

Commonwealth of Pennsylvania

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number : 2010165		Report Filed By :		CANDIDATE	COMMITTEE	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: Students First PAC										
Street Address: P.O. Box 416										
City: Wynnewood			State: PA		Zip Code: 19096					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2022	FILING METHOD () CHECK ONE			PAPER	DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR	OTH 46			
				11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		6	7	2022	TO	9	19	2022		
A. Amount Brought Forward From Last Report				\$		357,212.48				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		4,500,000.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		4,857,212.48				
D. Total Expenditures (From Schedule III)				\$		4,420,022.61				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		437,189.87				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Students First PAC	From: <u>6/7/2022</u> To: <u>9/19/2022</u>

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)	\$ 4,500,000.00
TOTAL for the Reporting Period (3)	\$ 4,500,000.00

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 enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 4,500,000.00
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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: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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

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 Candidate	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor		MO	DAY	YEAR	\$	0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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 Candidate	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 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 Students First PAC	Reporting Period From: <u>6/7/2022</u> To: <u>9/19/2022</u>
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			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Jeffrey Yass				
Mailing Address 401 City Ave	9	16	2022	\$ 4,500,000.00
City Bala Cynwyd State PA Zip Code (Plus 4) 19004				
Employer Name Self Employed	Occupation			
Employer Mailing Address/Principal Place of Business 401 City Ave	City Bala Cynwyd		State PA	Zip Code (Plus 4) 19004

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 4,500,000.00

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	Reporting Period
	From: _____ To: _____

			DATE	AMOUNT	
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code (Plus 4)			
Receipt Description					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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 Students First PAC	Reporting Period From: <u>6/7/2022</u> To: <u>9/19/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)	\$ 0.00

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	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 Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code(Plus 4)			
Employer of Contributor			Occupation		
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Students First PAC	From <u>6/7/2022</u> To: <u>9/19/2022</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
Friends of Gail Newman	8	2	2022	\$ 5,000.00
Mailing Address 11 Landmark Dr				
City Malvern	State PA	Zip Code (Plus 4) 19355	Description of Expenditure Contribution	
Friends of Gail Newman	9	19	2022	\$ 10,000.00
Mailing Address 11 Landmark Dr				
City Malvern	State PA	Zip Code (Plus 4) 19355	Description of Expenditure Contribution	
Citizens for Amen Brown	8	15	2022	\$ 40,000.00
Mailing Address PO Box 42857				
City Philadelphia	State PA	Zip Code (Plus 4) 19101	Description of Expenditure Contribution	
CAP PAC	8	24	2022	\$ 250,000.00
Mailing Address 20 Erford Rd Suite 7				
City Lemoyne	State PA	Zip Code (Plus 4) 17043	Description of Expenditure Contribution	
Friends of Martina White	8	24	2022	\$ 25,000.00
Mailing Address PO Box 16041				
City Philadelphia	State PA	Zip Code (Plus 4) 19114	Description of Expenditure Contribution	

To Whom Paid Commonwealth Children's Choice Fund			MO	DAY	YEAR	\$ 3,000,000.00
Mailing Address 420 N. Third St			9	19	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Contribution			
To Whom Paid Forward			MO	DAY	YEAR	\$ 250,000.00
Mailing Address PO Box 83			9	19	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			
To Whom Paid Friends of Scott Martin			MO	DAY	YEAR	\$ 250,000.00
Mailing Address 802 Lightfoot Dr			9	19	2022	
City Lancaster	State PA	Zip Code (Plus 4) 17602	Description of Expenditure Contribution			
To Whom Paid PA HRCC			MO	DAY	YEAR	\$ 300,000.00
Mailing Address PO Box 11787			9	19	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			
To Whom Paid Keystone Leadership PAC			MO	DAY	YEAR	\$ 200,000.00
Mailing Address 704 West Lamb St			9	19	2022	
City Bellefonte	State PA	Zip Code (Plus 4) 16823	Description of Expenditure Contribution			
To Whom Paid Marla Brown for PA			MO	DAY	YEAR	\$ 10,000.00
Mailing Address PO Box 222			9	19	2022	
City New Castle	State PA	Zip Code (Plus 4) 16103	Description of Expenditure Contribution			

To Whom Paid Friends of Rico Elmore			MO	DAY	YEAR	
Mailing Address 302 Reno St			9	19	2022	
City Rochester	State PA	Zip Code (Plus 4) 15074	Description of Expenditure Contribution			
To Whom Paid Friends of Cindy Kirk			MO	DAY	YEAR	
Mailing Address 198 Ridgeview Dr			9	19	2022	
City Wexford	State PA	Zip Code (Plus 4) 15090	Description of Expenditure Contribution			
To Whom Paid Centre County Future PAC			MO	DAY	YEAR	
Mailing Address 237 S. Fraser St PO Box 743			9	19	2022	
City State College	State PA	Zip Code (Plus 4) 16804	Description of Expenditure Contribution			
To Whom Paid May for PA			MO	DAY	YEAR	
Mailing Address 2137 Newton Ransom Blvd.			9	19	2022	
City Clarks Summit	State PA	Zip Code (Plus 4) 18411	Description of Expenditure Contribution			
To Whom Paid Elect Parke Wentling			MO	DAY	YEAR	
Mailing Address PO Box 81			9	19	2022	
City Greenville	State PA	Zip Code (Plus 4) 16125-0081	Description of Expenditure Contribution			
To Whom Paid Committee to Elect Joe Emerick			MO	DAY	YEAR	
Mailing Address 177 Sunnybrook Dr.			9	19	2022	
City Saylorsburg	State PA	Zip Code (Plus 4) 18353	Description of Expenditure Contribution			

To Whom Paid Friends of Kristin Marcel			MO	DAY	YEAR	
Mailing Address 1111 Swamp Rd			9	19	2022	
City Furlong	State PA	Zip Code (Plus 4) 18925	Description of Expenditure Contribution			
To Whom Paid Friends of Tracy Pennycuick			MO	DAY	YEAR	
Mailing Address 937 Clubhouse Dr			9	19	2022	
City Harleysville	State PA	Zip Code (Plus 4) 19433	Description of Expenditure Contribution			
To Whom Paid U. S. Postal Service			MO	DAY	YEAR	
Mailing Address 17 Civic Circle			8	3	2022	
City Merion Station	State PA	Zip Code (Plus 4) 19066	Description of Expenditure Certified Mailing			
To Whom Paid U. S. Postal Service			MO	DAY	YEAR	
Mailing Address 17 Civic Circle			6	10	2022	
City Merion Station	State PA	Zip Code (Plus 4) 19066	Description of Expenditure Certified Mailing			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 4,420,022.61

