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			Repo Filed		CANDI	DATE		COM	MITTEE	✓	LOBI	BYIST		
	Committee, Candid	ate or Lo	bbyist:			-	DR JASON	I ORTIT	AY							
Street Address:	228 OSTOP R		-		_	_		-								
City:	BURGETTSTO	WN					State:	PA			Zip Co	de: 15	021			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	3. X		AMENDI REPORT		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D ELEC	AY CTION	POST-	6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2020				FILING METHOD () CHECK ONE				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candidat	te:					DATE C	OF ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
							мо	DAY	YE	AR		REP				
		1					11		3	2020		(SEE IN	STRUCTI	ONS FOR (CODES)	
Summary of Expenditures	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
			5 19	2	020	ТО	6	5 2	22	2020						
A. Amount Bro	ught Forward Fron	n Last Re	eport			\$	5		10,7	49.63						
B. Total Monet	ary Contributions	And Rece	eipts (Fron	1 Sche	dule I)		\$		7	36.70						
C. Total Funds	Available (Sum Of	Lines A	and B)			5	\$		11,4	87.33						
D. Total Expen	ditures (From Sche	edule III)				\$			9.65						
E. Ending Cash	Balance (Subtract	t Line D I	rom Line	C)			5		11,47	77.68						
F. Value Of In-	Kind Contributions	Receive	d (From S	chedu	le II)		5			0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		9	\$			0.00						
				AFF	IDAV	IT SI	ECTION									
	s a Committee repo	•	-					• •		_						
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedule	s filed or	ı papeı	or by elect	tronic me	edium,	are to t	the best o	of my know	vledge	and beli	ef , true	
Sworn to and subs	cribed before me this day of	;	20						Si	gnature	e of Perso	on Submitt	ing Rep	oort		
	Signatu	re				_					Prir	ited Name	I			
My Commission E	xpires					_					Ema	il				
	мо	DA	Y	YR				Are	a Code	2	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee,	Candio	date shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	dge and beli	ef this	politica	l comr	nittee has r	not 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 day of		20							s	ignature	of Candida	ate			
			20								Printe	ed Name				
	Signature										Ema	, il				
My Commission Exp	bires										Ema					
	мо	DA	Y	YR	1			Area (Code		D	aytime To	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>5/19/2020</u> To: 6/22/2020 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)** 0.00 All Other Contributions (Part B) \$ **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)** 600.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 600.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 136.70 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 736.70 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				Reporting Period					
				From: To:			1		
		·			DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	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 Candidate Reporting Period					eriod				
			Fror	From: To:					
					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	

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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	CITIZENS FOR JASON ORTITAY			<u>5/1</u>	9/2020	То:	<u>6</u>	<u>5/22/2020</u>	
				DATE			AMOUNT		
Full Name of Contributing Committee BUCHANAN INGERSOL AND ROONEY COMMITTEE FOR EFFECTIVE STATE GOV.				мо	DAY	YEAR	\$	300.00	
Mailing Address 501 GRANT STREET				6	6	2020			
City PITTSBURGH	State	Zip Cod	e (Plus 4)						
	PA	15219							
Full Name of Contributing Committee				мо	DAY	YEAR			
K&L GATES LLP				-			\$	300.00	
Mailing Address 210 SIXTH AVENUE				6	6	2020			
City PITTSBURGH	State	Zip Cod	e (Plus 4)		-				
	РА	15222							
							PAGE TOTAL		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							\$	600.00	

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					
			Froi	n:		Т):		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							PAGE TOTAL \$ 0.00		

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			Report	eporting Period					
CITIZENS FOR JASON ORTITAY			From: <u>5/19/2020</u>			<u>:0</u> To:	o: <u>6/22/2020</u>		
				D	ATE			AMOUNT	
Full Name PITTSBURGH PENGUINS				мо	DAY	YEAR	\$	136.70	
Mailing Address 1001 FIFTH AVENUE				6	18	2020	_		
City PITTSBURGH	State	Zip Code (Plus 4)		10				
	РА	15219							
Receipt Description REFUND FOR CA	NCELED TICKETS/DC	NATION			1	•			
		_				ĺ		PAGE TOTAL	
Enter Grand Total of Part E on Schedu	ile I, Detailed Sumr	nary Page,	Section	4.			\$	136.70	

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>5/19/2020</u> To:	<u>6/22/2020</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR										
TOTAL for the Reporting Pe	riod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)									
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	orting Period					
			From:			То:			
				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address] \$	0.0)0	
City	State	Zip Code (Plus 4)							
Description of Contribution:									
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL		
						\$	0.0	0	

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period					
				m:		То:				
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor		•		Occupa	ation					
Employer Mailing Address/Principal Place of Business		City	State	e Zip	Zip Code(Plus 4)		Description of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
CITIZENS FOR JASON ORTITAY			From <u>5/19/2020</u>			То:	<u>6/22/2020</u>		
				DATE AMOUNT					
To Whom Paid USPS				DAY	YEAR				
Mailing Address 1620 SMITH TOWNSHIP STATE ROAD			5	21	2020	\$	7.85		
City ATLASBURG State Zip Code (Plus 4)				tion of Exp	enditure				
	PA	15004	POSTAGE						
To Whom Paid USPS			мо	DAY	YEAR				
Mailing Address 1620 SMITH TOWNS	HIP STATE ROAD		5	22	2020	\$	1.80		
City ATLASBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	15004	POSTAC	GE					
							PAGE TOTAL		
Enter Grand Total of Expenditures of	on Page 1, keport C	over Page, Item L).			\$	9.65		