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 :				Report CANDIDA Filed By:			IDATE		СОМ	ITTEE	✓	LOBI	BYIST				
Name of Filing Committee, Candidate or Lobbyist: STUDENTS FIRST P								RST PAG									
Street Address:	PO BOX 416																
City:	WYNNEWOOI)						State:	PA			Zip Cod	le: 19	19096-0000			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY							AMENDMENT Yes REPORT?			No				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6. X		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2023					IG METH CHECK O				PAPER		\	DISKE	TTE	
Name of Office S	ought by Candida	ite:	•					DATE ()F ELE	CTIC)N	District Number	Office Code	Par	ty Code	Count	ty
								МО	DAY	ΥI	EAR		10000	OTH	1	46	
								11		7	2023		(SEE IN	STRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY Y	'EAR	l			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures			10 24	20	023	T	<u> </u>	11		27	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$		2,	405,	519.38	8					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$				0.00	00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$		2,	405,	519.38						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1	119.88						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)	1			\$		2,	405,3	399.50						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edu	le I	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00						
			,	AFF	ΊD	AVI	ΓSE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign he	ere. 1	[f th	his is	a Can	ndidate r	eport, (candi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	attached sche	dules	file	ed on	paper (or by elec	tronic m	edium	, are to t	he best of	f my kno	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me thi	s	20							5	Signature	of Persoi	1 Submit	ting Rep	ort		_
	Signati	ıre	-				-					Print	ted Name	•			-
My Commission Ex	_											Emai	i				-
	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	omn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belief	this	poli	itical	commi	ittee has ı	not viola	ted ar	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	,
Sworn to and subsc	ribed before me this								Signature of Candidate							-	
	day of ————————————————————————————————————						_					Deit-	d Name				-
	Signature						-		_			Frinte	d Name				_
My Commission Exp	_											Emai	il				_
	МО	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numbe	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
STUDENTS FIRST PAC	From:	10/24/202	<u>3</u> To:	11/27/2023
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 onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE 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 Filling Committee of Camulate				Reporting Period From: To:				
			l		DATE			AMOUNT
Full Name of Contributor				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

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		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary 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	ne of Filing Committee or Candidate			orting Pe	riod			
			Fror	m:		То	:	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name		•		Occupat	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.			PA	GE TOTAL
		, 131,				4	•	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	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	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i>	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 Per	iod	
STUDENTS FIRST PAC	From:	<u>10/24/2023</u> To:	11/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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	TF)		
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:			To:	
				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					Reporting	Period			
					From:		То:		
						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 Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
STUDENTS FIRST PAC			From <u>10/24/2023</u> To:				11/27/2023
				DATE			AMOUNT
To Whom Paid William J Mansfield Inc			МО	DAY	YEAR		
Mailing Address 237 W. Lancaster Ave #231			11	16	2023	\$	102.76
City Devon	State PA	Zip Code (Plus 4) 19333	1	otion of Exp			
To Whom Paid United States Postal Service			МО	DAY	YEAR		
Mailing Address 50 W Wyr	newood Rd		10	26	2023	\$	17.12
City Wynnewood State Zip Code (Plus 4) PA 19096				otion of Exped Mailings	enditure		
	•	•					PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

119.88