# **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 :	ion 2	20130291			Repo Filed		CANDI	DATE	СОМ	MITTEE	✓	LOB	BYIST			
Name of Filing C	Committee, Ca	ndidate o	r Lobbyis	t:		-	R JASON	ORTITA	.Y							
Street Address:	228 OST(	OP ROAD														
City:	BURGETT	STOWN					State:	PA		Zip Co	<b>Zip Code:</b> 15021					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND F PRIMA	RIDAY PRE Ary	Ξ- 2.	30 DA PRIM		POST- 3		AMENDI REPORT		Yes	No	$\checkmark$		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND F ELECT	RIDAY PR TON	.E- 5.	30 D/ ELEC		POST- 6		TERMIN REPORT		Yes	No	$\checkmark$		
report type)	ANNUAL REP	<b>ORT</b> 7. X	Year	2022			NG METHO CHECK O			PAPER		$\checkmark$	DISKE	TTE		
Name of Office S	- Sought by Can	didate:	·		-		DATE O	F ELEC	TION	District Number		Par	ty Code	County Code		
							мо	DAY	YEAR			REP				
		и Мо	DA	Y YEAI	D		11 MO	E DAY	3 2022 YEAR	<u> </u>				ODES)		
Summary of Expenditures		d <sup>mo</sup>				то						.E USE	UNLY			
A. Amount Bro		Errorm Loo	11 • Benert	29 2	2022		12									
B. Total Monet	-			From Sche	edule I)	\$			39,970.67 600.00	-						
C. Total Funds	Available (Su	m Of Line	s A and B	;)		\$		2	40,570.67							
D. Total Expen	ditures (From	Schedule	III)			\$			1,344.32	-						
E. Ending Cash	Balance (Sub	tract Line	D From	Line C)		\$		3	9,226.35							
F. Value Of In-	Kind Contribu	tions Rec	eived (Fr	om Schedu	ule II)	\$			0.00							
G. Unpaid Deb	ts And Obligat	ions (Fro	m Schedu	ıle IV)		\$			0.00							
				AF	FIDAV	IT SE	CTION									
PART I - If this is	s a Committee	report, t	reasurer	sign here.	If this	is a Cai	ndidate re	eport, ca	ndidate si	gn here.						
I swear (or affirm correct and compl		t, including	the attach	ed schedule	es filed o	n paper	or by elect	ronic med	lium, are to	the best o	of my knov	wledge	and beli	ef , true		
Sworn to and subs	cribed before m day of	e this	20						Signatur	e of Perso	on Submitt	ting Rep	oort			
	Sig	nature								Prir	nted Name	•				
My Commission E	xpires									Ema	ail					
	мо		DAY	YR	2			Area	Code	Daytin	ne Teleph	one Nu	mber			
Part II- If this is	a report of a	candidate	e's autho	rized Com	mittee,	Candid	ate shall	sign her	e.							
I swear (or affirm) No 320) as amendo		t of my kno	owledge an	d belief this	s politica	l comm	ittee has n	ot violate	d any provi	sions of th	e act of Ju	une 3,1	937 (P.L	. 1333,		
Sworn to and subso		this							5	Signature	of Candida	ate		—		
	day of		20			_				Print	ed Name					
	. Signat	ture				_				Ema						
My Commission Exp	bires									Ema	ani					
	мс	)	DAY	YI	R	_		Area Co	ode	D	aytime To	elephor	e Numb	er		

# SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CITIZENS FOR JASON ORTITAY	From:	<u>11/29/20</u> 2	<u>22</u> <b>To:</b>	<u>12/31/2022</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)	\$	100.00		
TOTAL for the Reporting	(2)	\$	100.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	500.00
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			\$	600.00

## 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 Candidate				Reporting Period					
					From: To:				
		·			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	

PAGE 3

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									
CITIZENS FOR JASON ORTITAY			From: <u>11/29/2022</u>			2 <u>022</u> To	<b>i</b> : <u>12/31/2022</u>		
					DATE			AMOUNT	
Full Name of Contributor CATHERINE PHILLISTINE				мо	DAY	YEAR			
Mailing Address 127 CHERRYTREE	ROAD						\$	100.00	
City CARNEGIE	State	Zip Code (Plus 4	)	12	10	2022			
	PA	15106							
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								100.00	

#### PAGE 5

# 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	From:	<u>11/29/2022</u> <b>To:</b>			<u>12/31/2022</u>			
				DA	TE		Α	MOUNT
Full Name of Contributing Committee PA TRUCK PAC				мо	DAY	YEAR	\$	500.00
Mailing Address 910 LINDA LANE				12	10	2022		500100
City CAMP HILL	<b>State</b> PA	<b>Zip Cod</b> 17011	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary P	age, Sectio	n 3.			\$	500.00

## 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				
From					From:			
				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 Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	<b>AGE TOTAL</b> 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	Name of Filing Committee or Candidate			Reporting Period						
				From: To:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$	0.0	00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description	·									
		_	<b>.</b>					PAGE TOTAL		
Enter Grand Total of Part E on Schedu	lie 1, Detailed Sumn	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	od	
CITIZENS FOR JASON ORTITAY	From:	<u>11/29/2022</u> <b>To:</b>	<u>12/31/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	2	
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)	\$	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 R			Reporting Period					
F			From:			То:		
				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:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		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		•		Occupa	ation			
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 Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

Name	e of Filing Committee or Candidate			Reporti	ng Period					
CITIZ	ZENS FOR JASON ORTITAY			From	<u>11/29</u>	<u>9/2022</u>	То:	<u>12/31/2022</u>		
					DATE			AMOUNT		
	om Paid			мо	DAY	YEAR				
RCAC										
Mailin	g Address 100 FLEET STREET	SUITE 205		12	2	2022	\$	25.00		
City	PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure						
		РА	15220	DONAT	ION					
To Wh	oom Paid			мо	DAY	YEAR				
USPS				-						
Mailing Address 1620 SMITH TOWNSHIP STATE ROAD				12	2	2022	\$	13.92		
City ATLASBURG State Zip Code (Plus 4)				Description of Expenditure						
PA 15004				STAMPS	5					
To Whom Paid				мо	DAY	YEAR				
USPS				MO		TEAR				
Mailin	g Address 1620 SMITH TOWNS	SHIP STATE ROAD		12	9	2022	\$	60.00		
City	ATLASBURG	State	Zip Code (Plus 4)	Description of Expenditure						
		РА	15004	STAMPS						
To Wh	iom Paid			мо	DAY	YEAR				
LOSCI	H FRAMING			110						
Mailin	g Address 176 ZEIGLER ROAD	PO BOX 249		12	13	2022	\$	1,208.40		
City	THOMPSONTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		РА	17094	FRAMIN	G					
To Wh	om Paid					VEAD				
FOAC	ILLEA			мо	DAY	YEAR				
Mailin	g Address 1316 LINDBERGH A	VE		12	30	2022	\$	37.00		
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1			
PA 15223				DONAT	ION					
								PAGE TOTAL		
Enter	Grand Total of Expenditures of	on Page 1, Report C	Cover Page, Item I	).			\$	1,344.32		