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.

<table>
<thead>
<tr>
<th>FILER IDENTIFICATION NUMBER</th>
<th>REPORT FILED ON BEHALF OF</th>
<th>CANDIDATE</th>
<th>COMMITTEE</th>
<th>LOBBYIST</th>
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<td>20140409</td>
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</tbody>
</table>

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)

1. 6TH TUESDAY PRE-PRIMARY

2. 2ND FRIDAY PRE-PRIMARY

3. 30 DAY POST-PRIMARY

4. 6TH TUESDAY PRE-ELECTION

5. 2ND FRIDAY PRE-ELECTION

6. 30 DAY POST-ELECTION

7. ANNUAL REPORT

NAME OF OFFICE SOUGHT BY CANDIDATE

Montgomery County Treasurer

DISTRICT NO.

DEM

PARTY

5 21 2019

DATE OF ELECTION

FOR OFFICE USE ONLY

DATES OF REPORTING PERIOD

MO. 1 1 19

DAY 1

YEAR 19

TO

MO. 5 4 19

DAY 1

YEAR 19

CASH BALANCE AT END OF REPORTING PERIOD:

$ 0

TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:

$ 0

AMENDMENT REPORT?

YES

NO

TERMINATION REPORT?

YES

NO

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 SWORE (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 9th Day of MAY 2019

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL

My Commission Expires September 7, 2021

JASON E. SALUS

SIGNATURE OF PERSON SUBMITTING REPORT

JASON E. SALUS

PRINTED NAME

626-8040

AREA CODE

DAYTIME TELEPHONE NUMBER

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

I SWORE (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

AREA CODE

DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation
210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

DSEP-503 (12-99)