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 CANDID		DATE		COM	4ITTEE	✓	LOB	BYIST								
Name of Filing C	ommittee, Candi	date or L	obbyist:		Stuc	lent	s Firs	t PAC						·				
Street Address:																		
City:	Wynnewood							State:		PA			Zip Cod	le: 19	096			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		P	OST-	3. X		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u> 5	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REPOR	r 7.	Year 2025					NG MET CHECK					PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Candid	ate:			-			DATE	Ol	F ELE	CTIC	N	District Number	Office Code	Pai	ty Cod	Cour	
								МО		DAY	YI	EAR			OTI	1	46	
								1	11		4	2025		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of		МО	DAY	YEAR	l			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	trom:		5 6	2	025	Т	0		6		9	2025						
A. Amount Bro	ught Forward Fro	m Last R	Report				\$				8,	371.38						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$,				0.00						
C. Total Funds	Available (Sum C	of Lines A	and B)				\$				8,	371.38						
D. Total Expend	ditures (From Sc	nedule II	Ί)				\$					20.67						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$				8,3	350.71						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedu	le II)	\$;				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	/)			\$,				0.00		•				
				AFF	IDA	VI	T SE	CTIO	N									
PART I - If this is			_															
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attached sc	hedules	s filed	lon	paper	or by ele	ectr	onic m	edium	, are to t	the best of	f my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me th day of	is	20						•		5	Signature	of Perso	n Submitt	ing Re _l	ort		
	Signat	ure					- -		•				Prin	ted Name				_
My Commission Ex	pires						_						Emai	il				
	МО	D	AY	YR						Are	ea Co	le	Daytim	e Teleph	one Nu	mber		$\underline{\underline{\hspace{1cm}}}$
Part II- If this is	a report of a car	ndidate's	authorized	Comn	nitte	e, C	andid	late sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ief this	polit	ical	comm	ittee has	s no	ot viola	ted ar	y provis	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me thi	5	20									S	ignature o	of Candida	ite			_
			_ 20				-						Printe	d Name				-
	Signature	ı					-							_				
My Commission Exp	ires												Emai	II.				
	МО	D	AY	YR			-			Area	Code		Da	ytime Te	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	Period		
Students First PAC	From:	<u>5/6/202</u>	<u>5</u> To:	<u>6/9/2025</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	y 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 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

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 o	Reporting Period						
			From:		То	:	
		•		DATE		АМО	TNUC
Full Name of Contributing Cor	mmittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

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)

(Exclude cont		r ponticui conni		.03 .01	Joi tea	in i di c	~,	
Name of Filing Committee or Cand	idate		Rep	oorting P	eriod			
			Fro	m:		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 Schedule I, Detailed Summary Page, Section 2.

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	nme of Filing Committee or Candidate			Reporting Period					
			From:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOT	AL
Enter Grand Total of Part C on School	dule I, Detailed Sun	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	ame of Filing Committee or Candidate				riod			
			Fro	m:		To) :	
				D	ATE		AI	MOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Pl	ıs 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ice of Business	City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Pag	e, Secti	on 3.			P.	O.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	ing Peri	od			
			From:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Count Total of Dout	Fan Cahadula I Datailad	I Commence Dance C	` !	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	4.			\$	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>5/6/2025</u> To:	<u>6/9/2025</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Car	ame of Filing Committee or Candidate					Reporting Period					
	From:		To	Го:							
				DATE			AMOUNT				
Full Name of Contributor			МО	DAY	YEAR						
Mailing Address						7 \$	C	0.00			
City	State	Zip Code (Plus 4)									
Description of Contribution:	•		•	•		•					
					-						
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pa	ge,		PAGE TOTAL				
Section 2.						\$	0	.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	me of Filing Committee or Candidate				orting	Period				
							То:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.										0.00

PAGE TOTAL

20.67

\$

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
Students First PAC				<u>5/6</u>	<u>5/2025</u>	То:	<u>6/9/2025</u>
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
United States Postal Service			1.10				
Mailing Address			5	6	2025	\$	20.67
City Wynnewood State Zip Code (Plus 4)			Descript	tion of Exp	enditure		
	PA	19096	Certified	d Mailings			

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