### **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		CAND	IDATE		СОМ	<b>4ITTEE</b>	✓	LOBE	SYIST	
Name of Filing Committee, Candidate or Lobbyist: CITIZENS FOR JASON ORTITAY																
Street Address:	228 OSTOP R	OAD														
City:	BURGETTSTO	WN				State: PA						<b>Zip Code:</b> 15021				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY					AY ARY	POST-				IENT	Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	<u>-</u> !	5.	30 DA		POST-	6.		TERMINATION Yes REPORT?			No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2016		FILING METHO ( ) CHECK ON									<b>/</b>	DISKE	TTE
Name of Office S	- Sought by Candida	te:						DATE (	OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	County
								МО	DAY	YI	EAR		1	REP		
								13	1	8	2016		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	2			МО	DAY	Υ	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:		4 12	2	016	Т	0	Į.	5	16	2016					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			11,	764.14					
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.00					
C. Total Funds Available (Sum Of Lines A and B)							\$			11,	764.14					
D. Total Expen	ditures (From Scho	edule II	I)				\$			1,6	554.41					
E. Ending Cash	Balance (Subtract	t Line D	From Line (	C)			\$			10,1	.09.73	]				
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II	)	\$			7	784.83					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	)			\$				0.00					
				AFF	IDA	١٧٧	ΓSE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here. :	If thi	is is	a Car	ndidate r	eport,	candi	date sig	ın here.				
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached sch	nedule	s filed	d on	paper	or by elec	tronic m	nedium	, 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	i	20							9	Signature	of Perso	n Submit	ting Rep	ort	
	Signatu	**					- -					Prin	ted Name	e		
My Commission Ex	_	ie										Ema	il			
	мо	D	AY	YR					Aı	rea Co	de	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a cand	didate's	authorized	Comn	nitte	e, C	andid	ate shall	l sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not viola	ated ar	y provis	ions of th	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						_					Printa	d Name			
	Signature						-									
My Commission Exp	_											Ema	il			
	МО	D	AY	YR	l		•		Area	Code		Da	aytime 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:	<u>4/12/201</u>	<u>6</u> To:	5/16/2016
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)			\$	0.00
TOTAL for the Reporting	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	) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **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 Candidat	Reporting Period						
		1	From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address		_				\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### 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						
			Fro	m:		To	<b>)</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.

#### **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	ame of Filing Committee or Candidate			Reporting Period				
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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	2			Rep	orting Pe	riod			
				Fron	n:		To	<b>)</b> :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	<b>(4)</b>					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<b>'</b>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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:	4/12/2016 <b>To</b> :	<u>5/16/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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)	\$	784.83
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,		\$	784.83

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Car	Reporting Period							
	From: To:							
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(	0.00

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

Name of Filing Committee or Candidate	Reporting Po	eriod	
CITIZENS FOR JASON ORTITAY	From:	<u>4/12/2016</u> <b>To:</b>	<u>5/16/2016</u>

						DATE		AMOUNT
Full Name of Contributor HOUSE REPUBLICAN CAMPAIGN COM	IMITTEE				мо	DAY	YEAR	
Mailing Address P.O. BOX 11787					4	28	2016	<b>† \$</b> 784.83
City HARRISBURG	State		Zip Code(Plus	<b>1</b> )				
	PA		17108					
Employer of Contributor HRCC	<del></del>		•		Occupa	ition ()	RGANIZA	ATION
Employer Mailing Address/Principal P	ace of Business	Cit	ty	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
P.O. BOX 11787		H/	ARRISBURG	PA	171	108	DATA	AND POSTCARDS
Enter Grand Total of Part G on So	hedule II. In-K	ind	Contributions	Detaile	-d			PAGE TOTAL
Summary Page, Section 3.	ilcuule II, III K			Detaile				784.83

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P	eriod		
CITIZENS FOR JASON ORTITAY	From	4/12/2016	То:	<u>5/16/2016</u>

			DATE				AMOUNT
To Whom Paid			мо	DAY	YEAR		
USPS							
Mailing Address 1602 MAIN ST.			4	13	2016	\$	12.90
City BURGETTSTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15021	POSTAGE				
To Whom Paid			мо	DAY	YEAR		
PHOENIX FUNDRAISING			MO		ILAK		
Mailing Address 2601 NORTH FRONT ST. SUITE 101			4	15	2016	\$	500.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17110	CONSULTING				
To Whom Paid			мо	DAY	YEAR		
BARRON CONSULTING							
Mailing Address 426 NORTH ARMISTEAD ST. #204			4	18	2016	\$	641.51
City ALEXANDRIA	State	Zip Code (Plus 4)	Description of Expenditure				
	VA	22312	CONSULTING				
To Whom Paid			мо	DAY	YEAR		
HUNTING RIDGE SOCIAL COMM	1ITTE				1 = 1 1		
Mailing Address 401 MEETING HOUSE ROAD			5	11	2016	\$	100.00
City BRIDGEVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15017	DONATION				
To Whom Paid			мо	DAY	YEAR		
HOUSE REPUBLICAN CAMPAIGN COMMITTEE			МО		ILAK		
Mailing Address P.O. BOX 11787			5	13	2016	\$	400.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	DONATION				
To Whom Paid			мо	DAY	YEAR		
PNC BANK			1.10				
Mailing Address 249 FIFTH AVENUE			5	2	2016	\$	6.00
<b>City</b> PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	15222	BANK FEE				
							PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D	).			\$	1,660.41