### **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 Repor Filed E								CAND	DATE		СОМ	<b>4ITTEE</b>	<b>√</b>	LOBI	BYIST		
Name of Filing C	Name of Filing Committee, Candidate or Lobbyist: CONSTRUCTORS ASSN PAC (CAPAC)																
Street Address:	800 CRANBER	RY WO	ODS DR, ST	ΓE 11	0												
City:	CRANBERRY T	WP						State:	PA			Zip Cod	<b>ie:</b> 16	066-5	210		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	Ē- 5	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2021					IG METH CHECK O				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE (	F ELE	CTIO	N	District	Office	Par	ty Code	Count	y
	,							МО	DAY	YE	AR	Number Code				code	
								11		2	2021		(SEE IN	STRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	R			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:	1	11 23	2	021	Т	0	12	2	31	2021						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	•		37,5	586.64	1					
B. Total Monetary Contributions And Receipts (From Schedule I)								\$ 7,300.18									
C. Total Funds Available (Sum Of Lines A and B)							\$			44,8	386.82						
D. Total Expenditures (From Schedule III) \$										0.00							
E. Ending Cash Balance (Subtract Line D From Line C)							\$			44,8	86.82						
F. Value Of In-	Kind Contributions	Receive	ed (From So	chedu	le II	)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00						
				AFF	IDA	VI	T SE	CTION									
	a Committee rep	-	_								_						
I swear (or affirm) correct and complete	) that this report, incl ete.	uding the	attached sch	nedules	s filed	d on	paper	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	e <sub>.</sub>
Sworn to and subs	cribed before me this	<b>:</b>	20							S	ignature	of Perso	n Submit	ting Rep	ort		-
							- -					Prin	ted Name	•			-
My Commission Ex	Signatu pires	re										Ema	il				-
	мо	D/	AY	YR			-		Ar	ea Coc	le		e Teleph	one Nu	mber		-
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has ı	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	. 1333	,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
	day of						_					D.:*	d Nac				-
	Signature						-					Printe	d Name				
My Commission Exp	<del>-</del>											Ema	il				-
	МО	D/	AY	YR	l		-		Area	Code		Di	aytime T	elephor	e Numbe	er	·

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
CONSTRUCTORS ASSN PAC (CAPAC)	From:	11/23/20	2 <u>1</u> To:	12/31/2021
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)	\$	400.00		
TOTAL for the Reporting	\$	400.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,500.00
All Other Contributions (Part D)			\$	4,400.00
TOTAL for the Reporting	) Period	(3)	\$	6,900.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	0.18
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			\$	7,300.18

#### **PART A**

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

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE 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 C	Name of Filing Committee or Candidate					eporting Period							
CONSTRUCTORS ASSN PAC (C	CAPAC)		From:	rom: <u>11/23/2021</u> To: <u>12/3:</u>									
				DATE AMOUNT									
Full Name of Contributor Jeffrey A Frank	МО	DAY	YEAR										
Mailing Address 535 Tuscara			2024	\$	150.00								
<b>City</b> Beaver	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15009	12	21	2021								
Full Name of Contributor Marcus Pennell			МО	DAY	YEAR								
Mailing Address 3601 Mound	Way			22	2024	\$	250.00						
City Cincinnati	State	Zip Code (Plus 4)	11	23	2021								

45227

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

ОН

**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 Candidate	Reporting F			
CONSTRUCTORS ASSN PAC (CAPAC)	From:	11/23/2021	То:	12/31/2021

DATE AMOUNT

Full Name of Contributing Committee TC PAC (TRUMBULL CORP)	МО	DAY	YEAR			
Mailing Address 225 NORTH SHORE D	12	21	2021	\$ 2,500.00		
City PITTSBURGH	State Zip Code (Plus 4) PA 15212				2021	

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

**PAGE TOTAL** 2,500.00

### 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				Rep	orting Pe	riod			
CONSTRUCTORS ASSN PAC (CAPAC)				Fron	n:	11/23/2	<u>021</u> To	o:	12/31/2021
					D.	ATE		AN	MOUNT
Full Name of Contributor Anthony Bertolino					МО	DAY	YEAR		
Mailing 3950 W. Washington	Street							\$	300.00
City New Castle	State	Zip	Code (Plus	4)	12	21	2021		
	PA	161	101						
Employer Name Mekis Construction Co	orporation				Occupat				
Employer Mailing Address/Principal Plac Business	e of		City			State	Zip Cod	e (Plus 4)	
1595 Route 422 East Fenelton					PA 16034				
Full Name of Contributor Jay Black					МО	DAY	YEAR		
Mailing Address 266 Kenforest Drive								\$	700.00
<b>City</b> Pittsburgh	State	Zip	Code (Plus	4)	12	21	2021	.	
	PA	152	216						
Employer Name Seubert & Associates	•				Occupation insurance				
Employer Mailing Address/Principal Plac Business	e of		City		I	State		Zip Cod	e (Plus 4)
225 North Shore Drive, Suite 300			Pittsburg	h		PA		15212	
Full Name of Contributor						DAY	VEAD		
Tyler L. Caldwell					МО	DAY	YEAR		
Mailing 108 Red Brush Trail								\$	600.00
City Harmony State Zip Code (Plus				4)	12	21	2021		
PA 16037									
Employer Name Mekis Construction Corporation					Occupation Contractor				
Employer Mailing Address/Principal Place of City Business					•	State		Zip Code (Plus 4)	
   1595 Route 422 East			Fenelton	PA			16034		

									•	
Full Name of Con Jay Cleveland Jr.					МО	DAY	YEAR			
Mailing	4565 William Penn Hig	nhway						4.		
Address					12	21	2021	<b>\$</b>	500.00	
City Murrysvil	le	<b>State</b> PA		Code (Plus 4)						
		PA	15	6668						
Employer Name	Cleveland Brothers Ed	Juipment Co.			Occupat	i <b>on</b> S	upplier			
Employer Mailing Business	Address/Principal Place	e of		City	•	State		Zip Code (Plus	6 4)	
4565 William Per	nn Highway			Murrysville		PA		15668		
Full Name of Con	tributor				мо	DAY	YEAR			
Mailing Address	3826 Saxonburg Blvd							<u> </u>	1,000.00	
City Cheswick	,	State	Zi <sub>l</sub>	p Code (Plus 4)	12	21	2021			
CHESWICK		PA	15	5024						
Employer Name	Indepence Excavating				Occupation Contractor					
Employer Mailing	Address/Principal Place	e of		City		State	Т	Zip Code (Plus	s 4)	
Business					   DA		15024			
3826 Saxonburg Blvd Cheswick						PA	l	15024		
Full Name of Con Rhonda J. Snyde					мо	DAY	YEAR			
Mailing Address	2710 Old Route 422 E							\$	300.00	
City Fenelton		State	Zij	Code (Plus 4)	12	21	2021			
		PA	16	6034						
Employer Name	Mekis Construction Co	orporation			Occupation Contractor					
Employer Mailing Business	Address/Principal Plac	e of		City	<u> </u>	State	I	Zip Code (Plus	s 4)	
1595 Route 422	East			Fenelton		PA		16034		
Full Name of Con Andrew R. Swan					мо	DAY	YEAR			
Mailing Address	202 Silver Ridge Lane							\$	1,000.00	
City Gibsonia	ity Gibsonia State Zip Code (Plus 4)				12	21	2021			
PA 15044				5044						
Employer Name Swank Construction Company				Occupat	ion	ontract	or			
	Employer Mailing Address/Principal Place of City			City	<u> </u>	State		Zip Code (Plus	s 4)	
Business				ington PA 15068						
632 Hunt Valley Circle New Kensingto				1	IPA		אמנורו			

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

PAGE TOTAL

\$ 4,400.00

## 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 Candidat	e		Report	ing Perio	od				
CONSTRUCTORS ASSN PAC (CAPAC)			From:		11/23/202	<u>1</u> To:	<u>12/31/2021</u>		
				D	ATE		AMOUNT		
Full Name				мо	DAY	YEAR			
PNC Bank				МО	DAT	IEAR			
Mailing Address PO Box 609					<b>\$</b>	0.09			
<b>City</b> PIttsburgh	State	Zip Code (	Plus 4)	12	31	2021			
-	PA	15230							
Receipt Description Interest Payr	nent	•							
Full Name					DAY	VEAD			
PNC Bank				МО	DAY	YEAR			
Mailing Address PO Box 609							<b>\$</b>	0.09	
<b>City</b> Pittsburgh	State	Zip Code (	Plus 4)	11	30	2021			
	PA	15230							
Receipt Description Interest Payr	nent	•					•		

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

**PAGE TOTAL 9**0.18

#### **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>11/23/2021</u> <b>To:</b>	12/31/2021					
L. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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, 1		\$	0.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	ate		Reportin	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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL	
Section 2.						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	ame of Filing Committee or Candidate				Re	porting F	Period				
					Fro	om:		To:	To:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(Plus 4)								
Employer of Contributor	-1		•			Occupa	tion				
Employer Mailing Address/Principal Place of Business City State						Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00					

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period				
			From			То:		
			DATE				AMOUNT	
To Whom Paid			МО	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	Description of Expenditure					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
						\$	0.00	