#### **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				port ed B		CAND	IDATE		СОМ	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		Stuc	dent	s Firs	t PAC	C								
Street Address:	P.O. 416																
City:	Wynnewood							State:	PA			Zip Cod	le: 19	9096			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- [	5.	30 DA		POST-	POST- 6. TERMINATION REPORT?			Yes	No	•	<b>/</b>	
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2016					IG METH CHECK O				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	Sought by Candida	te:			_	_		DATE (	)F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	· ,							МО	DAY	YE	AR	rumber	couc	<u> </u>		couc	
								11		8	2016		(SEE IN	STRUCTI	ONS FOR C	ODES)	)
	Receipts and	МО	DAY	YEAR				МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		11 29	20	016	T	0	12	2	31	2016						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			201,5	67.85						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	ı)	\$				0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			201,5	67.85	-					
D. Total Expen	ditures (From Sch	edule II	I)				\$			176,0	04.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	)			\$			25,5	63.85						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedu	le II	<b>:</b> )	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From 9	Schedule IV)	ı			\$				0.00			•			
				AFF	IDA	۱۷۶	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	[f thi	is is	a Car	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sche	edules	filed	d on p	paper (	or by elec	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 day of	5	20							S	Signature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re					-					Printed Name					_
My Commission Ex	cpires										Email						
	МО	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	Comm	nitte	e, Ca	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief	f this	polit	tical	comm	ittee has ı	not viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this		20								S	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						•										_
My Commission Exp	pires											Ema	11				
	МО	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numbe	er	<sup>-</sup>

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
Students First PAC	From:	11/29/201	<u>6</u> To:	12/31/2016
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

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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 Filing Committee or Ca	andidate		Rep Fro	oorting P m:	eriod	To	<b>)</b> :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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 Can	didate			Rep	orting Pe	riod			
				Froi	m:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	,			Occupa	tion	•	•	
Employer Mailing Address/Princi Business	pal Place of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C o	n Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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 C	Candidate		Report	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 o	n Schedule T. Detailed	l Summary Page.	Section	4.			PAGE TOTA	λL
	Joneau. 2, Journe	. Juliiii y . ugo,					\$ (	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	od	
Students First PAC	From:	11/29/2016 <b>To:</b>	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	eporting F	Period			
				Fr	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4	)					
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ee of Ci	ity	State	•	Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-l	Kind (	Contributions [	etail	led				PAGE TOTAL 0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
Students First PAC			From	11/29	9/2016	То:	12/31/2016
				DATE			AMOUNT
<b>To Whom Paid</b> TD Bank			мо	DAY	YEAR		
Mailing Address 4020 City	Avenue		11	30	2016	\$	2.00
<b>City</b> Philadelphia	State	Zip Code (Plus 4)	Descri	otion of Exp	) Denditure		
Timadelpina	PA	19131		statement			
<b>To Whom Paid</b> Citizens of Kenyatta Johnson			мо	DAY	YEAR		
Mailing Address P.O. Box 7	7466		12	2	2016	\$	1,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19101	<b>Descri</b> Contrib	otion of Expoution	penditure		
<b>To Whom Paid</b> Excellent Schools PA		·	мо	DAY	YEAR		
Mailing Address 150 South	n Independence Mall Wes	t Suite 1002	12	23	2016	\$	175,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19106	<b>Descri</b> Contrib	otion of Expoution	penditure		
<b>To Whom Paid</b> TD Bank			мо	DAY	YEAR		
Mailing Address 4020 City	Avenue		12	31	2016	\$	2.00
4020 City		l=: a				<u> </u>	
4020 City	State	Zip Code (Plus 4)	Descri	otion of Exi	benaiture		
4020 City	<b>State</b> PA	19131		otion of Exp statement		l	
4020 City	PA	19131	Paper s				PAGE TOTAL