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			Rep File			CAND	IDATE		СОМ	4ITTEE	✓	LOBE	YIST	
Name of Filing C	committe	e, Candid	ate or L	obbyist:	•	DIAI	MON	ID, RU	JSS FRI	ENDS ()F						
Street Address:	305	W SHERI	DAN AV	E													
City:	ANN	VILLE							State:	PA			Zip Cod	le: 17	7003		
TYPE OF REPORT	6TH TUES		1.	2ND FRIDAY PRIMARY	Y PRE-	. 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUES		4.	2ND FRIDAY ELECTION	Y PRE	- 5	5.	30 DA ELECT		POST-	6. X		TERMINA REPORT		Yes	No	~
report type)	ANNUAL	. REPORT	7.	Year 2022					IG METH CHECK (PAPER				ГТЕ
Name of Office S	ought by	/ Candida	te:	-					DATE	OF ELE	CTIC	N	District Number	Office Code	Part	ty Code	County Code
									МО	DAY	ΥI	EAR	102	STH	REP		38
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY					1	1	8	2022		(SEE IN	STRUCTIO	ONS FOR C	ODES)
Summary of		s and	МО	DAY	YEAR				МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:		-	10 25	20)22	Т	0	1	1	28	2022					
A. Amount Bro	ught For	ward Fron	n Last R	eport				\$			5,0	087.47					
B. Total Monet	ary Contr	ributions A	And Rec	eipts (From	Sche	dule	I)	\$				0.00					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			5,0	087.47					
D. Total Expend	ditures (I	From Sch	edule II	I)				\$			3	398.21					
E. Ending Cash	Balance	(Subtract	Line D	From Line C	C)			\$			4,6	89.26					
F. Value Of In-	Kind Con	tributions	Receiv	ed (From So	chedul	e II)	\$				0.00					
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV)			\$			10,0	00.00			•		
					AFF	IDA	١٧٧	T SE	CTION								
PART I - If this is		-	-	_								_					
I swear (or affirm) correct and complete		report, incl	uding the	attached sch	nedules	filed	d on	paper o	or by elec	tronic m	edium	, are to t	the best o	f my knov	wledge a	and belie	ef , true
Sworn to and subs	cribed bef day of	ore me this	:	20							S	Signature	of Perso	n Submit	ting Rep	ort	
		Signatu	re					-					Prin	ted Name	9		
My Commission Ex	cpires												Ema	il			
		МО	D	AY	YR					Ar	ea Coo	ie	Daytim	e Teleph	one Nui	nber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comm	itte	e, C	andida	ate shal	l sign h	ere.						
I swear (or affirm) No 320) as amende		ne best of n	ny knowle	edge and belie	ef this	polit	ical	commi	ittee has	not viola	ted ar	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc		re me this										s	ignature o	of Candid	ate		
	day of —			_ 20				-					Printo	d Name			
		Signature						-					Fillice				
My Commission Exp													Ema	il			
	_	мо	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
DIAMOND, RUSS FRIENDS OF	From:	10/25/202	<u>2</u> To:	11/28/2022
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	y 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	J 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 an 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

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			From:			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	or Candidate		Rep Fro	oorting P	eriod	To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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

PAGE TOTAL \$ 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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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	orting Pe	riod				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 0.00

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 Ca	ndidate		Repor	ting Perio	od			
			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	Schedule T Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	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 Peri	od	
DIAMOND, RUSS FRIENDS OF	From:	10/25/2022 To:	11/28/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	₹	
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 Candidat	:e		Reporting	g Period			
			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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

						DATE		4	AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)					
Employer of Contributor					Occupa	tion		l	
Employer Mailing Address/P Business	rincipal Place of	City	Stat	•	Zip 4)	Code(Plus	Descri	ption of C	ontribution
Enter Grand Total of Par Summary Page, Section		, In-Kind	Contributions I	etail	ed			ı	PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reporti	ng Period			
DIAMOND, RUSS FRIENDS OF			From	10/2	5/2022	То:	11/28/2022
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Constant Contact							
Mailing Address 1601 Trape	lo Road		10	25	2022	\$	47.70
City Waltham	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	<u>'</u>	
	MA	02451	Adverti	sing & Pro	motion		
To Whom Paid Constant Contact			мо	DAY	YEAR		
Mailing Address 1601 Trape	lo Road		11	25	2022	<u> </u>	47.70
City	State	Zip Code (Plus 4)					47.70
City Waltham	MA	02451		otion of Exp sing & Pro		•	
To Whom Paid Meta Platforms, Inc	<u>'</u>		МО	DAY	YEAR		
Mailing Address 1 Facebook	Way		11	1	2022	\$	26.87
City Menlo Park	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<u> </u>	
	CA	94025	Adverti	sing & Pro	motion		
To Whom Paid Network Solutions, LLC			МО	DAY	YEAR		
Mailing Address 5335 Gate	Parkway		11	7	2022	\$	25.94
City Jacksonville	State FL	Zip Code (Plus 4) 32256		otion of Exp sing & Pro		2	
To Whom Paid Steven Wolfe	·		мо	DAY	YEAR		
Mailing Address 2023 Hill St	reet		11	11	2022	\$	250.00
City Lebanon	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<u> </u>	
	PA	17046		sing & Pro			
	.	•	•				PAGE TOTAL
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item I).			1	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
DIAMOND, RUSS FRIENDS OF			From:	<u>10/25/2022</u> To:			<u>1</u>	11/28/2022	
					DATE			Outstanding Balance of Debt	
Name of Creditor Russ Diamond				мо	DAY	YEAR			
Mailing Address 305 W Sheridan Ave				4	1	2022	\$	10,000.00	
City ANNVILLE	State PA	Zip Code (Pl 17003	us 4)	Description of Debt Loan to campaign					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	PAGE TOTAL 10,000.00	