



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. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2021	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	2	2021	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:			MO	DAY	YEAR	MO	DAY	YEAR	FOR OFFICE USE ONLY		
			5	4	2021	TO	6	7	2021		
A. Amount Brought Forward From Last Report						\$	72,760.06				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$	20,000.00				
C. Total Funds Available (Sum Of Lines A and B)						\$	92,760.06				
D. Total Expenditures (From Schedule III)						\$	75,014.00				
E. Ending Cash Balance (Subtract Line D From Line C)						\$	17,746.06				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$	0.00				
G. Unpaid Debts And Obligations (From Schedule IV)						\$	0.00				

COUNTY BD. OF ELECTIONS
 2021 JUN 21 P 2:21
 CITY COMMISSIONERS

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
16 day of June 2021
 Signature [Signature]
 My Commission Expires
 MO _____ DAY _____ YEAR _____
 Signature Michael L. Mollen, Notary Public
 Montgomery County
 My commission expires June 14, 2022
 Commission number T225167

Signature of Person Submitting Report
[Signature]
 Printed Name
ROBERT C SACK
 Area Code 610-672-8812 Email SACK@SEB.com
 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 _____ YEAR _____

Signature of Candidate

 Printed Name

 Email

 Area Code _____ Daytime Telephone Number _____

