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 :	i on 2013	0291			Repor		CANDI	DATE		СОММ	1ITTEE	<	LOBI	BYIST	
	Committee, Candid	ate or l o	bbvist:		Filed	-	DR JASON								
	228 OSTOP R														
Street Address:	228 0310F K	UAD													
City:	BURGETTSTO	WN					State: PA Zip Code: 150						021		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D/ PRIM		POST-	3.		AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	ELECTION				AY I TION	POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL REPORT	7. X	Year 2014				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candidat	te:					DATE O	F ELEC		N	District	Office Code	Par	ty Code	County Code
							МО	DAY	YEA	AR	Number	Code	REP	,	Code
							11		4	2014		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	2		мо	DAY	YE/	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	from:	1	1 25	2	014 1	0	12	3	31	2014					
A. Amount Bro	ught Forward Fron	n Last Re	eport			\$		ļ	15,94	42.10					
B. Total Monet	ary Contributions	And Rece	eipts (Fron	1 Sche	dule I)	\$;	300.00							
C. Total Funds Available (Sum Of Lines A and B)									16,24	42.10					
D. Total Expen	ditures (From Sche	edule III)			\$;		9,69	92.08					
E. Ending Cash	Balance (Subtract	t Line D I	From Line	C)		\$			6,55	0.02					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$	5			0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	()		\$	5			0.00					
				AFF	IDAV	T SE	CTION								
	s a Committee repo	•	-					• •		-					
I swear (or affirm correct and comple) that this report, incl ete.	uding the	attached sc	hedule	s filed on	paper	or by elect	ronic me	edium, a	are to t	he best c	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20						Sig	gnature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re	·			_					Prir	ted Name	1		
My Commission E	xpires										Ema	il			
	мо	DA	Y	YR		_		Are	a Code		Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, G	Candid	late shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	dge and beli	ef this	political	comm	nittee has n	ot violat	ed any	provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me this									S	ignature	of Candida	ate		
	day of		20			_									
	C :					_					Printe	ed Name			
My Commission Exp	Signature bires										Ema	il			
	мо	DA	Y	YR	1	-		Area C	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CITIZENS FOR JASON ORTITAY From: <u>11/25/2014</u> **To:** 12/31/2014 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 300.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 300.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 300.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				orting l	Period					
				From: To:						
					DATE			AMOUNT		
Full Name of Contributing 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		

PART B 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 Candida	te		Rep	orting Pe	eriod				
CITIZENS FOR JASON ORTITAY From					rom: <u>11/25/2014</u> To: <u>12/31/</u>				
DATE								AMOUNT	
Full Name of Contributor JASON ABELA				мо	DAY	YEAR			
Mailing Address 3815 LAMP POST L	ANE						\$	100.00	
City CAMP HILL	State PA	Zip Code (Plus 4 17011)	11	26	2014			
Full Name of Contributor JASON ORTITAY				мо	DAY	YEAR			
Mailing Address 3000 GARDEN APA	RTMENT DR. APT 2	1					\$	200.00	
City BRIDGEVILLE	State PA	Zip Code (Plus 4 15017)	12	18	2014			
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								300.00	

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					
						То:		
				DA	TE		ŀ	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

PART D 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			Reporting Period					
Fr			From:			To:		
			D	ATE		AM	OUNT	
			мо	DAY	YEAR	\$	0.00	
State	Zip Code (Plu	s 4)						
•			Occupation					
ce of Business	City			State		Zip Code	(Plus 4)	
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00	
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code	

PART E **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 Period						
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•							
		_	.	_				PAGE TO	ΓAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumr	nary Page,	Section	4.			\$		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 Perio	d	
CITIZENS FOR JASON ORTITAY	From:	<u>11/25/2014</u> то:	<u>12/31/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,	F	PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period					
						То:			
					DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$ 0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor									
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution		
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	Reporting Period						
CITIZENS FOR JASON ORTITAY			From	<u>11/2</u>	<u>5/2014</u>	То:	<u>12/31/2014</u>			
				DATE			AMOUNT			
To Whom Paid			мо	DAY	YEAR					
DOUG BARTON			110							
Mailing Address 228 OSTOP RD.			11	26	2014	\$	500.00			
City BURGETTSTOWN	State	Zip Code (Plus 4)	Description of Expenditure							
	РА	15021	CAMPAIGN STAFF							
To Whom Paid FEDEX			мо	DAY	YEAR					
Mailing Address 600 VISTA PARK			11	28	2014	\$	28.57			
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	L tion of Exp	enditure					
PA 15108				POSTAGE						
To Whom Paid USPS			мо	DAY	YEAR					
Mailing Address 1936 PARK MANOR	BLVD.		11	28	2014	\$	2.03			
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I				
	РА	15108	POSTAGE							
To Whom Paid PAYPAL			мо	DAY	YEAR					
Mailing Address 2211 NORTH FIRST	ST.		11	26	2014	\$	3.20			
City SAN JOSE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1				
	СА	95131	SERVIC	E CHARGE						
To Whom Paid JEFF FOUTZ			мо	DAY	YEAR					
Mailing Address 162 COUNTRY CLU	B ROAD		12	1	2014	\$	500.00			
City WASHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1				
	РА	15301	CAMPAI	GN STAFF						
To Whom Paid BARRON CONSULTING			мо	DAY	YEAR					
Mailing Address 426 N. ARMISTEAD ST. #204			12	1	2014	\$	6,658.20			
City ALEXANDIRA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	VA	22312	САМРАІ	GN STAFF						

To Whom Paid				DAY	VEAD				
AMTRAK			мо	DAY	YEAR				
Mailing Address 1100 LIBERTY AVE.			12	1	2014	\$	330.00		
City PITTSBURGH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
	РА	15222	TRAVEL						
To Whom Paid			мо	DAY	YEAR				
PNC BANK			MO		TLAK				
Mailing Address LIBERTY AVE.			12	1	2014	\$	150.00		
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure						
PA 15222				E CHARGE					
To Whom Paid			мо	DAY	YEAR				
FED EX									
Mailing Address 600 VISTA PARK				11	2014	\$	46.50		
City PITTSBURGH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
	РА	15108	POSTAG	Ε					
To Whom Paid			мо	DAY	YEAR				
PITTSBURGH GRANT ST. GARAGE			MO	2	12/44				
Mailing Address			12	16	2014	\$	23.00		
City PITTSBURGH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
	РА	15222	PARKIN	G					
To Whom Paid			мо	DAY	YEAR				
NEW YORK PALACE			МО	DAT	TLAK				
Mailing Address 455 MADISON AVE.			12	17	2014	\$	1,450.58		
City NEW YORK State Zip Code (Plus 4)			Descript	tion of Exp	enditure				
	NY	10022	HOTEL						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL		
Enter Grand Total of Expenditures o	n rage 1, keport C	over Page, Item D.				\$	9,692.08		