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	0165			Repo Filed			CAND	DATE		соми	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:		Stude	ent	s Firs	t PAC									
Street Address:	P.O. Box 416																
City:	Wynnewood							State:	PA			Zip Cod	de: 19	9096			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.7	X	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY I ELECTION	PRE-	- 5.		30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2022					IG METH CHECK O				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	ite:						DATE ()F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR		10000	OTH	l	46	
								11		8	2022		(SEE IN	STRUCTI	ONS FOR (ODES)	
Summary of Expenditures	Receipts and	МО		AR			_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			3 29	20)22	T	U	5	5	2	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			367,2	242.00	42.00					
B. Total Monet	ary Contributions	And Rec	eipts (From Sc	hec	lule I	()	\$		4,	000,0	00.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$		4,	367,2	242.00						
D. Total Expen	ditures (From Sch	edule II	I)				\$		4,	000,0	14.76						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$:	367,2	27.24						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)		\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00						
			A	FFI	[DA\	/I7	ΓSE	CTION									
	s a Committee rep	•							• '		-						
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sched	ules	filed o	on į	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 thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort		
	Signati	ıre					-					Prin	ted Name	•			-
My Commission Ex	kpires											Ema	il				-
	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 Co	mm	ittee,	, Ca	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his	politic	al	comm	ittee has ı	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	i,
Sworn to and subso	ribed before me this										s	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						•										_
My Commission Exp	-											Ema	il				
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	-			
Name of Filing Committee or Candidate	Reporting	Period		
Students First PAC	From:	3/29/202	<u>2</u> To:	5/2/2022
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)			\$	4,000,000.00
TOTAL for the Reporting	Period	(3)	\$	4,000,000.00
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 and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1			\$	4,000,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee	or Candidate		Reporting	Period				
		From: To) :		
		I		DATE			AMOUNT	
Full Name of Contributing C	ommittee		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.

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 Candid	Name of Fining Committee of Candidate				Reporting Period From: To:					
					DATE		AN	4OUNT		
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 Candidate				Rep	orting Pe	riod			
Students First PAC				Fron	n:	<u>3/29/2</u>	<u>022</u> To	:	5/2/2022
					D/	ATE			AMOUNT
Full Name of Contributor Jeffrey Yass					МО	DAY	YEAR		
Mailing 401 City Ave Address							2022	\$	4,000,000.00
City Bala Cynwyd	State	Zi	p Code (Plus	i 4)	4	27	2022		
	PA	19	9004						
Employer Name Self Employed		•			Occupat	ion		1	
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus 4)
401 City Ave			Bala Cyn	wyd		PA		190	004
Enter Grand Total of Part C on Scho	edule I, Detailed	Sumr	mary Page,	Section	on 3.		4	\$	PAGE TOTAL 4,000,000.00

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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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:	3/29/2022 To :	<u>5/2/2022</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 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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Reporti	ng Period			
Students First PAC			From	<u>3/29</u>	9/2022	То:	5/2/2022
				DATE			AMOUNT
To Whom Paid Commonwealth Children's Choice Fu	nd		мо	DAY	YEAR		
Mailing Address 420 N. Third St			4	28	2022	\$	4,000,000.00
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Descrip Contrib	otion of Expoution	penditure		
To Whom Paid U.S. Postal Service			МО	DAY	YEAR		
Mailing Address 326 Conshohocke	n State Rd		4	5	2022	\$	14.76
City Gladwyn	State PA	Zip Code (Plus 4) 19035	1	otion of Exp ed Mailing	enditure		
Enter Grand Total of Expenditure	s on Page 1, R	eport Cover Page, Item I). D.				PAGE TOTAL

4,000,014.76