

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 : 2010165		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: Students First PAC										
Street Address: P.O. 416										
City: Wynnewood			State: PA	Zip Code: 19096						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:			DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
			MO	DAY	YEAR					
			11	4	2014	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	2014	TO	3	31	2014		
A. Amount Brought Forward From Last Report			\$			234,745.33				
B. Total Monetary Contributions And Receipts (From Schedule I)			\$			0.00				
C. Total Funds Available (Sum Of Lines A and B)			\$			234,745.33				
D. Total Expenditures (From Schedule III)			\$			224,947.00				
E. Ending Cash Balance (Subtract Line D From Line C)			\$			9,798.33				
F. Value Of In-Kind Contributions Received (From Schedule II)			\$			0.00				
G. Unpaid Debts And Obligations (From Schedule IV)			\$			0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

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

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 Area Code Daytime Telephone Number

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 _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Students First PAC	From: <u>1/1/2014</u> To: <u>3/31/2014</u>

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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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	Reporting Period
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor						
Mailing Address	MO	DAY	YEAR			\$ 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	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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	Reporting Period
	From: _____ To: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 0.00

PART E
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 Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code (Plus 4)			
Receipt Description					

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

PAGE TOTAL
\$ 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 Students First PAC	Reporting Period From: <u>1/1/2014</u> To: <u>3/31/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
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, Reports Cover Page, Item F.)	\$ 0.00

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Description of Contribution:				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Students First PAC	From <u>1/1/2014</u> To: <u>3/31/2014</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
Citizens Alliance of PA PAC	3	3	2014	\$ 75,000.00
Mailing Address 1017 Mumma Road Suite 102				
City Lemoyne	State PA	Zip Code (Plus 4) 17043	Description of Expenditure Contribution	
To Whom Paid Citizens Alliance of PA PAC	3	26	2014	\$ 40,000.00
Mailing Address 1017 Mumma Road Suite 102				
City Lemoyne	State PA	Zip Code (Plus 4) 17043	Description of Expenditure Contribution	
To Whom Paid Friends of Todd Stephens	3	4	2014	\$ 500.00
Mailing Address 132 Liberty Avenue				
City Jeffersonville	State PA	Zip Code (Plus 4) 19403	Description of Expenditure Contribution	
To Whom Paid Citizens for Jordan Harris	3	3	2014	\$ 5,000.00
Mailing Address 2001 Federal Street				
City Philadelphia	State PA	Zip Code (Plus 4) 19146	Description of Expenditure Contribution	
To Whom Paid Citizens for Mackenzie	3	4	2014	\$ 500.00
Mailing Address 3620 Lincoln Avenue				
City Allentown	State PA	Zip Code (Plus 4) 18103	Description of Expenditure Contribution	

To Whom Paid Citizens for Jim Christiana			MO	DAY	YEAR	
Mailing Address 592 A Third Street			3	7	2014	
City Beaver	State PA	Zip Code (Plus 4) 15009	Description of Expenditure Contribution			
To Whom Paid Citizens for Jordan Harris			MO	DAY	YEAR	
Mailing Address 615 Chestnut Street			3	7	2014	
City Philadelphia	State PA	Zip Code (Plus 4) 19106	Description of Expenditure Contribution			
To Whom Paid Friends of Warren Kampf			MO	DAY	YEAR	
Mailing Address P.O. Box 1439			3	4	2014	
City Paoli	State PA	Zip Code (Plus 4) 19301	Description of Expenditure Contribution			
To Whom Paid Friends of Mike Vereb			MO	DAY	YEAR	
Mailing Address P.O.> Box 242			3	3	2014	
City Fairview	State PA	Zip Code (Plus 4) 19409	Description of Expenditure Contribution			
To Whom Paid Friends of Stephen Kinsey			MO	DAY	YEAR	
Mailing Address P.O. Box 27331			3	7	2014	
City Philadelphia	State PA	Zip Code (Plus 4) 19118	Description of Expenditure Contribution			
To Whom Paid Sue Helm for State House Committee			MO	DAY	YEAR	
Mailing Address c/o Dawn Keefer 430 Franklin Church Road			3	4	2014	
City Dillsburg	State PA	Zip Code (Plus 4) 17019	Description of Expenditure Contribution			

To Whom Paid Friends of Margo Davidson			MO	DAY	YEAR	
Mailing Address 45 Scottdale Avenue Suite 2			1	28	2014	
City Lansdowne	State PA	Zip Code (Plus 4) 19050	Description of Expenditure Contribution			
To Whom Paid Smucker for Senate			MO	DAY	YEAR	
Mailing Address P.O. box 792			1	28	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			
To Whom Paid Brightcove Inc.			MO	DAY	YEAR	
Mailing Address One Cambridge Center			1	8	2014	
City Cambridge	State MA	Zip Code (Plus 4) 02142	Description of Expenditure Marketing Expense			
To Whom Paid Brightcove Inc.			MO	DAY	YEAR	
Mailing Address One Cambridge Center			2	7	2014	
City Cambridge	State MA	Zip Code (Plus 4) 02142	Description of Expenditure Marketing Expense			
To Whom Paid Brightcove Inc.			MO	DAY	YEAR	
Mailing Address One Cambridge Center			3	21	2014	
City Cambridge	State MA	Zip Code (Plus 4) 02142	Description of Expenditure Marketing Expense			
To Whom Paid Eckert Seamans Cherin & Mellott, LLC			MO	DAY	YEAR	
Mailing Address P.O. Box 643187			2	18	2014	
City Pittsburgh	State PA	Zip Code (Plus 4) 15264	Description of Expenditure Professional Fees			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 224,947.00

