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	80291				port ed B		CAND	IDATE		СОМ	ITTEE	✓	LOBE	SYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		CIT	TIZEN	IS FO	R JASON	ORTI	ΓΑΥ	•					
Street Address:	228 OSTOP R	OAD														
City:	BURGETTSTO	WN						State:	PA Zip Code: 15021							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	FRIDAY PRE- 2. 30 MARY PRI					POST- 3. X			AMENDM REPORT?	Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	ND FRIDAY PRE- 5. 30 LECTION EL				Y TON	POST-	6.		TERMINATION Yes REPORT?			No	~
report type)	ANNUAL REPORT	7.	Year 2014					IG METH CHECK O				PAPER / DISKET			ГТЕ	
Name of Office S	Sought by Candida	te:	•		_		DATE OF ELECTION						Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR	Number	10000	REP		
								11		4	2014		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY Y	EAR				МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	s trom:		5 6	20	014	‡ T	0	6	5	9	2014					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			1,1	197.57					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 2,075								075.00								
C. Total Funds Available (Sum Of Lines A and B)							\$			3,2	272.57					
D. Total Expenditures (From Schedule III)							\$			1,1	51.79					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			2,1	20.78					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Scho	edu	le II	Ί)	\$				10.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$			1,4	194.00			•		
			A	۱FF	ΙD	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	[f th	his is	a Can	didate r	eport, o	candi	date sig	gn here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sched	dules	file	ed on	paper o	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ıre					- -					Prin	ted Name	e		
My Commission Ex	_											Ema	il			
	мо	D	AY	YR					Are	ea Coc	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized Co	omn	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of i	ny knowle	edge and belief	this	poli	itical	commi	ittee has ı	not viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of						-					Drinto	d Name			
	Signature						-			_						
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period								
CITIZENS FOR JASON ORTITAY	From:	5/6/201	<u>4</u> To:	<u>6/9/2014</u>						
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor										
TOTAL for the Reporting) Period	(1)	\$	75.00						
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	\$	0.00								
3. Contributions Received Over \$250.00 (From Part C and Part D)										
Contributions Received From Political Committees (Part C)			\$	2,000.00						
All Other Contributions (Part D)			\$	0.00						
TOTAL for the Reporting	y Period	(3)	\$	2,000.00						
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)										
TOTAL for the Reporting	g 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			\$	2,075.00						

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu								
Name of Filing Committee or Candidate			Reporting 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 Fining Committee of Canadate			Reporting Period From: To:						
			l		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 Candidate	Reporting Period							
CITIZENS FOR JASON ORTITAY	From:	5/6/2014	То:	6/9/2014				

DATE AMOUNT

Full Name of Contributing Committee PEG PAC	МО	DAY	YEAR			
Mailing Address 201 116 PINE ST.			_			\$ 2,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17781	5	9	2014	

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

PAGE TOTAL \$ 2,000.00

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 Re				eporting Period					
			Fror	om: To:					
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupation					
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	Name of Filing Committee or Candidate			orting Period						
			From:			To:				
				D	ATE		AM	OUNT		
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			PAG	GE TOTAL		
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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							
CITIZENS FOR JASON ORTITAY	From:	<u>5/6/2014</u> To:	<u>6/9/2014</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (1)	\$	10.00					
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,		\$	10.00					

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				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				Re	Reporting Period						
				Fro	om:		То:				
						DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$	0.00		
City	State	Zip Code(Plus 4)									
Employer of Contributor					Occupation						
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
CITIZENS FOR JASON ORTITAY			From <u>5/6/2014</u> To:				6/9/2014		
				DATE	AMOUNT				
To Whom Paid AL MINOTTI			мо	DAY	YEAR				
Mailing Address			5	9	2014	\$	100.00		
ity POLAND State OH Zip Code (Plus 4)				Description of Expenditure WEBSITE SUPPORT					
To Whom Paid BEST BUY			мо	DAY	YEAR				
Mailing Address			5	9	2014	\$	128.39		
City BETHEL PARK	State PA	Zip Code (Plus 4)	Description of Expenditure KINDLE						
To Whom Paid WYNDHAM GARDEN HOTEL		·	мо	DAY	YEAR				
Mailing Address 765 EISENHO	OWER BLVD.		5	13	2014	\$	97.06		
State Zip Code (Plus 4) PA			Description of Expenditure HOTEL ROOM						
To Whom Paid USPS			мо	DAY	YEAR				
Mailing Address			5	13	2014	\$	19.99		
City MCMURRAY State Zip Code (Plus 4)			Description of Expenditure POSTAGE						

To Whom Paid USPS			МО	DAY	YEAR	
Mailing Address			5	15	2014	\$ 1.19
City MCMURRAY State Zip Code (Plus 4) PA			Descrip POSTAG	otion of Exp	enditure	

To Whom Paid USPS				DAY	YEAR				
Mailing Address				15	2014	\$	19.99		
City BRIDGEVILLE State Zip Code (Plus 4) PA 15017				Description of Expenditure POSTAGE					
To Whom Paid BEST BUY				DAY	YEAR				
Mailing Address			5	19	2014	\$	44.80		
City BETHEL PARK State PA			Description of Expenditure CELL PHONE MINUTES						
To Whom Paid VICTORYSTORE.COM			МО	DAY	YEAR				
Mailing Address				27	2014	\$	362.90		
City DAVENPORT	State IA	Zip Code (Plus 4)	Description of Expenditure DOOR HANGERS						
To Whom Paid EAT N PARK		<u> </u>	МО	DAY	YEAR				
		,	мо 5	DAY 30	YEAR 2014	\$	25.81		
EAT N PARK	State PA	Zip Code (Plus 4)	5 Descrip		2014 penditure	\$	25.81		
EAT N PARK Mailing Address		Zip Code (Plus 4)	5 Descrip	30 otion of Exp	2014 penditure	\$	25.81		
EAT N PARK Mailing Address City PITTSBURGH To Whom Paid		Zip Code (Plus 4)	5 Descrip VOLUN	30 otion of Exp TEERS MEI	2014 penditure ETING	\$	25.81 9.62		
EAT N PARK Mailing Address City PITTSBURGH To Whom Paid OFFICE DEPOT		Zip Code (Plus 4) Zip Code (Plus 4)	Description MO 5 Description	30 Day	2014 Denditure ETING YEAR 2014				
EAT N PARK Mailing Address City PITTSBURGH To Whom Paid OFFICE DEPOT Mailing Address	PA State		Description MO 5 Description	30 DAY DAY 30 Otion of Exp	2014 Denditure ETING YEAR 2014				
EAT N PARK Mailing Address City PITTSBURGH To Whom Paid OFFICE DEPOT Mailing Address City BETHEL PARK To Whom Paid	PA State		Description States of the second seco	30 DAY DAY 30 Dition of Exp BADGES	2014 Denditure ETING YEAR 2014 Denditure				

							PAGE 13			
To Whom Paid BUBBA'S GOURMET BURGER			мо	DAY	YEAR					
Mailing Address 3109 WASHINGTON PIKE			6	2	2014	\$	29.32			
City BRIDGEVILLE	BRIDGEVILLE State PA Zip Code (Plus 4) 15017				Description of Expenditure STAFF LUNCH					
To Whom Paid BOB EVANS RESTAURANT			МО	DAY	YEAR					
Mailing Address EISENHOWER BLVD.			6	6	2014	\$	23.99			
City HARRISBURG State PA Zip Code (Plus 4)				Description of Expenditure MEALS IN HARRISBURG						
To Whom Paid THE GARLIC POET			МО	DAY	YEAR					
Mailing Address 148 SHERATON DR.			6	9	2014	\$	34.62			
City NEW CUMBERLAND	State PA	Zip Code (Plus 4) 17070		otion of Exp						
To Whom Paid EZ PASS	·		МО	DAY	YEAR					
Mailing Address 7631 DERRY S	ST.		6	9	2014	\$	35.00			
City HARRISBURG	State Zip Code (Plus 4) Description of Expenditure PA 17111 TOLL CHARGE RENEWAL									
To Whom Paid BURGETTSTOWN VOLUNTEER FIRE DEPT.				DAY	YEAR					
Mailing Address 1507 MAIN ST.			6	2	2014	\$	178.47			
City BURGETTSTOWN State Zip Code (Plus 4) Description of Donation F				_						
Enter Grand Total of Expendit	ures on Page 1. Re	eport Cover Page. Item D	_				PAGE TOTAL			
The stand total of Expendit		.po. r core. r age, ricin b	•			\$	1,151.79			

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>5/6/2014</u> To:				6/9/2014	
					DATE			Outstanding Balance of Debt	
Name of Creditor JASON ORTITAY				мо	DAY	YEAR			
Mailing Address 3000 GARDEN APARTMENT DR.				2	18	2013	\$	1,429.00	
City BRIDGEVILLE	BRIDGEVILLE State PA Zip Code (Plus 4) Description of Debt LOAN TO CAMPAIGN								
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	PAGE TOTAL 1,429.00	