### **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 :	on 2014	0386			Repoi		CA	MDI	NOTION COMMITTEE   LOBBITS						1131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		Russ D	iamor	nd for	Sta	te Rep	reser	ntative					
Street Address:	PO Box 2211	6					_									
City:	Philadelphia						Stat	e:	PA			Zip Co	de: 19	9136		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 D. PRIM		F	POST- 3.			AMENDMENT REPORT?		Yes	No	<b>~</b>
(place X to the right of	PRE-ELECTION ELECTION ELECTION						F	POST- 6. <b>X</b>			TERMINATION REPORT?		Yes	No	<b>✓</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2014				NG MI					PAPER			DISKE	ΓΤΕ
Name of Office S	ought by Candida	te:					DAT	ΈO	F ELE	CTIC	N	District Number	Office Code	Pari	ty Code	County Code
DEDDECENTATI	VE IN THE GENER	)	EMRIV				МО		DAY	YI	EAR	102	STH	REP	•	38
REFRESENTATI	VE IN THE GENER	VAL ASS	LINDLI					11		4	2014		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	Y	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		10 21	20	014	ТО		11		24	2014					
A. Amount Bro	ught Forward Froi	n Last R	eport			\$	;				105.00					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	5				750.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$	5			8	855.00					
D. Total Expend	ditures (From Sch	edule II	I)			\$	5				0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$	5			8	355.00					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedul	e II)	\$	5				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$	5				0.00					
				AFF	IDAV	IT SE	CTI	NC								
	a Committee rep	-	_								_					
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sc	hedules	filed or	1 paper	or by	elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed before me this day of	S	20							9	Signature	of Perso	n Submit	ting Rep	ort	
	Signatu	re				_						Prin	ted Name	e		
My Commission Ex	_											Ema	il			
	мо	D	AY	YR					Ar	ea Coo	le	Daytin	ne Teleph	none Nur	nber	
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee,	Candid	late s	hall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and beli	ief this	politica	l comn	nittee l	nas n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature	of Candid	ate		
						_						Printe	ed Name			
My Commission Exp	Signature ires					_						Ema	il			—
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
Russ Diamond for State Representative	From:	10/21/2014	<u>4</u> То:	11/24/2014
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)			\$	250.00
TOTAL for the Reporting	Period	(2)	\$	250.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	500.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	750.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Committee or Candidate				porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng 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

### 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 of	Reporting P	eporting Period						
Russ Diamond for State Representative Fro				10/21/	<b>o</b> :	11/24/2014		
		•		DATE			AMOUNT	
Full Name of Contributor Mr. Russ Diamond			мо	DAY	YEAR			
Mailing Address 305 W. S	Sheridan Avenue				2014	\$	100.00	
<b>City</b> Annville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170031251	11	6	2014			
<b>Full Name of Contributor</b> Mr. Russ Diamond			МО	DAY	YEAR			
Mailing Address 305 W. S	Sheridan Avenue					\$	150.00	
<b>City</b> Annville	State	Zip Code (Plus 4)	11	6	2014			
	l PA	170031251	1	I	ı	1		

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

**PAGE TOTAL \$** 250.00

#### **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							
Russ Diamond for State Representative	From:	10/21/2014	То:	11/24/2014				

DATE AMOUNT

Full Name of Contributing Committee  Committee to Elect Brian Ellis				DAY	YEAR	
Mailing Address 103 Deer Run Drive				_		<b>\$</b> 500.00
City Butler	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16001	11	7	2014	

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

**PAGE TOTAL \$**500.00

### 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 Rep			Rep	Reporting Period					
				n:		To	То:		
				D	ATE		АМ	OUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	5 4)						
Employer Name				Occupa	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 Su	ummary Page,	Section	on 3.			PA \$	<b>0.00</b>	

## 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 Candid	Name of Filing Committee or Candidate			Reporting Period					
			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 on Sch	edule T. Detaile	d Summary Page.	Section	4.				PAGE TOTAL	
	caulo 1, Detaile.	a Janimary ruge,		••			\$	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 Peri	od	
Russ Diamond for State Representative	From:	<u>10/21/2014</u> <b>To:</b>	11/24/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	1	
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 Candid	Name of Filing Committee or Candidate								
Fr				From: To:					
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						<b>\$</b>	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					Re	porting	Period				
					From:			То:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor	-1		•			Occupa	ation				
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00	

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (	Reporting Period						
			From			То:	
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure		
							PAGE TOTAL
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D	).			\$	0.00