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 2010	165			Rep File			CAND	ANDIDATE COMMITTEE \(\square \) LOBBYIST								
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		Stuc	lent	s Firs	t PAC									
Street Address:	P.O. 416																
City:	Wynnewood							State:	PA			Zip Co	de: 1	9096			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA		POST-	- 3.			AMENDMENT REPORT?		No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	Ē- 5	5.	30 DA		POST-	- 6.		TERMIN REPORT		Yes	No	~	
report type)	ANNUAL REPORT	7.	Year 2013					NG METH CHECK (PAPER		\	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE	OF EL	ECT	ION	District Number		Par	ty Code	County	
								МО	DAY	7	YEAR	Number	Code			code	
								1	1	5	201	3	(SEE I	NSTRUCTI	ONS FOR O	CODES)	
	Receipts and	МО	DAY	YEAR	R			МО	DAY	′	YEAR	F	OR OFFI	CE USE	ONLY		
Expenditures	from:		1 1	2	013	Т	0		4	1	201	3					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			5	5,521.8	3					
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.0	0					
C. Total Funds Available (Sum Of Lines A and B) \$ 55,521.8							3										
D. Total Expenditures (From Schedule III) \$ 765.0							0										
E. Ending Cash	Balance (Subtract	t Line D	From Line (C)			\$			5	4,756.8	3					
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II)	\$				0.0)					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$				0.0	0	·				
				AFF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here. I	If thi	is is	a Car	ndidate	report	, car	didate s	ign here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedules	s filed	l on	paper	or by elec	tronic	medi	um, are t	the best o	of my kno	owledge	and belie	ef , true	
Sworn to and subs	cribed before me this	;	20								Signati	ire of Perso	n Submi	tting Rep	ort		
			_				- -					Priı	nted Nam	ie			
My Commission Ex	Signatu cpires	re										Ema	ail				
	МО	D	AY	YR			_			Area	Code	Daytir	ne Telep	hone Nu	mber	_	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign	here	·.						1
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not vic	lated	any prov	isions of th	e act of	June 3,1	937 (P.L	. 1333,	l
Sworn to and subsc	ribed before me this											Signature	of Candi	date			
	day of 						_					Print	ed Name				
	Signature						-										
My Commission Exp	_											Ema	ail				
	МО	D	AY	YR	l		•		Are	ea Co	de	C	Daytime Telephone Number				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Sammary 1 age	_			
Name of Filing Committee or Candidate	Reporting	Period		
Students First PAC	From:	1/1/201	<u>3</u> To:	4/1/2013
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)	\$	0.00
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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	is Part to itemize onl vith an aggregate valu									
Name of Filing Commit	tee or Candidate		Re	Reporting Period						
			From: To							
		<u> </u>			DATE			AMOUNT		
Full Name of Contributing	g 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 Fining Committee of Candidate			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 Candidate	me of Filing Committee or Candidate Rej		Reporting	Reporting Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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			Reporting Period					
			Fron	n:		To) :	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	5 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PA \$	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 Ca	ndidate		Repor	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•				•	•	
Enter Grand Total of Part E on	Schedule T Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	Section				\$	0.00

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 Perio	od						
Students First PAC	From:	<u>1/1/2013</u> To:	4/1/2013					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)							
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 Candid	Reporting Period						
			From:			To:	
				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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	te				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(F	Plus 4)							
Employer of Contributor	•		•			Occupa	ation				
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 C	Candidate		Reporti	ng Period					
Students First PAC			From	1/:	1/2013	То:	4/1/2013		
				DATE					
To Whom Paid C.			МО	DAY	YEAR				
Mailing Address One Camb	ridge Center		1	2	2013	\$	198.00		
City Cambridge	State MA	Zip Code (Plus 4) 02142	Description of Expenditure Marketing Expense						
To Whom Paid Benchmarkemail.com			МО	DAY	YEAR				
Mailing Address 10532 Los	Vaqueros		1	2	\$	105.00			
City Los Alamitos	State CA	Zip Code (Plus 4) 90720	Descrip Market						
To Whom Paid Brightcove, Inc.		•	МО	DAY	YEAR				
Mailing Address One Camb	ridge Center		1	7	2013	\$	99.00		
City Cambridge	State MA	Zip Code (Plus 4) 02142	Description of Expenditure Marketing Expense						
To Whom Paid Benchmarkemail.com			МО	DAY	YEAR				
Mailing Address 10532 Los	Vaqueros		1	22	2013	\$	35.00		
City Los Alamitos	State CA	Zip Code (Plus 4) 90720	1	otion of Exp		1			
To Whom Paid Treasurer of Lower Merion			МО	DAY	YEAR				
Mailing Address 75 esat La	ncaster Avenue		2	4	2013	\$	60.0		
	la	The Code (Disc 4)	+	1	I	<u> </u>			

Zip Code (Plus 4)

19003

Description of Expenditure

Registration Fee

State

PΑ

City

Ardmore

To Whom Paid Brightcove, Inc.			мо	DAY	YEAR		
Mailing Address One Camb	oridge Center		2	8	2013	\$	99.00
City Cambridge	State MA	Zip Code (Plus 4) 02142	Description of Expenditure Marketing Expense				
To Whom Paid Benchmarkemail.com			МО	DAY	YEAR		
Mailing Address 10532 Los		2	20	2013	\$	35.00	
City Los Alamitos		otion of Expension					
To Whom Paid Brightcove, Inc			МО	DAY	YEAR		
Mailing Address One Camb	oridge Center		3	4	2013	\$	99.00
City Cambridge	State MA	Zip Code (Plus 4) 02142	1	otion of Expension			
To Whom Paid Benchmarkemail.com	·	·	мо	DAY	YEAR		
Mailing Address 10532 Los	s Vaqueros		3	20	2013	\$	35.00
City Los Alamitos CA State CA Zip Code (Plus 4) 90720				Description of Expenditure Marketing Expense			
Enter Grand Total of Expe	nditures on Page 1. Po	nort Cover Page Item D					PAGE TOTAL
Linter Granu Total of Exper	nuitures on Page 1, Re	port cover rage, Item D	•			\$	765.00