Campaign Finance Report

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

Filer Identification 8100206 Report Filed By:								СОМ	4ITTEE	✓	LOBE	BYIST					
Name of Filing C	ommittee, Candid	ate or L	obbyist:		CON	ISTR	RUCTO	DRS ASS	N PAC	(CAP	AC)						
Street Address:	800 CRANBER	RRY WO	ODS DR, STE	110)												
City:	CRANBERRY 1	WP						State:		Zip Code: 16066-5210							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	. 2	2.	30 DA PRIMA		POST-	3.		AMENDMENT Yes No REPORT?				•	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA		POST-	6. X		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPORT	7.	Year 2021					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	ought by Candida	te:	-					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	,							МО	DAY	YE	AR	Number	code	<u> </u>		code	
								11		2	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES))
•	Receipts and								AR	FO	R OFFI	CE USE	ONLY				
Expenditures	rrom:	:	10 19	20)21	Т	0	11	7	22	2021						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			38,0	86.55						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	chec	dule	I)	\$			5	500.09						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			38,5	86.64						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,0	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			37,5	86.64						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sch	edul	e II))	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			1			
			F	AFF:	IDA	VI	T SE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign he	re. I	f thi	is is	a Can	ididate re	eport, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, incl ete.	luding the	attached sched	dules	filed	l on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me this day of	5	20							s	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	re					-					Prin	ted Nam	e			
My Commission Ex	rpires						_					Ema	il				_
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized Co	omm	itte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belief	this	politi	ical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this		20								s	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						-					Ema	il				_
My Commission Exp	ires											Liila					
	МО	D	AY	YR			•		Area	Code		Daytime Telephone Number					

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CONSTRUCTORS ASSN PAC (CAPAC)	From:	10/19/202	<u>?1</u> To:	11/22/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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)	\$	500.00		
TOTAL for the Reporting	\$	500.00		
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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.09
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			\$	500.09

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2	250.00) in the			
Name of Filing Committee or Candidate			Reporting Period From: To					
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL
\$ 0.00

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	Reporting P	Reporting Period						
CONSTRUCTORS ASSN PAC (CAPAC) From				10/19/	<u>2021</u> T o	To: <u>11/22/2021</u>		
		•		DATE		AMOUNT		
Full Name of Contributor Patrick Carnevale			МО	DAY	YEAR			
Mailing Address 1032 River	Forest Drive			10	2024	\$ 250.00		
City Freeport	State PA	Zip Code (Plus 4) 16229	11	19	2021			
Full Name of Contributor Jamie Stilley			МО	DAY	YEAR			
Mailing Address 305 Green	Lake Drive					\$ 250.00		
City Mars	State	Zip Code (Plus 4)	11	19	2021			
	PA	16046						

16046

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

PAGE TOTAL 500.00

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	date		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.)

Name of Filing Committee or Candidate					Reporting Period					
			Fron	n:		To	То:			
				D	ATE		АМС	OUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	s 4)							
Employer Name				Occupa	tion					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PA(GE 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.

Reporting Period

CONSTRUCTORS ASSN PAC (CAPAC)		Fron	n:	10/19/202	<u>?1</u> To:	11/22/2021		
			D	ATE		AMOUNT		
Full Name				DAY	YEAR			
PNC Bank			МО	DAY	YEAK			
Mailing Address PO Box 609			10	20	2021	\$	0.09	
City Pittsburgh	State	Zip Code (Plus 4)	10	29	2021			

15230

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

Interest Payment

PΑ

Name of Filing Committee or Candidate

Receipt Description

PAGE TOTAL \$ 0.09

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 Peri	od	
CONSTRUCTORS ASSN PAC (CAPAC)	From:	<u>10/19/2021</u> To:	11/22/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	t	
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 Candid	Name of Filing Committee or Candidate Ro				Reporting Period					
			From:			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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL			
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		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			
					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			•			Occupa	ation		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
CONSTRUCTORS ASSN PAC (CAPAC)	From	10/19/2021	То:	11/22/2021	
		DATE		AMOUNT	

		DATE				AMOUNT	
To Whom Paid Gainey for Mayor			МО	DAY	YEAR		
Mailing Address PO Box 5208			10	21	2021	\$	1,000.00
City Pittsburgh	State PA	Zip Code (Plus 4) 15206	Description of Expenditure Luncheon contribution				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	PAGE TOTAL 1,000.00