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	20140	386				Repo			CAN	IDI	DATE		COM	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, C	Candida	te or Lo	bbyis	st:		DIAM	ION	ID, RI	USS F	RIE	NDS C)F							
Street Address:	305 W S	SHERID	AN AV	E																
City:	ANNVILL	LE								State	:	PA			Zip Cod	le: 17	003			
TYPE OF REPORT	6TH TUESDA' PRE-PRIMAR		1.	2ND I PRIM	FRIDAY ARY	PRE-	2.		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	√
(place X to the right of	6TH TUESDA' PRE-ELECTIO		4.	2ND I	FRIDAY TION	PRE-	- 5.		30 DA		Р	OST-				TERMINATION REPORT?		N	0	√
report type)	ANNUAL RE	PORT	7. X	Year	2022					CHECK		_			PAPER		√	DISK	ETTE	
Name of Office S	ought by Ca	ndidate	e:				•			DATE	E OI	F ELE	CTIC)N	District Number	Office Code	Par	ty Cod	e Cour	
REPRESENTATI	VE IN THE C	SENER/	22A 1	EMRI	V					МО		DAY	Y	EAR	102	STH	REP	•	38	
	<u> </u>	JEIVEIV									11		8	2022		(SEE INS	TRUCTI	ONS FO	CODES)
Summary of Expenditures		nd	МО	DA		YEAR		_	^	МО		DAY		EAR	FO	R OFFIC	E USE	ONLY	,	
-				.1	29	20)22	T(1		1		2	2023						
A. Amount Broo						C - l			\$				4,	50.00						
B. Total Moneta	-				`	Sched	iuie i	.)	\$					30.00						
C. Total Funds					3)				\$					739.26						
D. Total Expend	•								\$					296.25						
E. Ending Cash	•								\$				4,4	43.01						
F. Value Of In-							e II)		\$					0.00						
G. Unpaid Debt	s And Obliga	ations (From S	chedi	ule IV))			\$				10,0	00.00						_
										CTIO										
PART I - If this is I swear (or affirm)		-	•		_									_		F my knou	dodao	and ha	liaf tr	
correct and comple		ort, inciu	aing the	attaci	neu scn	ledules	mea	on j	рарег	ог ву е	iectr	onic me	ealum	, are to t	ne best o	г ту кноч	neage	апи ве	iler , tr	ue
Sworn to and subs	cribed before i day of	me this		20									9	Signature	of Perso	1 Submitt	ing Rep	ort		
	- <u> </u>	Signature	.	_					-						Prin	ted Name				- $ $
My Commission Ex	pires								_		-				Emai	il				
	МО		D/	λY		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of	a candi	date's	autho	rized (Comm	ittee	, Ca	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	/ knowle	edge ar	nd belie	ef this p	politio	cal	comm	ittee ha	as no	ot viola	ted ar	y provis	ions of the	e act of Ju	ne 3,1	937 (P	L. 133	3,
Sworn to and subsc		ne this												s	ignature o	f Candida	te			-
	day of 								-						Printe	d Name				-
	Sign	nature							-		_									_
My Commission Exp	ires														Ema	il				
		40	DA	ΑY		YR			•			Area	Code		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DIAMOND, RUSS FRIENDS OF	From:	11/29/202	22 To :	1/2/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	50.00
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	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	Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	50.00

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 Candidat	e	R	eporting	Period			
		F	rom:		То	I	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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.

Name of Filing Comm	nittee or Candidate	1	Reporting	Period			
			From:		To	o:	
		L		DATE			AMOUNT
Full Name of Contribut	or		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
	•	•			•		
							PAGE TOTAL

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		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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			Re	eporting Pe	riod			
			Fr	om:		To) :	
				Di	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	us 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Pag	e, Sec	tion 3.			\$	PAGE TOTAL 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 Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	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 Per	iod	
DIAMOND, RUSS FRIENDS OF	From:	11/29/2022 To :	1/2/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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 Car	ndidate		Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								֓֟֟֓֓֟֟֓֓֓֓֓֟֟֓֓֓֟֟֓֓֟֓֓֟֓֓֟֟֓֓֟֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟	\$ 0	.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Zi	p Code(Plus 4)	Descr	ipti	on of Contribution	1
Enter Grand Total of Part G on Sch	edule II. In-Kir	nd (Contributions D	etaile	ed				PAGE TOTA	,L
Summary Page, Section 3.									0	.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting			
DIAMOND, RUSS FRIENDS OF	From	11/29/2022	То:	1/2/2023

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
Meta Platforms, Inc			140		ILAK			
Mailing Address 1 Facebook Way			11	30	2022	\$	222.61	
City Menlo Park	State	Zip Code (Plus 4)	Description of Expenditure					
	CA	94025	Advertis	sing & Pror	notion			
To Whom Paid			МО	DAY	YEAR			
Network Solutions, LLC			140		ILAK			
Mailing Address 5335 Gate Parkway			12	5	2022	\$	25.94	
City Jacksonville	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	FL	32256	Advertising & Promotion					
To Whom Paid			МО	DAY	YEAR			
Constant Contact			МО	DAI	ILAK			
Mailing Address 1601 Trapelo Road	d		12	25	2022	\$	47.70	
City Waltham	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	MA	02451	Advertis	sing & Pror	notion			
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	296.25		

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:	11/29/2022 To :				1/2/2023	
					DATE			tstanding lance 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	Zip Code (Plus 4)			Description of Debt				
	PA 17003				Loan to campaign				
								PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	10,000.00	