

# CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE <sup>1.</sup> <input type="checkbox"/>		COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>		LOBBYIST <sup>3.</sup> <input type="checkbox"/>	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JASON SAWS									
Street Address: 2059 WISTERIA LANE									
City: LAFAYETTE HILL				State: PA		Zip Code: 19444 -			
TYPE OF REPORT  (place X to the right of report type)	TUESDAY PRE-PRIMARY <sup>1.</sup> <input type="checkbox"/>		FRIDAY PRE-PRIMARY <sup>2.</sup> <input type="checkbox"/>		30 DAY POST PRIMARY <sup>3.</sup> <input checked="" type="checkbox"/>		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>		
	TUESDAY PRE-ELECTION <sup>4.</sup> <input type="checkbox"/>		FRIDAY PRE-ELECTION <sup>5.</sup> <input type="checkbox"/>		30 DAY POST-ELECTION <sup>6.</sup> <input type="checkbox"/>		TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>		
	ANNUAL REPORT <sup>7.</sup> <input type="checkbox"/>		YEAR <input type="checkbox"/>		FILING METHOD ( ) CHECK ONE <input type="checkbox"/>		PAPER <input type="checkbox"/>		DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: MONTGOMERY COUNTY TREASURER			DATE OF ELECTION MO. DAY YEAR 5 21 2013			District Number AL	Office Code	Party Code DEM	County Code
(SEE INSTRUCTIONS FOR CODES)									

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
	5	7	2013		6	10	2013
A. Amount Brought Forward From Last Report	\$ 28,120.05						
B. Total Monetary Contributions and Receipts (From Schedule II)	\$ 8,725.00						
C. Total Funds Available (Sum of Lines A and B)	\$ 36,845.05						
D. Total Expenditures (From Schedule III)	\$ 231.95						
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 36,613.10						
F. Value of In-Kind Contributions Received (From Schedule II)	\$ -0-						
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 6,115.55						

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OFFICE OF  
NOTES SERVICES  
MONTG. CO. PA

### AFFIDAVIT SECTION

**PART I** - If this is a committee report, treasury sign here. If this is a candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 18th day of June, 2013

*[Signature]*  
Signature of Person Submitting Report  
Robert H. M'Guckin

*[Signature]*  
Signature  
Dawn L. Schollenberger-Notary Public

My commission expires 3/22/2015 MO. DAY YEAR

Area Code 610 Daytime Telephone Number 489-0700

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

**PART II** - If this is a report of a Candidate's Authorized Committee, candidate shall 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 18th day of June, 2013

*[Signature]*  
Signature of Candidate  
Jason E. Saws

*[Signature]*  
Signature  
Dawn L. Schollenberger-Notary Public

My commission expires 3/22/2015 MO. DAY YEAR

Area Code 7 Daytime Telephone Number 626-8090

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

**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate <b>FRIENDS OF JASON SAWS</b>	Reporting Period From <b>5/7/2013</b> To <b>6/10/13</b>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <b>75.00</b>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <b>450.00</b>
All Other Contributions (Part B)	\$ <b>1,700.00</b>
TOTAL for the Reporting Period (2)	\$ <b>2,150.00</b>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <b>5,000.00</b>
All Other Contributions (Part D)	\$ <b>1,500.00</b>
TOTAL for the Reporting Period (3)	\$ <b>6,500.00</b>

4. OTHER RECEIPTS * REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$ <b>- 0 -</b>

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ <b>8,725.00</b>
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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 <u>FRIENDS OF JASON SALUS</u>	Reporting Period From <u>5/7/13</u> To <u>6/10/13</u>
--	--

				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee <u>SEE ATTACHED</u>							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$

Committee Name	Address	City	State	ZIP	Date	Amount
Friends of Dan Clifford	One Montgomery Plaza					
	425 Swede Street, Suite 1001	Norristown	PA	19401	5/24/2013	250.00
Friends of Moon Ahn	142 E. Main Street	Lansdale	PA	19446-2519	5/29/2013	100.00
Teamsters Local Union 77 PAC	540 Pennsylvania Avenue	Ft. Washington	PA	19034	6/6/2013	100.00
					<b>Total</b>	<b><u>\$450.00</u></b>

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# 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 <b>FRIENDS OF JASON SALUS</b>	Reporting Period From <b>5/7/13</b> To <b>6/10/13</b>
--	--

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<b>SEE ATTACHED</b>				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

PAGE TOTAL	\$
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Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

All Others \$50 to \$250

Friends of Jason Salus

Name	Address	City	State	ZIP	Date	Amount
Martin J. Higgins	12 Revere Circle	Plymouth Meeting	PA	19462-2215	5/25/2013	100.00
Edward J. Furman					5/28/2013	250.00
Claudia A. Silverang	242 Waterloo Avenue	Berwyn	PA	19312	5/28/2013	250.00
Howard P. Treatman	1 Lehman Lane	Philadelphia	PA	19144	6/6/2013	100.00
Gregory J. Dupee	225 Amour Circle	Blue Bell	PA	19422	6/7/2013	250.00
Shou-Du Yao	107 Colonial Avenue	Eagleville	PA	19403	6/9/2013	100.00
Shou-Du Yao	107 Colonial Avenue	Eagleville	PA	19403	6/9/2013	100.00
David Dormont	153 Union Avenue	Bala Cynwyd	PA	19004	5/24/2013	100.00
Joe Calabro	1151 Highgrove Drive	West Chester	PA	19380	6/4/2013	100.00
Jeffrey Culp	354 Stonyhill Drive	Chalfont	PA	18914	6/5/2013	100.00
Judith Shields	105 Sutcliffe Lane	Conshohocken	PA	19428-1457	6/8/2013	250.00
						<u>\$1,700.00</u>

11/29/14

# CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES OVER \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <b>FRIENDS OF JASON SAWS</b>	Reporting Period From <b>5/7/13</b> To <b>6/10/13</b>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
<b>SEE ATTACHED</b>				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$

Political Cmtes over \$250

Friends of Jason Salus

	Address	City	State	ZIP	Date	Amount
Cement Masons Local 592 PAC		Philadelphia	PA		5/17/2013	500.00
Plumbers Union Local 690	2791 Southampton Road	Philadelphia	PA	19154	6/5/2013	1,000.00
Steamfitters' Local Union 420 COPE Fund	14420 Townsend Road	Philadelphia	PA	19154-102	6/5/2013	1,000.00
Local 13000 Communication Workers of America PAC	2124 Race Street	Philadelphia	PA	19103	6/5/2013	500.00
Carpenters PAC of Phila. & Vicinity	1803 Spring Garden Street	Philadelphia	PA	19130-391	6/4/2013	1,000.00
Pennsylvania Liberty Fund	101 Greenwood Avenue, 5th Floor	Jenkintown	PA	19046	6/6/2013	1,000.00

Total \$5,000.00

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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 <b>FRIENDS OF JASON SALUS</b>	Reporting Period From <u>5/7/13</u> To <u>6/10/13</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<b>SFE ATTACHED</b>				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$

All Others over \$250

Friends of Jason Salus

Contributor	Address	City	State	Zip	Date	Amount	Employer/Contributor	Employer's Address	Occupation
Obermayer Rebmann Maxwell & Hippel LLP	One Penn Center, 19th Floor 1617 John F. Kennedy Blvd.	Philadelphia	PA	19103-189	5/28/2013	500.00			
R. Emmett Madden	101 Greenwood Avenue Jenkintown Plaza, 5th Floor	Jenkintown	PA	19046	6/5/2013	500.00	Law Offices of R. Emmett Madden	101 Greenwood Avenue Jenkintown Plaza, 5th Floor Jenkintown, PA 19046	Attorney
Scott F. Waterman	110 West Front Street	Media	PA	19063	6/7/2013	500.00	Scott F. Waterman, Esq.	110 West Front Street Media, PA 19063	Attorney
						<b>Total</b>			
								<b><u>\$1,500.00</u></b>	

6/12/2013

**SCHEDULE III  
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <b>FRIENDS OF JASON SALUS</b>	Reporting Period From <u>5/7/13</u> To <u>6/10/13</u>
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To Whom Paid <b>SEE ATTACHED</b>	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4) -		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	<b>PAGE TOTAL</b> <b>\$</b>
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Expenditures

Friends of Jason Salus

Date	Name	Supplier Address	Supplier City	State	ZIP	Amount	Description
5/14/13	Montgomery County Democratic Committee	21. E. Airy Street	Norristown	PA	19401	100.00	Contribution
5/23/13	Area 9/154 Democratic Committee	530 Spring Lane	Wyndmoor	PA	19038-8413	100.00	Contribution
6/10/13	PayPal	2211 N. First Street	San Jose	CA	95131	31.95	Processing Fees
<b>Total</b>						<b>\$231.95</b>	

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## SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate <b>FRIENDS OF JASON SALUS</b>	Reporting Period From <u>5/7/13</u> To <u>6/10/13</u>
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Name of Creditor <b>SEE ATTACHED</b>				Outstanding Balance of Debt \$		
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City		State	Zip Code (Plus 4)			
Description of Debt						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL \$
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Unpaid Debts

Friends of Jason Salus

Name	Address	City	State	ZIP	Date	Amount	Description
Lisa Salus	2059 Wisteria Lane	Lafayette Hill	PA	19444	11/21/2010	2,500.00	Loan to campaign
Jason E. Salus	2059 Wisteria Lane	Lafayette Hill	PA	19444	4/28/2011	1,591.07	Loan to campaign
Jason E. Salus	2059 Wisteria Lane	Lafayette Hill	PA	19444	12/19/2012	1,921.88	Loan to campaign
Jason E. Salus	2059 Wisteria Lane	Lafayette Hill	PA	19444	5/6/2013	102.60	Loan to campaign
						<b>\$6,115.55</b>	<b>TOTAL</b>

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