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			Repor Filed I		CA	NDI	DATE		COM	AITTEE	Y	LUB	D1131	
Name of Filing C	Committee, Candida	ate or L	obbyist:		Studen	ts Firs	t PAC	3	•							
Street Address:																
City:	Wynnewood						State	e:	PA			Zip Co	de: 19	9096		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		F	POST-	6. X		TERMINA REPORT		Yes	No	\
report type)	ANNUAL REPORT	7.	Year 2016				NG ME					PAPER		₩	DISKE	TTE
Name of Office S	Sought by Candidat	te:	•		-		DAT	ΈO	F ELEC	CTIO	N	District Number	Office Code	Pai	rty Code	County Code
							МО		DAY	YE	AR					
								11		8	2016		(SEE IN	STRUCTI	ONS FOR O	CODES)
Summary of Expenditures	Receipts and from:	МО	DAY	YEAR		-0	МО		DAY		AR	FC	R OFFI	CE USE	ONLY	
			10 25	20	016	ГО		11	2	28	2016					
	ught Forward Fron					\$			- 2	221,5	69.85					
B. Total Monet	ary Contributions <i>I</i>	And Rec	eipts (Fron	n Sched	dule I)	\$					0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			2	221,5	69.85					
D. Total Expend	ditures (From Scho	edule II	1)			\$				20,0	02.00					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$			2	01,5	67.85					
	Kind Contributions				e II)	\$					0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)		\$					0.00					
				AFF:	IDAVI	T SE	CTI	NC								
I swear (or affirm)	s a Committee repo that this report, incl		_						-		_		f my kno	wledge	and belie	ef , true
correct and comple Sworn to and subs	ete. scribed before me this										·:	of Daves	- C. bit	tina Da		
	day of		20			_					ngnature	of Perso	n Submit	ting Ke	рогс	
	Signatu	re				_						Prin	ted Name	е		
My Commission Ex	· —					_						Ema				
	МО		AY	YR	• • •					a Cod	le	Daytin	ie Teleph	none Nu	ımber	
	a report of a cand				•						v provic	ions of th	o act of 1	uno 2 1	027 (B.I	1222
No 320) as amende	ed.	iy Kilowie	euge and ben	iei tilis	pontical	Commi	iittee i	ias ii		eu an	y provis	ions or th	e act of 3	une 3,1	937 (F.L	. 1333,
SWOFN TO AND SUBSC	ribed before me this day of		20								S	ignature (of Candid	ate		
			-			_						Printe	d Name			
My Commission Exp	Signature bires					_						Ema	il			—
	МО	D	AY	YR		-			Area	Code		D	aytime T	elephoi	ne Numb	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
Students First PAC	From:	10/25/20	<u>16</u> To:	11/28/2016
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

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

PAGE TOTAL
0.00

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

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 Filing Committee or	Candidate		Re	porting P	eriod			
			Fro	om:	DATE	To): 	AMOUNT
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	le (Plus 4)					
								PAGE TOTAL

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	0.00
Mailing Address							+	U	.00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0	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	2			Rep	orting Pe	riod			
				Fror	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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		Report	ing Peri	od			
			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 Per	iod	
Students First PAC	From:	<u>10/25/2016</u> To :	<u>11/28/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Ca	ndidate		Reportin	g 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:	•		•				
					Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	ımary Pa	ge,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
Students First PAC			From	10/2	<u>5/2016</u>	То:	11/28/2016
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
TD Bank			140		ILAK		
Mailing Address			10	31	2016	\$	2.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19131	Paper s	tatement f	ee		
To Whom Paid			МО	DAY	YEAR		
Friends of Stephanie Borowie	cz		1-10		12/11		
Mailing Address			11	7	2016	\$	5,000.00
City McElthattan	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
	PA	17748	Contrib	ution			
To Whom Paid			МО	DAY	YEAR		
Friends of Tom Quigley							
Mailing Address			11	7	2016	\$	5,000.00
City Royersford	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	·	
	PA	19468	Contrib	ution			
To Whom Paid			МО	DAY	YEAR		
Friends of Michael Corr			1-10		ILAK		
Mailing Address			11	7	2016	\$	5,000.00
City Collegeville	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	State PA	Zip Code (Plus 4) 19426	Descrip Contrib		enditure		
			Contrib	ution			
City Collegeville					enditure YEAR		
City Collegeville To Whom Paid			Contrib	ution		\$	5,000.00
City Collegeville To Whom Paid Friends of Kevin Boyle			MO 11	DAY	YEAR 2016	\$	5,000.00

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

20,002.00