# **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 :	i <b>on</b> 2010	165			Repor Filed		CA	ANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST	Γ	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		Studer	its Fi	rst PA	С									
Street Address:	P.O. 416																
City:	Wynnewood						Stat	te:	PA			Zip Co	<b>de:</b> 19	096			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2. <b>X</b>		DAY MARY	F	POST- 3.			AMENDN REPORT		Yes	N	0	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	ION ELECTION ELECTION					F	POST-	6.		TERMIN/ REPORT		Yes	N	0	$\checkmark$	
report type)	t type) ANNUAL REPORT 7. Year 2015 FILING METHOD () CHECK ONE							PAPER		$\checkmark$	DISK	ETTE					
Name of Office S	L Sought by Candidat	te:				_	DA	τε ο	F ELE	СТІС	N	District Number	Office Code	Par	ty Code	Cou	
	,						мо		DAY	YI	EAR	Number	code			Teor	5
								11		3	2015	j	(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR			мо		DAY	Y	EAR	FC	R OFFIC	e use	ONLY		
Expenditures	s from:		3 31	. 20	015	ГО		5		4	2015						
A. Amount Bro	ught Forward From	n Last R	eport				\$			204,9	958.36						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			204,9	958.36						
D. Total Expen	ditures (From Sch	edule II	I)				\$			36,8	361.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$		1	168,0	97.36						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)		\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule I\	/)			\$				0.00						
				AFF	IDAV	IT S	ECTI	ON									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	lf this i	s a C	andida	ate re	eport, c	andi	date sig	gn here.					
I swear (or affirm correct and compl	) that this report, incl ete.	uding the	e attached sc	hedules	s filed or	i pape	er or by	elect	ronic m	edium	, are to i	the best o	f my knov	/ledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me this day of	5	20							9	Signature	e of Perso	n Submitt	ing Rep	oort		_
	Signatu	re				_						Prin	ted Name				-
My Commission E	xpires											Ema	il				
	мо	D	AY	YR					Are	ea Coo	le	Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee, (	Candi	idate s	shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n ed.	ny knowle	edge and bel	ief this	politica	com	mittee	has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	ribed before me this day of		20								s	ignature (	of Candida	te			-
						_						Printe	ed Name				-
	Signature					-							•				_
My Commission Exp	bires											Ema	11				
	мо	D	AY	YR		_			Area	Code		D	aytime Te	elephor	e Num	ber	-

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Students First PAC From: <u>3/31/2015</u> **To:** 5/4/2015 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

# 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			Re					
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

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 Candidat	e		Rep	orting P	eriod			
			Fro	m:		Тс	):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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 Can	Name of Filing Committee or Candidate			g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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	Name of Filing Committee or Candidate			ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·					•	•		
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
			20000				\$		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 Period		
Students First PAC	From:	<u>3/31/2015</u> <b>To:</b>	<u>5/4/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Ro			Reporting	g Period				
Fr				From: To:				
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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

Name of Filing Committee or Candidate				Rep	oorting P	Period				
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State					Zip 4)	Code(Plus	Descri	ption o	of Contribution	

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candi	idate		Reporti	ng 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 Cumberla	nd Committee		мо	DAY	YEAR			
Mailing Address 606 South Arch	n Street		4	8	2015	\$	6,000.00	
City Mechanicsburg State Zip Code (Plus 4)   PA 17055				Description of Expenditure Contribution				
<b>To Whom Paid</b> Brightcove, Inc.			мо	DAY	YEAR			
Mailing Address One Cambridge Center				7	2015	\$	99.00	
City Cambridge	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 02142		otion of Expension		2		
<b>To Whom Paid</b> Cozen O'Connor			мо	DAY	YEAR			
Mailing Address P.O. Box 7247			4	21	2015	\$	30,692.50	
City Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055		otion of Exp siuonal Fee		2		
<b>To Whom Paid</b> Eckert, Seamans, Cherin & M	ellott, LLC		мо	DAY	YEAR			
Mailing Address P.O. Box 64318	37		4	21	2015	\$	69.50	
CityPittsburghStateZip Code (Plus 4)PA152643187				otion of Exp sional Fees		2		
Enter Grand Total of Expenditu	res on Page 1. R	eport Cover Page, Item I	 D.				PAGE TOTAL	
						\$	36,861.00	