Campaign Finance Report

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

Filer Identificat	ion 2010)165			Repo		CA	NDI	DATE		СОМІ	MITTEE	<	LOB	BYIST		
Number :	Committee, Candid	ate or L	obbyist:		Filed	-	rst PAC										
Name of Filing	committee, candid		obbyist.		Stude												
Street Address:	1																
City:	Wynnewood						State	e:	PA			Zip Co	de: 19	096			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	Ρ	POST-	3. X		AMENDN REPORT		Yes	N	D	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	ND FRIDAY PRE- 5. 3 ELECTION				Ρ	POST- 6.			TERMIN/ REPORT		Yes	N	D	\checkmark
report type)	ANNUAL REPORT	7.	Year 2023				LING METHOD) CHECK ONE				PAPER		\checkmark	DISK	ETTE		
Name of Office	L Sought by Candida	te:					DAT	ΈO	F ELE	СТІС	N	District Number	Office Code	Par	ty Code	Cour	
							мо		DAY	YI	AR	Number	coue	OTH	1	46	-
								11		7	2023		(SEE INS	STRUCTI	ONS FOR	CODES	;)
Summary of	Receipts and	мо	DAY	YEAF	۲ I		МО		DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditure	s from:		5 2	2 2	023	то		6		5	2023						
A. Amount Bro	ought Forward From	m Last R	eport				\$			18,9	986.08						
B. Total Monet	tary Contributions	And Rec	eipts (Fror	n Sche	dule I)	\$				0.00]					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			18,9	986.08						
D. Total Exper	nditures (From Sch	edule II	I)				\$				16.26						
E. Ending Cast	n Balance (Subtrac	t Line D	From Line	C)			\$			18,9	69.82						
F. Value Of In-	-Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule I	/)			\$				0.00						
				AFF	IDAV	/IT S	ECTIO	ЛС									
PART I - If this i	is a Committee rep	ort, trea	isurer sign	here.	If this	is a C	andidat	te re	eport, o	andi	date sig	gn here.					
I swear (or affirm correct and comp	ı) that this report, inc lete.	luding the	e attached so	hedule	s filed o	n pape	er or by e	electi	ronic m	edium	, are to	the best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and sub	scribed before me thi day of	5	20							5	Signatur	e of Perso	n Submitt	ing Rep	oort		-
						_						Prin	ted Name				-
My Commission E	Signatu xpires	ile										Ema	il				-
	мо	D	AY	YR					Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		-
Part II- If this is	a report of a can	didate's	authorized	Comr	nittee,	Cand	idate sl	hall :	sign he	ere.							
I swear (or affirm No 320) as amend) that to the best of r led.	ny knowl	edge and bel	ief this	politica	al com	mittee h	nas no	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subscribed before me this											s	ignature	of Candida	ite			-
day of20Printed Name										_							
. <u> </u>	Signature																
My Commission Ex	-											Ema	il				
	мо	D	AY	YR	Ł				Area	Code		D	aytime Te	elephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Students First PAC From: <u>5/2/2023</u> **To:** <u>6/5/2023</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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			мо		DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								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			D:				
					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 Schedule I, Detailed Summary Page, Section 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						
				То:					
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Sched	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						
Fro				om:						
				ATE		AM	AMOUNT			
Full Name of Contributor				DAY	YEAR	\$	0.00			
State	Zip Code (Plu	s 4)								
•			Occupation							
ce of Business	City			State		Zip Code	(Plus 4)			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						PAGE TOTAL \$ 0.00				
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA From: DA MO State Zip Code (Plus 4) Coccupat ce of Business City	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code			

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:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
nter Grand Total of Part E on Schedule I, Detailed Summary Page, Section							\$		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 Period										
Students First PAC	From:	<u>5/2/2023</u> то:	<u>6/5/2023</u>								
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR											
TOTAL for the Reporting Pe	riod (1)	\$	0.00								
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)										
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			Reporting Period						
			From:			То:			
				DATE			AMOUNT		
Full Name of Contributor				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, PAGE TOTAL Section 2.									
						\$	0.00		

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From:							
					DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	ation						
Employer Mailing Address/Principal Plac	City	State	e Zip	Code(Plus 4)	Descri	ption 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

Nam	Name of Filing Committee or Candidate				Reporting Period						
Students First PAC					<u>5/</u>	<u>2/2023</u>	<u>6/5/2023</u>				
					DATE		AMOUNT				
To Whom Paid				мо	DAY	YEAR					
U.S.	Postal Service										
Mailiı	ng Address			5	3	2023	\$	16.26			
City	Bala Cynwyd	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	19004	Certifie	d Mailings						
_								PAGE TOTAL			
Ente	r Grand Total of Expend	D.			\$	16.26					