### CAMPAIGN FINANCE REPORT

PAGE 1 OF \_

(COVER PAGE)

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

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Filer Identification Number:	20140		7	Repoi Filed			CANDIDATE	1.	COMM	TTEE	χ	LOBE	SYIST	3.
Name of Filing Comm	ittee, Candidate of Lo	Jas	son Salu	25							•			
Street Address:	6 Box 12		24, 02,0	<u> </u>										
City:		<u> </u>			<u> </u>	5	State:		Zip Cod					
1/0	rristown	1.			12	, <u> </u>	PA		194	04		,		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRE-PRIMA		2.	3	DAY ST PRIMARY	3.	REPORT?		YES		NO	X
(place X to	8TH TUESDAY PRE-ELECTION	4.	2ND FRIDA PRE-ELECT		5.		DAY ST ELECTION	6. ()	TERMINA REPORT?		YES		NO	X
the right of report type)	ANNUAL REPORT	7.	YEAR				G METHOD CHECK ONE	$leve{lack}$	PAPE	R	χ	DISK	ETTE	
Name of Office Sough	•	un(	R			D. MO	ATE OF ELECT D. DAY YES 3 201	AR	District Number	Offic Code	:   (	Party Code EM TIONS	\ <sup>Се</sup>	unty ode P ODES)
					}				F	OR OF	FICE (	JSE O	NLY	
Summary of Rand Expenditur		10		15 15	То	MC	23 201	AR 5						
A. Amount Brought	Forward From La	st Rep	ort		\$ ,=	51.5	5 <u>9.45</u>					1		
B. Total Monetary	Contributions and	Receip	ts (From Sch	edule I)	\$	9,4	00.				ξ. (			
C. Total Funds Ava	ilable (Sum of Line	es Aa	ind B)		\$ (	000	159-45							i
D. Total Expenditu	res (From Schedule	e III)			\$ 4	33	433.72			:		7		
E. Ending Cash Bal	ance (Subtract Line	e D fro	om Line C)		\$ 5	27,3	362,23					. <u>.</u>		
₽ Value 🚅 In-Kin	d Contributions Re	ceived	(From Sched	dule II)	\$	Qυ.:	145,90							
. Ligo do Cebts ar	nd Obligations (Fro	m Sche	edule IV)		\$	4	000.				,	<u></u>		
Z  5 5 7 3				AFFIDA										
	s a Committee re											and h	oliof e	
H H SWI COMplete	nat this report, includ ribed before me this	ing the	attached sched	idles, on	paper	or com	pater diskette, a	16 10 1	ne best of	i iiiy kiic	wieoge	e anu D	eller ti	rue,
겠으로 조온 [	1			15	3	C-1	a done	Bu	nβ					
MAN Gey C	1			1) >			Maya Signe	ture of	Person S	ubmittin	g Repo	rt		
	Signature	1		<del></del>	<b>\</b>	10	<u>laura B</u>	$\omega \alpha$	Printed Na					
My commission exp	ì	DAY	19 YR.	<u>.</u>			(Olo Area Code	_	400	0.00	78 Telepho	one Nun	nber	
								•		,				
PART II - If this	is a report of a C	andida	te's Authoriz	ed Co	nmitte	ee, car	ndidate shall si	gn her	'e. '					
	nat to the best of my as amended.	knowle	edge and belief	this po	litical	commit	tee has not viol	ated ar	y provisio	ons of th	ne Act	of June	3, 19	37
Significant subsc	ribed before me this		,	\ <del>=</del> -		_	45	f ()	)_					
Z day c	1 - 12		20	<u>いし</u>	.	<i>_</i>	pre	Signa	ture of Ca	ındidate				
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ENE Intribit														

### SCHEDULE I

PAGE 2 OF \_\_\_\_\_

## CONTRIBUTIONS AND RECEIPTS

. Detailed Summary Page		
_	Reporting Per	
Friends of Jason Salus	From 1018	10/15 TO 11/23/15
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS	PER CONT	RIBUTOR
TOTAL for the Reporting Period	d (1)	\$ 50.00
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART	B)	
Contributions Received from Political Committees (Part A)		<b>\$</b> Ø
All Other Contributions (Part B)		<b>\$</b> 350, <sup>00</sup>
TOTAL for the Reporting Period	d (2)	\$ 350.6
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		<b>\$</b> Ø
All Other Contributions (Part D)		\$ 9,000,00
TOTAL for the Reporting Period	j (3)	\$ 01,000.00
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CH	IECKS, ETC	. (FROM PART E)
TOTAL for the Reporting Period	(4)	\$
TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page Tem B.)		<b>\$</b> 9400,00

Cover Page, Item 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		on pontical co		Reporting			<del></del>
Friends of Jason	Sal	os		1	-	<u>5_</u>	To 11/23/15
Coll Name of Carlothing				DATE			AMOUNT
Full Name of Contributor Paul No Connell Mailing Address			MO i Ø	0. DAY	YEAR.	\$ /	250.°°
414 E EINStreet			Mo		YEAR	\$	<i>7</i>
	State		4) MO	D. DAY	YEAR		
Constrohocker	PA	19428 -				\$	
Full Name of Contributor  Patric V Los d  Mailing Address	<u>-</u>		MO 1.O	0.0	YEAR 2015	\$	100,00
			Mo		YEAR	\$	1003
535 Prescott Rd Morran Station	State		4) MO.	DAY	YEAR	<del>  -</del> -	
	PA	19066 -				\$	
Full Name of Contributor	<del></del>	· <del></del>	MO.	DAY	YEAR	\$	
Mailing Address			Mo.	DAY	YEAR	<del></del>	
City	State	7:5 Fodo /Plue				\$	
City	State	Zip Code (Plus	4) <u>MO.</u>	DAY	YEAR	\$	
Full Name of Contributor	#### <del>*********************************</del>		MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	<del> </del>	
City					I Service	\$	
City	State	Zip Code (Plus -	4) MO.	DAY	YEAR	\$	
Full Name of Contributor		<u> </u>	MQ.	DAY	YEAR	<del>                                     </del>	
Mailing Address						\$	
-			MO.	. DAY	YEAR	\$	
City	State	Zip Code (Plus	4) <u>MO.</u>	. DAY	YEAR		
Full Name of Contributor		<u> </u>			ليبا	\$	
			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4	4) MO.	DAY	YEAR	<del></del>	
					TEAR	\$	
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR		
City	State	Zip Code (Plus 4	* 40	Ţ		\$	
		ZIP Code (Flus 4	MO.	DAY	YEAR	\$	
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR		
City	5444	T'- Cada (Dina				\$	
	State	Zip Code (Plus 4	MQ.	DAY	YEAR	\$	
					<del></del>	PAGE T	TOTAL
Enter Grand Total of Part B on Sche	edule I	Detailed Sumr	mary Dage	Cantin		\$ 24	

### **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			R	eporting		
Friends of Jason	) Sa	lus		From 1	oladis	5_ To 11/03/15
				DATE		AMOUNT
Full Name of Contributor See attac	1		MO.	DAY	YEAR	\$
Mailing Address	100		MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name	1		Occupati	on .		
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor				647	1 ./2 . 5	
Pull Maine of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MÓ.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	VEAD	
	3.2.0		III-O.	DAT	YEAR	\$
Employer Name	<del></del>		Occupation	on	1	, , , , , , , , , , , , , , , , , , ,
Employer Mailing Address/Principal Place of Business	<u>.</u>		<u> </u>			
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	\$
Сну	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Employer Name			Occupation	on		
Employer Mailing Address/Principal Place of Business				<del></del> -		
		4				
Full Name of Contributor			MO.	DAY	YEAR	•
Mailing Address			MO.	DAY	YEAR	\$
•			INO.	DAT	TEAN	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	<b>d</b>
Employee Name	<u> </u>	_		<del>,</del>		\$
Employer Name			Occupation	on		
Employer Mailing Address/Principal Place of Business			<u> </u>		· · ·	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
	T = : T					\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name	<u> </u>		Occupation	n		
			<u> </u>			
Employer Mailing Address/Principal Place of Business						
						PAGE TOTAL
Enter Grand Total of Part D on Sched	dule I,	Detailed Summary	Page,	Section	n 3.	Δ
DSEB-502 (7-99)						\$ 4,000.

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### SCHEDULE II

PAGE \_\_\_\_\_ OF \_\_\_\_

## 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	Penastina Re	-1	
Friends of Jason Salus	Reporting Pe	1	то 11/23/15
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$	SEO OO OR	Sec De	
TOTAL for the Reporting Period		T	& CONTRIBUTOR
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$25	0.00 (FROM	A PART	Fl
TOTAL for the Reporting Period		\$ 02	/
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FRO	M PART G	)	
TOTAL for the Reporting Period	(3)	\$ 20,	745.90
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)		<b>\$</b> QU	,745.90

## PART G

## IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Inter Grand Total of Part G on Scho	ا مارام	to Kind On All				PAGE TOTAL
mployer Mailing Address/Principal Place of Business	3	<del>71</del>	Description	on of Cont	ribution	
proyer of Contributor			Occupation	n '	· , , , , , , , , , , , , , , , , , , ,	<del></del>
mplayer of Contributor					<u> </u>	\$
ity	State	Zip Code (Plus 4)	_ MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	•
			MO.	DAY	YEAR	\$
Full Name of Contributor		·				
Employer Mailing Address/Principal Place of Busines	S		Descripti	on of Con	tribution	
				-		
Employer of Contributor			Occupation	on .		\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	•
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Employer of Castillar						<b>7</b> \$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
months address			MO.	DAY	YEAR	\$
Mailing Address						\$
Full Name of Contributor			MO.	DAY	YEAR	
	<b>5</b> 5		Descript	ion of Ca	ntribution	
Employer Mailing Address/Principal Place of Busine						
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Employer of Contributor	-		Occupa	. 1 1		
HACKISTOURS Employer of Contributor	AS	17101 -		1	YEAR	<b>\$</b>
City	State	Zip Code (Plus 4)	MO.	DAY	VEAR	
Mailing Address  229 State Street			MO.	DAY	YEAR	\$
Pennsylvania Democratic	Party	!	10	DAY	YEAR 15	\$ a0145.90
Full Name of Contributor				DATS		AMOUNT
Friends of Jason	Salu	<u>s</u>		From	191901	5 TO 11/23/15
Name of Filing Committee or Candidate				Reportin		
ENIOPOR AT EILIAR CHARLETTE C 37 1						

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

\*20, 145.90

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### SCHEDULE III

## STATEMENT OF EXPENDITURES

Friends of Jason Sales  To Whom Paid  See affacted  State Zip Code (Plus 4)  To Whom Paid  Mailing Address  To Whom Paid  Mailing Address  State Zip Code (Plus 4)  State Zip Code (Plus 4)  To Whom Paid  Mailing Address  State Zip Code (Plus 4)  To Whom Paid  Mailing Address  State Zip Code (Plus 4)  State Zip Code (Plus 4)  To Whom Paid  Mailing Address  City  State Zip Code (Plus 4)  State Zip Code (Plus 4)  To Whom Paid  Mailing Address  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  To Whom Paid  Mailing Address  Description of Expenditure  City  State Zip Code (Plus 4)  Description of Expenditure  City  To Whom Paid  Mailing Address  Description of Expenditure  City  To Whom Paid  Mailing Address  Description of Expenditure  Amount S  PAGE TOTAL	Name of Filing Committee or Candidate			R	eporting	Period	1 .1 ~
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10/21/2015 Pennsylvania Democratic Party	koosh	21 E. Airy Street	Norristown	PA	19401	\$3,000.00	\$3,000.00 Contribution	
	via Democratic Party	229 State Street	Harrisburg	PA	17101	\$21,500.00	17101   \$21,500.00   Contribution	
10/31/2015 Valley Green Bank	an Bank	7226 Germantown Avenue	Philade phia	PA	19119	\$20.00	\$20.00 Bank Fee	
10/21/2015 Friends of Karen Geld Sanchez	Karen Geld Sanchez	356 Evergreen Road	Jenkintown	PA	19046	\$2,500.00	\$2,500.00 Contribution	
722/2015 Inches of	10/22/2015 Thering of the County Democratic Committee	21 E. Airy Street	Norristown	PA	19401	\$2,500.00	\$2,500.00 Contribution	
0/22/2015 Morth Wal	10/22/2015 Morth Wales Democratic Committee	329 Britt Road	North Wales	PA	19454	\$1,000.00	\$1,000.00 Contribution	
10/27/2015 Dollaberty for PA	for PA	8566 Bustleton Avenue	Philadelphia	PA	19152	\$250.00	\$250.00 Contribution	
10/2//2015 Area 1 Democratic Committee	mocratic Committee	4 Park Court	Pottstown	PA	19464	\$500.00	\$500.00 Contribution	
10/30/2015 Area 4 Democratic Committee	nocratic Committee	P.O. Box 285	Worcester	PA	19490	\$500.00	\$500.00 Contribution	
11/33/2015 PavPal		2211 N. First Street	San Jose	S	157.9	\$27.30	\$27.30 Processing Fee	
1/23/205 Jason Salus	·	2059 Wisteria Lane	Lafayette Hill PA	PA	19444	1835.92	1835.92 Reimbursement of expenses	of expenses
						\$33,633.22		

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# 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			Reporting		
Friends of Jason Salo	9		From	olas11.	5 To 11/13/15
		1			
Name of Creditor					Outstanding Balance of De
Lisa Salus					\$ 2,500
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
on 2059 Wistair Lane	INCURRED	State	Zip Code	(Plus 4)	4
hafayette Hill		IPA	19444-		
Description of Debt *		1.('')	1144		
Loan to campaign					
Name of Creditor Jason Salus					Outstanding Balance of De
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City		State	Zip Code	(Plus 4)	1
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Loan to Campaign					
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City	<u></u>	State	Zip Code	(Plus 4)	
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Name of Creditor					Outstanding Balance of De
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#### FRIENDS OF JASON SALUS

#### PO BOX 1214

#### NORRISTOWN, PA 19404

December 2, 2015

Department of State

Bureau of Commissions,

**Elections and Legislation** 

210 North Office Building

Harrisburg, PA 17120-0029

Re:

**Campaign Finance Report** 

Friends of Jason Salus

Dear Filing Clerk,

Enclosed for filing are the following documents:

- 1) 30 Day Post Election Campaign Finance Report (Committee)
- 2) 30 Day Post Election Candidate Finance Report

Thank you for your attention to this matter. Please contact me with any questions or if additional action is require.

Kind regards,

Maura Buri, Treasurer

Friends of Jason Salus

#### **Enclosures**

cc:

**Montgomery County Voter Services (with enclosures)** 

PO Box 311, Norristown, PA 19404-0311

**Bucks County Board of Elections** 

55 E. Court Street, Doylestown, PA 18901