# **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			Report Filed B		CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	ate or Lo	bbyist:		Student	-	t PAC								
Street Address:	P.O. Box 416														
City:	Wynnewood						State:	PA <b>Zip Code:</b> 19096							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST- 3.		AMENDMENT REPORT?		Yes	No	<ul> <li>✓</li> </ul>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA					TERMIN/ REPORT		Yes	No	<b>&gt;</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018			FILING METHOD () CHECK ONE					PAPER		$\checkmark$	DISKE	TTE
Name of Office S	bought by Candida	te:					DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR					
							11		6	2018		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:	1	0 23	2	018 <b>T</b>	0	11	2	26	2018					
A. Amount Bro	ught Forward From	n Last Re	eport			\$			5,3	91.40					
B. Total Monet	ary Contributions	And Rece	eipts (From	1 Sche	dule I)	\$				0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			5,3	91.40					
D. Total Expen	ditures (From Scho	edule III	.)			\$			5,0	06.70					
E. Ending Cash	Balance (Subtract	t Line D I	From Line	C)		\$			3	84.70	-				
F. Value Of In-	Kind Contributions	Receive	d (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$				0.00					
				AFF	IDAVI	Γ SE	CTION								
	s a Committee repo ) that this report, incl	-	-								-	6			of heres
correct and compl		uaing the	attached sci	neaules	s filea on j	paper	or by elect	ronic me	earum,	are to t	the best o	т ту кпоч	viedge	and bei	er, true
Sworn to and subs	cribed before me this day of	5	20						Si	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				-					Prin	ted Name	1		
My Commission E	xpires					-					Ema	il			
	мо	DA	Y	YR				Are	a Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, Ca	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of n ed.	ny knowle	dge and beli	ef this	political	comm	ittee has n	ot violat	ed any	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	ribed before me this day of		20							s	ignature (	of Candida	ite		
					Printed Name										
My Commission Exp	Signature pires					-					Ema	il			
	мо	DA	Y	YR				Area (	Code		D	aytime Te	elephor	e Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reportin	g Period		
Students First PAC	From:	<u>10/23/2</u>	<u>018</u> <b>To:</b>	<u>11/26/2018</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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				Reporting Period					
			From:	1		То	:		
		·			DATE			AMOUNT	
Full Name of Contributing Committee			м	10	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

\$

5/5/2024 2:36:29 PM

Use this Part to ite	\$50.0 mize all othe 0.01 to \$250.	00 in the repo	s wi ortin	ith an 1g per	aggreg iod.			rom
Name of Filing Committee or Candidat	e		Rep	orting P	eriod			
From: To:							):	
					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, Detai	led 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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	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	2		Report	ing Perio	od				
From:				m: To:					
				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 Perio	d	
Students First PAC	From:	<u>10/23/2018</u> то:	<u>11/26/2018</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 R				g Period			
	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 Schedule II, In-Kind Contributions Detai Section 2.				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						porting P	eriod			
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	ption of	Contribution

Enter Grand Total of Part G on Schedule II, I	n-Kind Contribu	tions Detaile	d	PAGE TOTAL
Summary Page, Section 3.				0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
Students First PAC			From	<u>10/23/2018</u>		То:	<u>11/26/2018</u>	
				DATE	AMOUNT			
<b>To Whom Paid</b> Friends of Mike Turzai			мо	DAY	YEAR			
Mailing Address PO Box 92			10	23	2018	\$	5,000.00	
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17108	Contribution					
To Whom Paid			мо	DAY	YEAR			
US Postal Service								
Mailing Address 1 union ave			10	24	2018	\$	6.70	
City bala cynwyd	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
	PA	19004	Certified Mail					
							PAGE TOTAL	
Enter Grand Total of Expenditures	; on Page 1,	Report Cover Page, Item I	<b>D</b> .			\$	5,006.70	