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 2013	0291			Rep File	oort		CAN	DIE	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		CITI	ΙΖΕΝ	IS FO	R JASC	ON	ORTIT	ΑY							
Street Address:	228 OSTOP R	OAD																
City:	BURGETTSTO	WN						State:		PA			Zip Cod	ie: 15	021			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		P	OST-	3.		AMENDM REPORT		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pri	E- 5	5.	30 DA		P	OST-	6.		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7. X	Year 2013					IG MET CHECK					PAPER		\checkmark	DISKE	TTE	
Name of Office S	- Sought by Candidat	te:						DATE	OI	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Count	
								МО		DAY	YE	AR	Number	Toode	REF)	couc	
									11		5	2013		(SEE IN:	STRUCTI	ONS FOR	CODES)	
	Receipts and	МО	DAY	YEAR	2			МО		DAY	YE	AR	FO	R OFFI	E USE	ONLY		
Expenditures	from:	1	1 26	2	013	T	0		12	ניו	31	2013						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	_				0.00						
B. Total Monet	ary Contributions A	And Rec	eipts (From	Sche	dule	I)	\$				1	.00.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				1	.00.00						
D. Total Expen	ditures (From Sch	edule II	I)				\$					12.48						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$					87.52]					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$				7	04.30						
G. Unpaid Debt	s And Obligations	(From S	chedule IV)			\$				1,4	23.00						
				AFF	IDA	١٧٧	T SE	CTIO	N									
PART I - If this is	s a Committee repo	ort, trea	surer sign	here.	If thi	is is	a Car	ndidate	re	port, c	andio	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached scl	hedule	s filed	d on	paper	or by ele	ectr	onic me	dium	, are to t	he best o	f my knov	wledge	and beli	ef , tru	ıe
Sworn to and subs	cribed before me this day of	ì	20						-		s	ignature	of Perso	n Submitt	ing Re	oort		
	Signatur	ra					- -		-				Prin	ted Name				_
My Commission Ex	_								-				Ema	il				-
	мо	D/	ΑΥ	YR					-	Are	a Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate sha	all s	sign he	re.							
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ef this	polit	ical	comm	ittee ha	s no	ot violat	ed an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333	s,
Sworn to and subsc	ribed before me this											Si	ignature o	of Candida	ate			-
	day of 						_						Printe	d Name				-
	Signature						-		_									_
My Commission Exp	-								_				Ema	il				
	МО	D/	λΥ	YR	ł		-			Area	Code		Da	aytime T	elephor	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	te Reporting Period						
CITIZENS FOR JASON ORTITAY	From:	11/26/20	<u>13</u> To:	12/31/2013			
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)			\$	100.00			
TOTAL for the Reporting) Period	(2)	\$	100.00			
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) Period	(4)	\$	0.00			
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			\$	100.00			

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Nume of Fining Comm	ine of Fining committee of canadate				From:		:	
					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

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 Candidate

Reporting Period

CITIZENS FOR JASON ORTITAY

From: <u>11/26/2013</u> To:

DATE

12/31/2013

AMOUNT

Full Nam	ne of Contributor DRTITAY	МО	DAY	YEAR			
Mailing Address 3000 GARDEN APARTMENT DR. APT 21							\$ 100.00
City E	City BRIDGEVILLE State PA 2ip Code (Plus 4) 15017		Zip Code (Plus 4) 15017	12	12	2013	

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

PAGE TOTAL \$ 100.00

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		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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	ame of Filing Committee or Candidate				riod				
			Fror	n:		To	o:		
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 3.			\$	PAGE 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.

Name of Filing Committee or	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
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. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i>	Section				\$	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 Per	iod	
CITIZENS FOR JASON ORTITAY	From:	<u>11/26/2013</u> To:	12/31/2013
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)	\$	704.30
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,		\$	704.30

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

	didate		Reporting	Period			
CITIZENS FOR JASON ORTITAY			From:	11/	26/2013	То:	12/31/201
				DATE			AMOUNT
Full Name of Contributor JASON ORTITAY			МО	DAY	YEAR		
Mailing Address 3000 GARDE	EN APARTMENT DR. A	PT 21	10	29	2013	\$	119.25
City BRIDGEVILLE	State PA	Zip Code (Plus 4) 15017	1				
Description of Contribution: PA	AID FOR PHOTGRAPHY	FOR CAMPAIGN LITERA	ATURE-MA	TTUCI PH	OTOGRAP	PHY	
Full Name of Contributor JASON ORTITAY			МО	DAY	YEAR		
Mailing Address 3000 GARDEN APARTMENT DR. APT 21				29	2013	\$	78.00
City BRIDGEVILLE	State PA	Zip Code (Plus 4) 15017					
Description of Contribution:	AID FOR POST OFFICE	BOX-12 MONTHS				-	
Full Name of Contributor JASON ORTITAY			МО	DAY	YEAR		
Mailing Address	EN APARTMENT DR. A	PT 21	11	7	2013	\$	78.92
3000 GARDE							
Mailing Address 3000 GARDE City BRIDGEVILLE	State PA	Zip Code (Plus 4) 15017					
City BRIDGEVILLE	PA						
City BRIDGEVILLE Description of Contribution: PA	PA	15017		DAY	YEAR		
City BRIDGEVILLE Description of Contribution: PA Full Name of Contributor JASON ORTITAY	PA	15017 WEBSITE DESIGN SER	VICES	DAY 26	YEAR 2013	\$	200.00

							PAGE	10
Full Name of Contributor JASON ORTITAY			МО	DAY	YEAR			
Mailing Address 3000 GARDEN APAR	RTMENT DR. APT 2	1	11	20	2013	\$		89.56
City BRIDGEVILLE	State	Zip Code (Plus 4)	Ī					
	PA	15017						
Description of Contribution: PAID FOR	. 2 CAMPAIGN CELL	. PHONES AND MINU	TES (BE	ST BUY AN	ND VIRO	GIN MOBIL	E)	
Full Name of Contributor JASON ORTITAY			МО	DAY	YEAR			
Mailing Address 3000 GARDEN APAR				\$		50.15		
City BRIDGEVILLE	State	Zip Code (Plus 4)						
	PA	15017						
Description of Contribution: PAID FOR	2 CAMPAIGN CELL	. PHONES AND MINU	TES (BE	ST BUY AN	ND VIRO	GIN MOBIL	E)	
Full Name of Contributor JASON ORTITAY			МО	DAY	YEAR			
Mailing Address 3000 GARDEN APAR	RTMENT DR. APT 2	1	12	28	2013	\$		88.42
City BRIDGEVILLE	State	Zip Code (Plus 4)	Ī					
	PA	15017						
Description of Contribution: WYNDHA	M GARDEN HOTEL-	PAID FOR HOTEL IN	HARRISE	BURG				
Enter Grand Total of Part F on Sched	ule II, In-Kind Co	ontributions Detail	ed Sumi	mary Pag	e,	P	AGE TOT	AL
Section 2.						\$	7	04.30

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

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

PAGE TOTAL

12.48

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
CITIZENS FOR JASON ORTITAY			From <u>11/26/2013</u> To:				<u>12/31/2013</u>		
				DATE			AMOUNT		
To Whom Paid PNC BANK			мо	DAY	YEAR				
Mailing Address			12	31	2013	\$	12.48		
City PITTSBURGH	State PA	Zip Code (Plus 4)	1	otion of Exp					

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

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
CITIZENS FOR JASON ORTITAY			From:	<u>11/26/2013</u> To:				12/31/2013	
					DATE			Outstanding Balance of Debt	
Name of Creditor CORE 3 GROUP				мо	DAY	YEAR			
Mailing Address PO BOX 15801				11	30	2013	\$	1,423.00	
City PITTSBURGH	State	Zip Code (Pl	us 4)	Description of Debt					
	PA	15244		CAMPAIGN DESIGN, LOGO CARDS			iO, B	ROCHURES, AND	
								PAGE TOTAL	
Enter Grand Total of Unpa	aid Debts on Page 1	l, Report Cover Pa	ige, Item	ı G.			\$	1,423.00	
						_			