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 : | ion 2014 | 0386 | | | Repor Filed E | | CANDI | DATE | COM | MITTEE | ✓ | LOBI | BYIST | |
|--|------------------------------------|-------------|-----------------------|----------|------------------|---------------|---------------------|------------|--------------|--------------------|-----------------------|--------------|-----------|----------------|
| Name of Filing C | Committee, Candida | ate or Lo | obbyist: | | | - | USS FRIE | NDS O | F | | | | | |
| Street Address: | Street Address: 305 W SHERIDAN AVE | | | | | | | | | | | | | |
| City: | ANNVILLE | | | | | | State: | PA | | Zip Co | de: 17 | 003 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE- | - 2. | 30 D/ PRIM | | POST- | 3. | | AMENDMENT REPORT? | | No | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | - 5. | 30 D/ ELEC | | POST- | 6. | TERMIN REPORT | | Yes | No | \checkmark |
| report type) | ANNUAL REPORT | 7. X | Year 2021 | | | | NG METHO CHECK O | | | PAPER | | \checkmark | DISKE | TTE |
| Name of Office S | Sought by Candidat | te: | | | | | DATE O | F ELEC | TION | District Number | | Par | ty Code | County Code |
| | 5 / | | | | | | мо | DAY | YEAR | Tunber | Couc | | | couc |
| | | | | | | | 11 | : | 2 202 | · | (SEE INS | STRUCTI | ONS FOR (| CODES) |
| | Receipts and | мо | DAY | YEAR | | | мо | DAY | YEAR | F | OR OFFIC | E USE | ONLY | |
| Expenditures | s from: | 1 | 11 23 | 20 | 021 T | 0 | 12 | 3 | 1 202 | 1 | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | \$ | | | 7,385.30 |) | | | | |
| B. Total Monet | ary Contributions A | And Rec | eipts (Fron | n Schee | dule I) | \$ | | | 420.00 |) | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | \$ | ; | | 7,805.30 | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | \$ | | | 1,157.86 | 5 | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | \$ | | | 6,647.44 | | | | | | |
| F. Value Of In- | Kind Contributions | Receive | ed (From S | chedul | le II) | \$ | | | 0.00 |) | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | Schedule IV | /) | | \$ | • | | 0.00 | | | | | |
| | | | | AFF | IDAVI | T SE | CTION | | | | | | | |
| PART I - If this is | s a Committee repo | ort, trea | surer sign | here. I | (f this is | a Ca | ndidate re | eport, ca | andidate s | ign here. | | | | |
| I swear (or affirm correct and compl |) that this report, incl ete. | uding the | e attached sc | hedules | filed on | paper | or by elect | ronic me | dium, are to | the best o | of my knov | vledge | and beli | ef , true |
| Sworn to and subs | cribed before me this day of | ; | 20 | | | | | | Signatu | re of Perso | on Submitt | ing Rep | oort | |
| | Signatur | | | | | - | | | | Prir | nted Name | 1 | | |
| My Commission E | - | | | | | | | | | Ema | ail | | | |
| | мо | DA | AY | YR | | _ | | Area | a Code | Daytin | ne Teleph | one Nu | mber | |
| Part II- If this is | a report of a cand | lidate's | authorized | Comm | nittee, C | andid | ate shall | sign he | re. | | | | | |
| I swear (or affirm) No 320) as amendo | that to the best of med. | ıy knowle | edge and beli | ief this | political | comm | littee has n | ot violate | ed any provi | sions of th | ne act of Ju | ine 3,1 | 937 (P.L | . 1333, |
| Sworn to and subso | ribed before me this day of | | 20 | | | | | | | Signature | of Candida | ite | | |
| | | | | | | - | | | | Print | ed Name | | | |
| My Commission F | Signature | | | | | - | | | | Ema | ail | | | |
| My Commission Exp | ores | | | | | _ | | | | | | | | |
| | мо | D | AY | YR | | | | Area C | ode | D | aytime To | elephon | e Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** DIAMOND, RUSS FRIENDS OF From: <u>11/23/2021</u> To: 12/31/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 220.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 200.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 200.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 420.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 | | | | Reporting Period | | | | | | |
|--|-------|------------------|----|------------------|------|------|----|------------|--|--|
| | | | | From: To: | | | | | | |
| | | · | | | 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 Schedule I, Detailed Summary Page, Section 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 Can | Rep | orting P | eriod | | | | | | | | |
| DIAMOND, RUSS FRIENDS OF From | | | | m: | <u>11/23</u> |): | <u>12/31/2021</u> | | | | |
| | | | DATE | | | AMOUNT | | | | | |
| Full Name of Contributor Fred Dewey | | | | мо | DAY | YEAR | | | | | |
| Mailing Address 475 Church Rd | | | | | | | \$ | 100.00 | | | |
| City Devon | State PA | Zip Code (Plus 4 19333 |) | 12 | 6 | 2021 | | | | | |
| Full Name of Contributor Fred Dewey | | | | мо | DAY | YEAR | | | | | |
| Mailing Address 475 Church Ro | | | | | | | \$ | 100.00 | | | |
| City Devon | State PA | Zip Code (Plus 4 19333 |) | 12 | 3 | 2021 | | | | | |
| | | PAGE TOTAL | | | | | | | | | |
| Enter Grand Total of Part A | \$ | 200.00 | | | | | | | | | |

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 | | | AMOUNT | |
| 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 Schedule I, Detailed Summary Page, Section 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 | | | | | |
|--|-------|--------------|-------|------------------|-------|------|---------------------------|------------|--|
| From: | | | | m: To: | | |): | | |
| | | | | D | ATE | | AMOUNT | | |
| 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 Place of Business City | | | | • | State | | Zip Code | e (Plus 4) | |
| Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. | | | | | | | PAGE 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 Candi | Name of Filing Committee or Candidate | | | Reporting Period | | | | | | | |
|-----------------------------------|---------------------------------------|-----------------|---------|------------------|-----|------|----|---------|------|--|--|
| | | | | om: To: | | | | | | | |
| | | | | D | ATE | | | AMOUN | r | | |
| Full Name | | | | мо | DAY | YEAR | \$ | | 0.00 | | |
| Mailing Address | | | | | | | | | | | |
| City | State | Zip Code (| Plus 4) | | | | | | | | |
| Receipt Description | | | | I | 1 | - I | | | | | |
| | | | | | | | | PAGE TO | TAL | | |
| Enter Grand Total of Part E on Sc | nedule I, Detailed | i Summary 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 | | | | | | | | | | |
|---|------------------|-----------------------|-------------------|--|--|--|--|--|--|--|--|
| DIAMOND, RUSS FRIENDS OF | From: | <u>11/23/2021</u> то: | <u>12/31/2021</u> | | | | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 | | | Reporting | porting 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 Schedule II, In-Kind Contributions Detailed Summary Page, PAGE TOTAL Section 2. | | | | | | | | | |
| | | | | | | \$ | (| 0.00 | |

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

| Name of Filing Committee or Candidate | Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|--|---------------------------------------|------------------|-------|--------|------------------|---------------------------|-----------------------|--|--|--|--|
| | | | | From: | | | | | | | |
| | | | | | 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 Place of Business | | City | State | e Zip | Code(Plus 4) | Descri | ption of Contribution | | | | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | PAGE TOTAL 0.00 | | | | | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reporti | Reporting Period | | | | | | |
|---|----------------------|--------------------------|----------------------------|------------------|---------------|-----|-------------------|--|--|--|
| DIAMOND, RUSS FRIENDS OF | | | From | <u>11/2</u> | <u>3/2021</u> | То: | <u>12/31/2021</u> | | | |
| | | | | DATE | | | AMOUNT | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| USPS | | | | | | | | | | |
| Mailing Address 51 N Lancaster St | | | 12 | 29 | 2021 | \$ | 232.00 | | | |
| City ANNVILLE | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| PA 17003 | | | | e | | | | | | |
| To Whom Paid PayPal | | | | DAY | YEAR | | | | | |
| Mailing Address 2221 North First Street | | | 12 | 31 | 2021 | \$ | 19.08 | | | |
| City San Jose State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | • | | | | |
| | СА | 95131 | PayPal | fees | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Jim Buchanan VO | | | 110 | | | | | | | |
| Mailing Address 720 Hillcres | t Rd | | 12 | 31 | 2021 | \$ | 300.00 | | | |
| City York | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | PA | 17403 | Adverti | sing & Pror | notion | | | | | |
| To Whom Paid RAINTREE | | | мо | DAY | YEAR | | | | | |
| Mailing Address 305 W Sher | idan Ave | | 12 | 5 | 2021 | \$ | 606.78 | | | |
| City ANNVILLE | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | 1 | | | | |
| | PA | 17003 | Adverti | sing & Pror | notion | | | | | |
| · · · | | | | | | | PAGE TOTAL | | | |
| Enter Grand Total of Expend | itures on Page 1, Re | eport Cover Page, Item l | U. | | | \$ | 1,157.86 | | | |