

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 ²	LOBBYIST ³																		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST JASON E. SALUS																							
STREET ADDRESS 210 MAPLE STREET																							
CITY CONSHOHOCKEN		STATE PA	ZIP CODE 19428 -1850																				
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY <input checked="" type="checkbox"/> 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. AL	PARTY DEM																			
	DATES OF REPORTING PERIOD <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>3</td><td>11</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>6</td><td>6</td><td>11</td></tr> </table>		MO.	DAY	YEAR	5	3	11	MO.	DAY	YEAR	6	6	11	DATE OF ELECTION <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>17</td><td>11</td></tr> </table>			MO.	DAY	YEAR	5	17	11
	MO.	DAY	YEAR																				
	5	3	11																				
	MO.	DAY	YEAR																				
	6	6	11																				
	MO.	DAY	YEAR																				
5	17	11																					
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>-0-</u>		FOR OFFICE USE ONLY RECEIVED 2011 JUN 17 A 10:54 VOTER SERVICES MONTGOMERY CO PA																					
AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																							
TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																							
<input checked="" type="checkbox"/>																							
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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
 15th DAY OF June 2011
 Dawn L. Schollenberger
 COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Dawn L. Schollenberger - Notary Public
 Collegeville, Pa., Montgomery County
 MY COMMISSION EXPIRES MAR. 22, 2015

SIGNATURE OF PERSON SUBMITTING REPORT
 Jason E. Salus
 PRINTED NAME
 JASON E. SALUS
 AREA CODE 267 DAYTIME TELEPHONE NUMBER 626-8040

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
 MY COMMISSION EXPIRES _____ MO. DAY YR.

SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE _____ DAYTIME TELEPHONE NUMBER _____