kind Contributions Detaile Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	ion		1	
Employer Mailing Address/Prine Business	cipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	f Contribution
										PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period			
CONSTRUCTORS ASSN PAC (C	CAPAC)		From	<u>5/4</u>	<u>4/2021</u>	То:	<u>6/7/2021</u>
				AMOUNT			
To Whom Paid Republican Committee of Alleg	heny County		мо	DAY	YEAR		
Mailing Address 100 Fleet Street #205			5	20	2021	\$	1,000.00
CityPittsburghStateZip Code (Plus 4)PA15220			Description of Expenditure Lincoln Day Dinner				
To Whom Paid Friends of Austin Davis			мо	DAY	YEAR		
Mailing Address 1107 Washi	ington Street		5	24	2021	\$	500.00
City McKeesport	State PA	Zip Code (Plus 4) 15132	Descrip 5/24 ev	otion of Exp vent	penditure	3	
To Whom Paid Friends of Kim Ward			мо	DAY	YEAR		
Mailing Address PO Box 83			6	2	2021	\$	10,000.00
CityHarrisburgStateZip Code (Plus 4)PA17108				otion of Exp luncheon	penditure	3	
Enter Grand Total of Expand	lituros on Dago 1. Do	nort Cover Dage Item [PAGE TOTAL
Enter Grand Total of Expend	intures on Page 1, Re	port Cover Page, Item L				\$	11,500.00