Campaign Finance Report

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

Filer Identificati Number :	on 201	.0165				port ed B		CANDI	DATE		СОМ	MITTEE		LOBBYIST				
Name of Filing C	Committee, Cand	idate or L	obbyist:		Stuc	dent	s Firs	t PAC										
Street Address:	P.O. 416																	
City:	Wynnewood							State: PA					Zip Code: 19096					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.						ARY F	POST-	3.		AMENDM REPORT?		Yes	No	~		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pri	≣- !	5.	30 DA ELECT		POST-	OST- 6. X			ATION	Yes	No	~		
report type)	ANNUAL REPOR	T 7.	Year 2012					NG METHO				PAPER		V	DISKE	TTE		
Name of Office S	Sought by Candid	ate:	-					DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County		
	- ,							МО	DAY	YI	AR		10000					
								11		6	2012		(SEE IN	STRUCTI	ONS FOR (CODES)		
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł		_	МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY			
			10 23	2	012	Т	0	11	:	26	2012							
A. Amount Bro	ught Forward Fr	om Last R	leport				\$			91,0	021.83							
B. Total Monet	ary Contribution	s And Rec	eipts (From	Sche	dule	· I)	\$	\$ 2,500.00										
C. Total Funds	Available (Sum (Of Lines A	and B)				\$			93,	521.83							
D. Total Expen	ditures (From Sc	hedule II	Ί)				\$			13,0	00.00							
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			80,5	21.83							
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II	:)	\$				0.00							
G. Unpaid Debt	s And Obligation	s (From	Schedule IV)			\$	\$ 0.00										
				AFF	IDA	١٧٢	T SE	CTION										
PART I - If this is	s a Committee re	port, trea	surer sign	here.	If thi	is is	a Can	ndidate re	eport, o	candi	date sig	ın here.						
I swear (or affirm) correct and comple) that this report, ir ete.	cluding th	e attached sc	hedule	s filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true		
Sworn to and subs	cribed before me tl day of	nis	20							S	Signature	of Perso	n Submit	ting Rep	ort			
			_				- -					Prin	ted Name	e				
My Commission Ex	Signa cpires	ture										Ema	il					
	мо	D	AY	YR			_		Are	ea Coo	le	Daytim	e Telepi	none Nu	mber			
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.								
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,		
Sworn to and subsc	ribed before me thi	s									S	ignature o	of Candid	ate				
	day of						_					Drint-	d Name					
	Signature	<u> </u>					-					rinte	u Haille					
My Commission Exp	_	-										Ema	il					
	мо	D	AY	YR	1		•		Area	Code		Da	aytime T	elephor	e Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
Students First PAC	From:	10/23/201	<u>2</u> To:	11/26/2012
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	2,500.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	2,500.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committ	Name of Filing Committee or Candidate Rep				Reporting Period						
			From:		То	:					
		L		DATE			AMOUNT				
Full Name of Contributing	Committee		МО	DAY	YEAR						
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4))								

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

PAGE TOTAL											
\$ 0.00											

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 Filling Committee of Camulate				Reporting Period From: To:						
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)								

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

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candi	Reporting Period							
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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	Rep	Reporting Period							
			Fror	om: To:					
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address				\$	0.00				
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	on 3.			\$	PAGE TOTAL 0.00	

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Pe		
Students First PAC	From:	<u>10/23/2012</u> To:	11/26/2012

			D	ATE		AMOUNT
Full Name Friends of Rich Alloway			МО	DAY	YEAR	
Mailing Address P.O. Box 351	11	5	2012	\$ 2,500.00		
City Chambersburg	State PA	Zip Code (Plus 4) 17201	11	5	2012	
Receipt Description Returned of	heck # 1389					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 2,500.00

SCHEDULE II

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	Reporting Peri	od	
Students First PAC	From:	<u>10/23/2012</u> To:	11/26/2012
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	₹	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	Name of Filing Committee or Candidate				Reporting Period					
	From:			То:						
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:										
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL			
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL			
						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State	Zip Code(Plus 4)									
Employer of Contributor	•		•		Occupation						
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Students First PAC			Reporting Period				
			From <u>10/23/2012</u> To:			11/26/2012	
			DATE				AMOUNT
To Whom Paid Friends of Margo Davidson			мо	DAY	YEAR		
Mailing Address 45 Scottdale Avenue Suite 2			11	5	2012	\$	1,000.00
City Landsdowne	State PA	Zip Code (Plus 4) 19050	Description of Expenditure Contribution				
To Whom Paid Democrats for Education Reform			мо	DAY	YEAR		
Mailing Address P.O. Box 92			10	25	2012	\$	12,000.00
City Feasterville	State PA	Zip Code (Plus 4) 19053	Description of Expenditure Contribution				
Enter Grand Total of Expendi	tures on Page 1, Re	eport Cover Page, Item I).				PAGE TOTAL

13,000.00