#### **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 8100	206			Repo Filed			CA	NDI	DATE		COM	NDIDATE COMMITTEE COBSTIST					
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	CONS	STR	UCTO	DRS A	ASSI	N PAC	(CAP	AC)						
Street Address: 800 CRANBERRY WOODS DR, STE 110																		
City:	CRANBERRY T	WP						State	e:	PA			Zip Co	de: 16	5066-	5210		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2.		30 DA PRIMA		P	POST-	3.		AMENDN REPORT		Yes		lo	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5.		30 DAY POST- 6. ELECTION						TERMINATION REPORT?		Yes		lo	<b>✓</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2024	•				IG ME					PAPER		V	DIS	ETTE	
Name of Office S	ought by Candidat	te:	•					DAT	ΈO	F ELE	CTIC	N	District Number	Office Code	Pa	rty Coc	e Cou Cod	
								МО		DAY	YI	AR						
									11		5	2024		(SEE IN	STRUCT	IONS FO	R CODE:	S)
Summary of Expenditures	Receipts and	МО	DAY	YEAR		_	_	МО		DAY	ΥI	EAR	FC	R OFFI	CE USI	E ONL	′	
			11 28	3 2	023	T	<b>o</b>		12		31	2023						
	ught Forward Fron		•				\$					383.90						
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sche	dule 1	[)	\$				1,0	000.09						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				77,3	383.99						
D. Total Expend	ditures (From Sche	edule II	I)				\$					0.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$				77,3	83.99						
	Kind Contributions				le II)		\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)			\$					0.00						
				AFF	IDA\	VI٦	SE	CTI	NC									
	that this report, incl	*	_									_		f my kno	wledge	and be	elief , t	rue,
•	cribed before me this											Signature	of Perso	n Submit	ting De	nort		
	day of		_ 20									ngilature	or reiso	II Subillic	tilly Ke	рогс		
	Signatu	re					-						Prin	ted Name	•			
My Commission Ex	·		A.V.				-		•				Ema					_
Doub II If this is	MO		AY	YR		C-		-41	h = 11 .		ea Cod	ie	Daytin	ne Teleph	none Ni	umber		
	a report of a cand that to the best of med.					•				_		y provis	ions of th	e act of J	une 3,1	L937 (P	.L. 133	33,
Sworn to and subsc	ribed before me this											s	ignature (	of Candid	ate			-
	day of						•						Drints	nd Name				_
	Signature												Printe	ed Name				_
My Commission Exp	_												Ema	il				_
	МО	D	AY	YR						Area	Code		D	aytime T	elepho	ne Nun	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period					
CONSTRUCTORS ASSN PAC (CAPAC)	From:	11/28/20	<u>)23</u> To:	12/31/2023		
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor						
TOTAL for the Reporting	g 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	g 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		
All Other Contributions (Part D)			\$	1,000.00		
TOTAL for the Reporting	g Period	(3)	\$	1,000.00		
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			\$	1,000.09		

#### **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		Reporting Period						
				From: To			¯o:		
		<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 Filling Committee of Candidate			Reporting Period From: To:					
					DATE		AMOUN	т
			_				71.10011	•
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

**PAGE TOTAL \$**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	me of Filing Committee or Candidate Reporti			orting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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			Rep	orting Pe	riod				
CONSTRUCTORS ASSN PAC (CAPAC)			Fron	n:	11/28/2023 <b>T</b> o		<b>)</b> :	12/31/2023	
				D/	ATE		AMOUNT		
Full Name of Contributor Justin Fox					DAY	YEAR			
Mailing Address 3826 Saxonburg Blvd				12	24	2022	\$	1,000.00	
<b>City</b> Cheswick	<b>State</b> PA	Zip Code (Plus 15024	s 4)	12	21	2023			
Employer Name Independence Excava	ting			<b>Occupation</b> Contractor					
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Code	(Plus 4)	
3826 Saxonburg Blvd		Cheswick	(		PA		15024		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PA \$	<b>GE TOTAL</b> 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	Reporting Pe	riod	
CONSTRUCTORS ASSN PAC (CAPAC)	From:	<u>11/28/2023</u> <b>To:</b>	12/31/2023

			D	ATE		AMOUNT	
Full Name PNC Bank				DAY	YEAR		
Mailing Address PO Box 609				20	2022	\$ 0.4	09
<b>City</b> Pittsburgh	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15230	12	29	2023		
Receipt Description Interest Pay	ment						

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

**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 Per	od	
CONSTRUCTORS ASSN PAC (CAPAC)	From:	<u>11/28/2023</u> <b>To:</b>	12/31/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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 Candidat	:e		Reporting	g Period				
			From:			То:		
				DATE		AMOUNT		
Full Name of Contributor				DAY	YEAR			
Mailing Address						<b>\$</b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail			ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate			Re	porting P	Period					
					Fro	om:		To:	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	tion				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	
Enter Grand Total of Part G on Sci	nedule II, 1	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL	
Summary Page, Section 3.	<b>-,</b> -									0.00	

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	ame of Filing Committee or Candidate					Reporting Period					
	From			То:							
	DATE AMOU										
To Whom Paid	мо	DAY	YEAR								
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure						
							PAGE TOTAL				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D			<b>,</b> .			\$	0.00				