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 Filed I		CANDI	DATE		СОМІ	MITTEE	<	LOBE	BYIST	
	Committee, Candid	ate or Lo	obbyist:			-	R JASON	ORTIT	AY						
Street Address: 228 OSTOP ROAD															
City:	BURGETTSTO	WN					State:	PA			Zip Co	de: 15	021		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					AY I ARY				AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY I TION	POST- 6.			TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2018				NG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR			REP		
							11		6	2018		(SEE INS	STRUCTIO	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	Y	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		5 1	. 2	018 1	0	6		4	2018					
A. Amount Bro	ught Forward Fror	n Last R	eport			\$			8,5	539.60					
B. Total Monet	ary Contributions	And Rec	eipts (Fror	n Sche	dule I)	\$	\$ 2,349.60								
C. Total Funds Available (Sum Of Lines A and B)									10,8	389.20					
D. Total Expen	ditures (From Sch	edule II	I)			\$			2,7	21.30					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			8,1	67.90					
F. Value Of In-	Kind Contributions	s Receive	ed (From S	Schedu	le II)	\$				0.00	-				
G. Unpaid Deb	ts And Obligations	(From S	Schedule I	/)		\$				0.00					
				AFF	IDAVI	T SE	CTION								
	s a Committee rep	•	-					•			-				
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached so	hedule	s filed on	paper	or by elect	ronic me	edium	, are to	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20						S	ignatur	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prir	ted Name	1		
My Commission E	xpires					_					Ema	il			
	мо	D/	AY	YR				Are	ea Cod	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cano	didate's	authorized	l Comn	nittee, G	Candid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of n ed.	ny knowle	edge and bel	ief this	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of Ju	ıne 3,19	937 (P.L	. 1333,
Sworn to and subso	ribed before me this day of		20							S	ignature	of Candida	ite		
						_					Printe	ed Name			
My Commission Exp	Signature bires					-					Ema	il			
	мо	D/	AY	YR	1	-		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	ling Committee or Candidate Reporting Period							
CITIZENS FOR JASON ORTITAY	From:	<u>5/1/201</u>	<u>8</u> To:	<u>6/4/2018</u>				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	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)			\$	250.00				
All Other Contributions (Part B)	\$	0.00						
TOTAL for the Reporting	\$	250.00						
3. Contributions Received Over \$250.00 (From Part C and Part D)								
Contributions Received From Political Committees (Part C)			\$	1,000.00				
All Other Contributions (Part D)			\$	1,000.00				
TOTAL for the Reporting	J Period	(3)	\$	2,000.00				
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)								
TOTAL for the Reporting	J Period	(4)	\$	99.60				
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			\$	2,349.60				

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 Rep			Reporting	Reporting Period					
CITIZENS FOR JASON ORTITAY Fro			From:	5/1/20	:	<u>6/4/2018</u>			
		·		DATE			AMOUNT		
Full Name of Contributing Commit CERTIFIED PUBLIC ACCOUNTANT			мо	DAY	YEAR				
Mailing Address 500 NORTH	THIRD STREET					\$	250.00		
City HARRISBURG	State PA	Zip Code (Plus 4 17101	•) 5	25	2018				
						Г	PAGE TOTAL		

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

250.00

\$

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 Candidat	e		Rep Fro	oorting P m:	eriod	То):	
					DATE			AMOUNT
Full Name of Contributor				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 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 Re			Reporting Period						
CITIZENS FOR JASON ORTITAY			From:	<u>5/</u>	1/2018		<u>6/4/2018</u>		
				DA	TE	Α	AMOUNT		
Full Name of Contributing Co DTE ENERGY COMPANY PAC				мо	DAY	YEAR			
Mailing Address 1 ENERGY	(PLAZA						\$	1,000.00	
City DETROIT	State MI	Zip Cod 48226	e (Plus 4)	5	8	2018			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							\$	PAGE TOTAL 1,000.00	

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			Rep	orting Period					
CITIZENS FOR JASON ORTITAY			Fron	n:	<u>5/1/2</u>	<u>018</u> То	To: <u>6/4/2018</u>		
				DA	ATE		AMOUNT		
Full Name of Contributor CHARLES JOHNS				мо	DAY	YEAR			
Mailing 400 WHITE OAKS BLV Address	/D.			5			\$ 500.00		
City BRIDGEPORT	State WV	,			4	2018			
Employer Name STEPTOE & amp; JOHNSON			Occupation ATTORNEY						
Employer Mailing Address/Principal Place of City		City			State		Zip Code (Plus 4)		
PO BOX 1588		CHARLES	STON		wv				
Full Name of Contributor ELIZABETH COWDEN				мо	DAY	YEAR			
Mailing Address 158 CIAFFONI ROAD							\$ 500.00		
City CANONSBURG	State PA	Zip Code (Plus	s 4)	5	4	2018			
Employer Name RETIRED				Occupat	t ion F	RETIRED)		
Employer Mailing Address/Principal Plac Business	e of	City		I	State		Zip Code (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Secti			Sactio	n 3			PAGE TOTAL		
		aminary Faye,	Jeun	/ii J.			\$ 1,000.00		

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 Rep			Report	Reporting Period					
CITIZENS FOR JASON ORTITAY From:				<u>5/1/201</u>	<u>8</u> To:	<u>6/4/2018</u>			
				D	ATE			AMOUNT	
Full Name DAVE REED FOR CONGRESS				мо	DAY	YEAR			
Mailing Address 550 PHILADELPHIA STREET							\$	99.60	
City INDIANA	State PA	Zip Code (15701	Plus 4)	5	4	2018	3		
Receipt Description REFUI	Receipt Description REFUND OF DONATION								
Enter Grand Total of Part E or	Schedule I. Detailed	Summary Page	Section	4.				PAGE TOTAL	
							\$	99.60	

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>5/1/2018</u> то:	<u>6/4/2018</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 Re			Reporting Period					
F						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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$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)						
Employer of Contributor			1		Occupation					
Employer Mailing Address/Principal Place of City State Business			Zip 4)	Code(Plus	Descri	ption of	Contribution			
Enter Grand Total of Part G	Con Schedule II	In-Kind	Contributions	Dota	iled				PAGE TOTAL	

Enter Grand Total of Part G on Schedule II, In-Ki Summary Page, Section 3.	d Contributions Detailed	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	Reporting Period					
CITIZENS FOR JASON ORTITAY			From	<u>5/</u>	<u>1/2018</u>	То:	<u>6/4/2018</u>		
				DATE			AMOUNT		
To Whom Paid PHOENIX FUNDRAISING PARTNERS			мо	DAY	YEAR				
Mailing Address 2601 NORTH FRONT	STREET		5	8	2018	\$	500.00		
City HARRISBURG State Zip Code (Plus 4) PA 17110				Description of Expenditure CONSULTING FEE					
To Whom Paid PNC BANK				DAY	YEAR				
Mailing Address 3850 WASHINGTON ROAD			5	8	2018	\$	1.50		
City MCMURRAY	Descrip BANK F	tion of Exp	penditure	3					
To Whom Paid RICK SACCONE FOR CONGRESS			мо	DAY	YEAR				
Mailing Address 135 TECHNOLOGY E	DRIVE		5	9	2018	\$	995.00		
City CANONSBURG	State PA	Zip Code (Plus 4) 15317	Descrip DONAT	ition of Ex ION	penditure	2			
To Whom Paid WASHINGTON COUNTY COUNCIL OF RE	EPUBLICAN WOMEN		мо	DAY	YEAR				
Mailing Address 75 EAST MAIDEN ST	TREET SUITE 100		5	14	2018	\$	500.00		
City WASHINGTON	State PA	Zip Code (Plus 4) 15301	Descrip DONAT	otion of Exp ION	penditure	2			
To Whom Paid FACEBOOK			мо	DAY	YEAR				
Mailing Address 1 HACKER WAY			5	15	2018	\$	100.00		
City MENLO PARK	State CA	Zip Code (Plus 4) 94025	Descrip ADVER	otion of Exp TISING	penditure				

To Whom Paid BARRON CONSULTING			мо	DAY	YEAR		
Mailing Address 426 NORTH ARMISTEAD STREET			5	22	2018	\$	604.80
City ALEXANDRIA	State VA	Zip Code (Plus 4) 22312	Description of Expenditure CONSULTING				
To Whom Paid FACEBOOK			мо	DAY	YEAR		
Mailing Address 1 HACKER WAY			6	1	2018	\$	20.00
City MENLO PARK	State CA	Zip Code (Plus 4) 94025	Description of Expenditure ADVERTISING				
Enter Grand Total of Expon	lituros on Pago 1. Po	nort Cover Page Item D	-				PAGE TOTAL
Enter Grand Total of Expend	ntures on Page 1, Re	port cover Page, Item D	•			\$	2,721.30