### **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		Report CANDIDA			DATE		СОМ	4ITTEE	✓	LOBE	SYIST						
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		CON	NSTE	RUCTO	ORS ASS	N PAC	(CAP	AC)							
Street Address:	1201 BANKSV	ILLE RE	)															
City:	PITTSBURGH							State:	PA			<b>Zip Code:</b> 15216						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA		POST-	3.		AMENDMENT Yes REPORT?			No	<b>~</b>		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	≣-	5. <b>X</b>	30 DA		POST-	6.		TERMINA REPORT?		Yes	No	<b>\</b>		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2000					NG METH				PAPER		$\checkmark$	DISKE	TTE		
Name of Office S	- Sought by Candidat	te:						DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County		
								МО	DAY	YE	AR		10000					
								11		7	2000		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)		
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY			
Expenditures	s from:		1 1		1	Т	0	10		23	2000							
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			57,9	906.29							
B. Total Monet	ary Contributions /	And Rec	eipts (From	Sche	dule	e I)	\$				39.57							
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			57,9	945.86							
D. Total Expend	ditures (From Sch	edule II	I)				\$			12,0	00.00							
E. Ending Cash	Balance (Subtract	Line D	From Line (	C)			\$			45,9	45.86							
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II	[)	\$				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00			1				
				AFF	IDA	٩VI	T SE	CTION										
	a Committee repo	-	_								_							
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached sch	nedule	s file	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , true		
Sworn to and subs	cribed before me this day of	;	20							S	ignature	of Perso	n Submit	ting Rep	ort			
	Signatur						- -					Prin	ted Nam	e				
My Commission Ex	_								Email									
	мо	D	AY	YR					Area Code Daytime Telephone Number									
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	nall sign here.									
I swear (or affirm) No 320) as amende		ny knowle	edge and beli	ef this	polit	tical	comm	ittee has r	s not violated any provisions of the act of June 3,1937 (P.L. 133						1333,			
Sworn to and subsc	ribed before me this								Signature of Candidate									
	day of 						_					Printe	d Name					
	Signature						-											
My Commission Exp	<del>-</del>											Ema	il					
	МО	D	AY	YR	1		-		Area	Code		Da	aytime T	elephon	e Numbe	er		

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

	ı		
Name of Filing Committee or Candidate	Reporting Period		
CONSTRUCTORS ASSN PAC (CAPAC)	From:	To:	10/23/2000
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g Period (1)	\$	39.57
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)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	0.00
		T	
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		\$	39.57

#### **PART A**

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

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

## 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		Rep	orting P	eriod			
			Fro	m:		To	<b>o</b> :	
					DATE			AMOUNT
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 Candi	Name of Filing Committee or Candidate			Period						
			From:			То:				
				DA	TE		А	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	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				Rep	orting Pe	riod				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	<b>TAL</b> 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.

Name of Filing Committee or	Candidate		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		А	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	l Summary Page	Section	4			P/	AGE TOTAL
	Juliana 1/ Butanet	. January rage,		••			\$	0.00

#### **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:	To:	10/23/2000
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	<b>\$</b>	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)	<b>\$</b>	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	ate		Reporting	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 Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	1				Re	porting	Period				
					Fro	om:		То	:		
					•		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•					Occupa	ation				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Desc	cript	ion of	f Contribution
Enter Grand Total of Part G on Sci Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed					PAGE TOTAL 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period			
CONSTRUCTORS ASSN PAC (C	CAPAC)		From			То:	10/23/2000
				DATE			AMOUNT
To Whom Paid HOUSE REPUBLICAN CAMPAIGI	N COMMITTEE		мо	DAY	YEAR		
Mailing Address PO BOX 11787				28	2000	\$	10,000.00
City HARRISBURG State Zip Code (Plus 4) PA 17108				otion of Exp			
To Whom Paid FRIENDS OF JOHN PERZEL			МО	DAY	YEAR		
Mailing Address PO BOX 826	5		9	28	2000	\$	1,000.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	1	otion of Exp			
To Whom Paid FRIENDS OF JOHN BARLEY			МО	DAY	YEAR		
Mailing Address 192 CHESTNUT GROVE ROAD			9	28	2000	\$	1,000.00
City CONESTOGA State Zip Code (Plus 4) PA 17516				otion of Exp			
	l						PAGE TOTAL

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

12,000.00