Campaign Finance Report

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

| Filer Identification 2010165 Number : | | | | | | ort d B | | CAND | COMM | | | 4ITTEE | ✓ | LOBI | BYIST | | |
|--|---------------------------------|------------|------------------------|--------|-----------------------------|------------|----------------|-------------|-----------|--------|------------|--------------------|----------------|----------|-----------|----------|----------|
| Name of Filing C | Committee, Candid | ate or L | obbyist: | | Stud | lent | s Firs | t PAC | | | | | | | | | _ |
| Street Address: | | | | | | | | | _ | | _ | | _ | | _ | | |
| City: | Wynnewood | | | | | | | State: | PA | | | Zip Cod | ie: 19 | 9096 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | | | | | 30 DA PRIMA | | POST- | | | | IENT | Yes | No | | / |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE | - 5 | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | • | / |
| report type) | ANNUAL REPORT | 7. | Year 2015 | | FILING METHOD () CHECK ONE | | | | | | | | | / | DISKE | TTE | |
| Name of Office S | Sought by Candida | te: | | | | _ | | DATE C | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Coun | |
| | | | | | | | | МО | DAY | YE | AR | | | <u> </u> | | | |
| | | | | | | | | 11 | | 3 | 2015 | | (SEE IN | STRUCTI | ONS FOR C | ODES) | |
| | Receipts and | МО | DAY Y | /EAR | | | | МО | DAY | YI | EAR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | s from: | | 3 31 | 20 | 015 | T | 0 | 5 | 5 | 4 | 2015 | | | | | | |
| A. Amount Bro | ught Forward Fro | n Last R | eport | | | | \$ | - | | 204,9 | 958.36 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From S | Sche | dule | I) | \$ | | | | 0.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 204,9 | 958.36 | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | 36,8 | 861.00 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) |) | | | \$ | | : | 168,0 | 97.36 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sch | nedul | le II) |) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | • | | | |
| | | | | AFF | IDA | VI٦ | ΓSE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign he | ere. 1 | [f thi | s is | a Car | ndidate r | eport, o | candi | date sig | ın here. | | | | | |
| I swear (or affirm) correct and complete |) that this report, inc ete. | luding the | attached sche | dules | filed | l on p | paper | or by elect | tronic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , tru | ıe |
| Sworn to and subs | cribed before me this | 5 | 20 | | | | | | | S | ignature | of Perso | n Submit | ting Rep | ort | | - |
| | Signatu | ıre | <u> </u> | | | | - - | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | cpires | | | | | | _ | | | | | Ema | il | | | | _ |
| | МО | D | AY | YR | | | | | Are | ea Cod | le | Daytim | e Telepl | one Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized C | omm | ittee | e, Ca | andid | ate shall | sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of red. | ny knowle | edge and belief | this | politi | ical | comm | ittee has r | not viola | ted an | y provis | ions of th | e act of J | une 3,1 | 937 (P.L. | . 1333 | 3, |
| Sworn to and subsc | ribed before me this day of | | 20 | | | | | | | | S | ignature o | of Candid | ate | | | - |
| | | | | | | | - | | | | | Printe | d Name | | | | - |
| My Commission Exp | Signature | | | | | | - | | | | | Ema | il | | | | - |
| • | | | | | | | | | | | | | | | | | - |
| MO DAY YR | | | | | | | | | Area | Code | | D | aytime T | elephor | e Numbe | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|----------|--------------|-----------------|
| Students First PAC | From: | 3/31/201 | <u>5</u> To: | <u>5/4/2015</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 | J 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

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 | | | | | | |
|---------------------------------------|--|---|------------------|------|------|----------|--------|--|--|
| | | F | From: | | То | ! | | | |
| | | • | | DATE | | | AMOUNT | | |
| Full Name of Contributing Committee | | | МО | DAY | YEAR | | | | |
| Mailing Address | | | | | | \$ | 0.00 | | |
| City | | | | | | | | | |

PAGE TOTAL
0.00

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

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 | | | | 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.

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: | | | То: | | | |
| | | | | DA | TE | | P | AMOUNT | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | 0.0 | |
| Mailing Address | | | | | | | - \$ | 0.0 | |
| City | State | Zip Cod | e (Plus 4) | | | | | | |
| | | | | | | PAGE TOTAL | | | |
| Enter Grand Total of Part C on Scheo | nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect | | | | | | \$ | 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: | | • | То: | | | |
| | | | | | D | ATE | | | А | MOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEA | R | \$ | | 0.00 |
| Mailing Address | | | | | | | | | | | |
| City | State | Zip | Code (Plus | 4) | | | | | | | |
| Employer Name | | | | | Occupation | | | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | | | State | | 2 | Zip Cod | le (Plus 4 |) |
| Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. | | | | | | | \$ | P | AGE TOTA | AL 0.00 | |
| | | | | | | | L | | | | |

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 | Name of Filing Committee or Candidate | | | Reporting Period | | | | | |
|---------------------------|---------------------------------------|-----------------|-------------|------------------|-----|------|----------|------------|--|
| | | | From: | | | To: | | | |
| | | ' | | | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 | |
| Mailing Address | | | | | | | 7 | | |
| City | State | Zip Code (P | Plus 4) | | | | | | |
| Receipt Description | ' | | | | | | <u> </u> | | |
| | - C | | . .: | _ | | | | PAGE TOTAL | |
| Enter Grand Total of Part | E on Schedule I, Detailed | Summary Page, S | Section | 4. | | | \$ | 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 | d | | | | | | |
|--|-----------------|-----------------------|-----------------|--|--|--|--|--|
| Students First PAC | From: | 3/31/2015 To : | <u>5/4/2015</u> | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | PER CONTRIBUTOR | | | | | | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 | | | | | |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate | | | | Reporting Period | | | | | |
|---------------------------------------|------------------------|---------------------|------|------------------|------------|-------------|--------|------|--|
| | From: | | | То: | | | | | |
| | | | | DATE | | | AMOUNT | | |
| Full Name of Contributor | МО | DAY | YEAR | | | | | | |
| Mailing Address | | | | | | 7 \$ | | 0.00 | |
| City | State | Zip Code (Plus 4) | | | | | | | |
| Description of Contribution: | • | | • | • | | • | | | |
| | | | | | - | | | | |
| Enter Grand Total of Part F o | nd Contributions Detai | ailed Summary Page, | | | PAGE TOTAL | | | | |
| Section 2. | | | | \$ | (| 0.00 | | | |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Re | Reporting Period | | | | | |
|---|----------------|-----|------------------|--------|------------------|----------------|-------|------|-----------------|------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | DATE | | | AMOUN | т |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | 1 | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | | |
| Employer of Contributor | | | | | Occup | oation | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | | e Zi | p Code(Plus 4) | Descr | ipti | ion of Contribu | tion |
| Enter Grand Total of Part G on Sch | edule II, In-K | ind | Contributions D | etaile | ed | | | | PAGE T | OTAL |
| Summary Page, Section 3. | | | | | | | 0.00 | | | |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or | Candidate | | | Reporti | ng Period | | Reporting Period | | | | | |
|---|------------------|-----|-------------------|----------------------------|-------------|---------------|------------------|-----------------|--|--|--|--|
| Students First PAC | | | | From | <u>3/3:</u> | <u>1/2015</u> | То: | <u>5/4/2015</u> | | | | |
| | | | · | | DATE | | | AMOUNT | | | | |
| To Whom Paid Republican Principles for Cun | nberland Committ | tee | | мо | DAY | YEAR | | | | | | |
| Mailing Address | Mailing Address | | | | | 2015 | \$ | 6,000.00 | | | | |
| City Mechanicsburg | State | 1 | Zip Code (Plus 4) | Description of Expenditure | | | | | | | | |
| PA 17055 | | | | | ution | | | | | | | |
| To Whom Paid | | | | | DAY | YEAR | | | | | | |
| Brightcove, Inc. | | | | МО | | | | | | | | |
| Mailing Address | | | | 4 | 7 | 2015 | \$ | 99.00 | | | | |
| City Cambridge | State | ı | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | MA | | 02142 | Marketing Expense | | | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | | |
| Cozen O'Connor | | | | 1-10 | | | | | | | | |
| Mailing Address | | | | 4 | 21 | 2015 | \$ | 30,692.50 | | | | |
| City Philadelphia | State | ı | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| PA 17055 | | | | Professi | uonal Fees | 5 | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | | |
| kert, Seamans, Cherin & Mellott, LLC | | | 140 | | LAK | | | | | | | |
| Mailing Address | ng Address | | | | | 2015 | \$ | 69.50 | | | | |

| | PA | 152643187 | Professional Fees | | | | | | |
|-------------------------------------|---------------------|--------------------|-------------------|----|-----------|--|--|--|--|
| | | | | | | | | | |
| Enter Grand Total of Expenditures o | on Page 1, Report C | over Page, Item D. | | \$ | 36,861.00 | | | | |

Zip Code (Plus 4)

Description of Expenditure

State

City

Pittsburgh