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		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		DIAMO	ND, R	USS FRIE	NDS OI	=					
Street Address: 305 W SHERIDAN AVE														
City:	ANNVILLE						State: PA Zip Code:				de: 17	003		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA PRIM		POST-	3.	AMENDI REPORT		Yes	Nc	 Image: A start of the start of
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D/ ELEC	AY F TION	POST-	POST- 6.		ATION ?	Yes	Nc	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2021				NG METHO CHECK O			PAPER VISKETT				TTE
Name of Office S	Sought by Candidat	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
	,						мо	DAY	YEAR	Humber	coue			coue
				11		2 2021	 	(SEE INS	TRUCTI	ONS FOR	CODES)			
	Receipts and	мо	DAY	YEAR	1		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:	:	11 23	20	021	Ю	12	3	1 2021					
A. Amount Bro	ught Forward Fron	n Last R	eport	-		\$			7,385.30					
B. Total Monetary Contributions And Receipts (From Schedule I)						\$	5		420.00					
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)						;		7,805.30					
D. Total Expen	ditures (From Sche	edule II	I)			\$;		1,157.86					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$	5		6,647.44					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$;		0.00	4				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		\$			0.00					
				AFF	IDAV	IT SE	CTION							
PART I - If this is	s a Committee repo	ort, trea	surer sign	here. 1	lf this i	s a Ca	ndidate re	eport, ca	andidate si	gn here.				
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedules	s filed or	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						Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signatu	re				_				Prir	ted Name			
My Commission E	-					_				Ema	il			
	МО	D	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, (Candid	late shall	sign he	re.					
I swear (or affirm) No 320) as amendo) that to the best of n ed.	ıy knowle	edge and beli	ief this	politica	comm	ittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subscribed before me this							of Candida	ite						
						_				Printe	ed Name			
Signature														
My Commission Exp	bires									Ema	111			
	мо	D	AY	YR		_		Area C	ode	D	aytime Te	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.)

PAGE 3

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					
Fror					:			
		•		DATE			AMOUNT	
Full Name of Contributing Com	mittee		мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
						Γ	PAGE TOTAL	

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

0.00

\$

Use this Part to it	emize all othe 50.01 to \$250.	1 TO \$250.00 r contribution 00 in the repo	s w ortir	ith an ng peri	aggreg iod.			rom
Name of Filing Committee or Candida	te		Rep	orting Po	eriod			
DIAMOND, RUSS FRIENDS OF	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	3	2021		
Full Name of Contributor Fred Dewey				мо	DAY	YEAR		
Mailing Address 475 Church Rd				10		2024	\$	100.00
City Devon	State PA	Zip Code (Plus 4) 19333		12	6	2021		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								PAGE TOTAL 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		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary 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	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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:				m: To:					
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	Section				\$		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 Perio	d	
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 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, I		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
Fr						То:		
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

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

Name of Filing Committee or Candidate				Re	Reporting Period					
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(P	lus 4)						
Employer of Contributor	I		1			Occupat	tion	-		
Employer Mailing Address/Principa Business	l Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
				_						PAGE TOTAL

- 1	Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAG

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	Reporting Period				
DIAMOND, RUSS FRIENDS OF			From	<u>11/23</u>	<u>3/2021</u>	То:	<u>12/31/2021</u>	
				DATE			AMOUNT	
To Whom Paid USPS			мо	DAY	YEAR			
Mailing Address 51 N Lancaster St			12	29	2021	\$	232.00	
City ANNVILLE State Zip Code (Plus 4) PA 17003				Description of Expenditure postage				
To Whom Paid PayPal			мо	DAY	YEAR			
Mailing Address 2221 North First St	reet		12	31	2021	\$	19.08	
City San Jose	State CA	Zip Code (Plus 4) 95131	Descri PayPal	ition of Exp fees	penditure	1		
To Whom Paid Jim Buchanan VO			мо	DAY	YEAR			
Mailing Address 720 Hillcrest Rd			12	31	2021	\$	300.00	
City _{York}	State PA	Zip Code (Plus 4) 17403		otion of Exp sing & Pro		1		
To Whom Paid RAINTREE			мо	DAY	YEAR			
Mailing Address 305 W Sheridan Av	e		12	5	2021	\$	606.78	
City ANNVILLE	State PA	Zip Code (Plus 4) 17003	-	sing & Pro		1		
Enter Grand Total of Expenditures	on Page 1, Repor	t Cover Page, Item I).			\$	PAGE TOTAL 1,157.86	