

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>			
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST JASON E. SALUS								
STREET ADDRESS 2059 WISTERIA LANE								
CITY LAFAYETTE HILL		STATE PA	ZIP CODE 19444					
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION			
	MONTGOMERY CO. TREASURER			DEM	MO.	DAY	YEAR	
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY				
2ND FRIDAY PRE-PRIMARY	2.	MO.	DAY	YEAR	MO.		DAY	YEAR
30 DAY POST-PRIMARY	3.	10	22	13	TO	11	25	13
6TH TUESDAY PRE-ELECTION	4.	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>-0-</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>1500.00</u>						
2ND FRIDAY PRE-ELECTION	5.							
30 DAY POST-ELECTION	6. <input checked="" type="checkbox"/>	AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>		
ANNUAL REPORT	7.	TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>		

RECEIVED  
 2013 DEC -4 PM 3:  
 OFFICE OF  
 VOTER SERVICES  
 MONTG. CO. PA

**AFFIDAVIT SECTION**

**PART I -**

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 If statement is filed on behalf of a Candidate, the Candidate must sign here.  
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 20th DAY OF December 2013

SIGNATURE OF PERSON SUBMITTING REPORT  
 JASON E. SALUS

PRINTED NAME  
 JASON E. SALUS

DAYTIME TELEPHONE NUMBER  
 626-8040

NOTARIAL SEAL  
 Dawn L. Schottenberger - Notary Public  
 Collegeville Boro., Montgomery County  
 MY COMMISSION EXPIRES MAR. 22, 2015

**PART II -**

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

SIGNATURE OF CANDIDATE  
 \_\_\_\_\_

PRINTED NAME  
 \_\_\_\_\_

DAYTIME TELEPHONE NUMBER  
 \_\_\_\_\_

AREA CODE  
 \_\_\_\_\_

MY COMMISSION EXPIRES \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YR.