Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification 20130291 Report Filed By:						CAND	IDATE		СОМ	ITTEE	✓	LOBE	SYIST			
Name of Filing C	Committee, Candid	ate or L	obbyist:		CIT	IZEN	IS FO	R JASON	N ORTI	ΓΑΥ			_			
Street Address:	228 OSTOP R	OAD														
City:	BURGETTSTO	WN						State:	PA			Zip Cod	le: 15	5021		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	ND FRIDAY PRE- RIMARY 2. 30 DAY POST- PRIMARY 3. X						AMENDMENT Yes No REPORT?				~		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST- 6.				TERMINATION REPORT?		No	~
report type)	ANNUAL REPORT	7.	Year 2016						METHOD HECK ONE					\checkmark	DISKE	ГТЕ
Name of Office S	Sought by Candida	te:						DATE (OF ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
	,							МО	DAY	YE	AR	Number	code	REP		code
								11	L	8	2016		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	irom:		4 12	20	016	T	0	Ī	5	16	2016					
A. Amount Bro	ught Forward Fro	n Last R	eport				\$			11,7	764.14					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.0									0.00							
C. Total Funds Available (Sum Of Lines A and B)									11,7	764.14						
D. Total Expenditures (From Schedule III) \$ 1,654.41																
E. Ending Cash	. Ending Cash Balance (Subtract Line D From Line C) \$ 10,109.73							09.73								
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	le II	I)	\$			7	84.83					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00					
			P	٩FF	IDA	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	[f th	nis is	a Can	didate r	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and complete) that this report, inc ete.	luding the	attached sched	dules	file	d on	paper (or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me this	5	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ro					- -					Prin	ted Name	e		
My Commission Ex	_											Emai	il			
	МО	D	AY	YR			_		Ar	ea Cod	le	Daytim	e Telepi	none Nui	mber	
Part II- If this is	a report of a can	didate's	authorized Co	omm	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief	this	polit	itical	commi	ittee has	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						-					D»:+-	d Name			
	Signature						-					Frinte	d Name			
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:	<u>4/12/201</u>	<u>6</u> To:	<u>5/16/2016</u>		
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	J 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

	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 Filing Committee of Candidate				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 Repo				Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Scho	edule 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 Re			Rep	Reporting Period					
):			
				D	ATE		AMOUNT		
Full Name of Contributor					DAY	YEAR			
Mailing Address							\$	0.00	
City State Zip Code (Plus 4)									
Employer Name				Occupa	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PA(GE 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	bd			
			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 Perio	d								
CITIZENS FOR JASON ORTITAY	From:	4/12/2016 To :	<u>5/16/2016</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Candidate				Reporting Period					
	From:			To:					
				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 Sun	nmary Pag	je,		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 P	Period	
CITIZENS FOR JASON ORTITAY	From:	<u>4/12/2016</u> To:	<u>5/16/2016</u>

						DATE			AMOUNT
Full Name of Contributor HOUSE REPUBLICAN CAMPAIGN COMMITTEE						DAY	YEAR		
Mailing Address P.O. BOX 11787								\$	784.83
City HARRISBURG	State		Zip Code(Plus 4) 17108		4	28	2016		
TW WILLIAMS	PA								
Employer of Contributor HR	СС		•		Occupation ORGANIZATION				
Employer Mailing Address/Princ Business	ipal Place of	City		State	Zip 4)	Zip Code(Plus Description of Contribu			Contribution
P.O. BOX 11787		HARRI	SBURG	PA	17	108	DATA /	AND POS	STCARDS
Enter Grand Total of Part G	on Schedule II	In-Kind	Contribu	tions Deta	iled				PAGE TOTAL
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detail Summary Page, Section 3.									784.83

SCHEDULE III STATEMENT OF EXPENDITURES

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

			DATE			AMOUNT	AMOUNT
To Whom Paid USPS			мо	DAY	YEAR		
Mailing Address 1602 MAIN ST.			4	13	2016	\$	12.90
City BURGETTSTOWN	State PA	Zip Code (Plus 4) 15021	Description of Expenditure POSTAGE				
To Whom Paid PHOENIX FUNDRAISING			МО	DAY	YEAR		
Mailing Address 2601 NORTH FRONT ST. SUITE 101			4	15	2016	\$	500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure CONSULTING				
To Whom Paid BARRON CONSULTING			МО	DAY	YEAR		
Mailing Address 426 NORTH ARMISTEAD ST. #204			4	18	2016	\$	641.51
City ALEXANDRIA	State VA	Zip Code (Plus 4) 22312	Description of Expenditure CONSULTING				
To Whom Paid HUNTING RIDGE SOCIAL COMMITTE			МО	DAY	YEAR		
Mailing Address 401 MEETING HOUSE ROAD			5	11	2016	\$	100.00
City BRIDGEVILLE	State PA	Zip Code (Plus 4) 15017	Description of Expenditure DONATION				
To Whom Paid HOUSE REPUBLICAN CAMPAIGN COMMITTEE			МО	DAY	YEAR		
Mailing Address P.O. BOX 11787			5	13	2016	\$	400.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DONATION				

							PAGE 12
To Whom Paid PNC BANK			мо	DAY	YEAR		
Mailing Address 249 FIFTH AVENUE			5	2	2016	\$	6.00
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15222	BANK F				
	<u>'</u>	-					PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	eport Cover Page, Item D.	•			\$	1,660.41