Campaign Finance Report

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

Filer Identificat	tion	20140)386			Repor		CANDI	DATE	СОМ	MITTEE	\checkmark	LOB	BYIST		
Number : Name of Filing	Committee	- Candida	te or Lo	hbvist:		Filed E	-	RUSS DI								
		/						1000								
Street Address	-							I			1	- 10				
City:	PHILA	DELPHIA	۱ 				-	State:	PA		Zip Co	de: 19	136			_
TYPE OF REPORT	6TH TUESI PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE		30 D/ PRIM		POST-	POST- 3.		AMENDMENT REPORT?		</td <td>lo</td> <td></td>	lo	
(place X to the right of	6TH TUESI PRE-ELECT		4.	2ND FRIDA ELECTION	y pre	≣- 5.	30 D/ ELEC		POST- 6.			TERMINATION REPORT?		۱	lo	\checkmark
report type)	ANNUAL I	REPORT	7.	Year 2016				NG METHO			PAPER		\checkmark	DISK	ETTE	
Name of Office	Sought by	Candidat	e:					DATE O	F ELEC	TION	District Number		Pa	ty Cod	e Cou Cod	
								мо	DAY	YEAR	102	STH	REF)	38	
REPRESENTAT	IVE IN THE	E GENER	AL ASSI	EMBLY				11		8 2016	5	(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of	Receipts	and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	DR OFFIC	E USE	ONL	(
Expenditure	s from:			3 8	2	016 T	0	4	1	1 2010	5					
A. Amount Bro	ought Forw	ard From	Last Re	eport			\$		-	3,098.50)					
B. Total Mone	tary Contril	butions A	nd Rece	eipts (From	n Sche	dule I)	\$		14,385.00							
C. Total Funds	s Available	(Sum Of	Lines A	and B)			\$			17,483.50)					
D. Total Exper	nditures (Fr	rom Sche	dule III	[)			\$			8,021.55	5					
E. Ending Cas	h Balance (Subtract	Line D	From Line	C)		\$			9,461.95						
F. Value Of In	-Kind Conti	ributions	Receive	ed (From S	chedu	le II)	\$			0.00						
G. Unpaid Deb	ots And Obli	igations ((From S	chedule IV	')		\$			0.00						
					AFF	IDAVI	T SE	CTION								
PART I - If this	is a Commi ^s	ttee repo	ort, trea	surer sign	here. 🛛	If this is	a Ca	ndidate re	eport, ca	andidate s	ign here.					
I swear (or affirn correct and comp		eport, inclu	iding the	attached scl	hedule	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and be	lief , t	rue
Sworn to and sub	scribed befor day of	re me this		20						Signatu	re of Perso	on Submitt	ing Re	port		-
							_				Prir	nted Name				-
My Commission I	Expires	Signatur	e								Ema	ail				_
	M	40	DA	١Y	YR		_		Area	a Code	Daytin	ne Teleph	one Nu	mber		—
Part II- If this is	s a report o	of a cand	idate's a	authorized	Comn	nittee, C	Candid	ate shall	sign he	re.						
I swear (or affirm No 320) as amend		e best of m	y knowle	dge and beli	ef this	political	comm	iittee has n	ot violato	ed any provi	sions of th	e act of Ju	ine 3,1	937 (P	.L. 133	33,
Sworn to and subscribed before me this											Signature	of Candida	ite			-
	day of						_				Print	ed Name				_
	Si	ignature					_									_
My Commission Ex	pires										Ema	ail				
		мо	DA	AY	YR	2	-		Area C	ode	D	aytime Te	elephor	ne Num	ber	-

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF RUSS DIAMOND	From:	<u>3/8/201</u>	<u>6</u> To:	<u>4/11/2016</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	g 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 ar 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 or Candidate				porting	Period			
						1		
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
			_					
Enter Grand Total of Part A on Sche	dule I, Detailed Sun	nmary Page, Se	ectio	n 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 Candida	te		Rep	orting P	eriod			
			Fror	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address		_					\$	0.00
City	City State Zip Code (Plus 4)							
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	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	MOUNT	
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	lule I, Detailed Sun	nmary Pa	age, Sectio	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					
Fre				From:			То:		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

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: To:							
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	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		
FRIENDS OF RUSS DIAMOND	From:	<u>3/8/2016</u> то:	<u>4/11/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
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 R			Reporting Period					
F			From:			То:		
				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 Scl Section 2.	nedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

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

Name of Filing Committee or Candidate				porting I	Period	Reporting Period				
						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 Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
	From			То:			
				DATE			AMOUNT
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City State Zip Code (Plus 4)				tion of Exp	enditure		
Enter Grand Total of Exponditures	`				PAGE TOTAL		
Enter Grand Total of Expenditures of	JII Page 1, Report C	lover Page, menn i				\$	0.00

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