### **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 :	<b>on</b> 20	140386					port ed B		CAN	IDIDATE COMMITTEE LOBBYIST									
Name of Filing C	Committee, Cand	lidate or I	Lobb	byist:	•	DIA	MON	ND, RI	USS FF	RIE	NDS (	)F							
Street Address:	305 W SHE	RIDAN A	VE																
City:	ANNVILLE								State:		PA			Zip Cod	<b>le:</b> 17	7003			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ND FRIDAY RIMARY	/ PRE-	- [	2.	30 DA		Р	OST-	3.		AMENDM REPORT		Yes	] [	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ND FRIDAY LECTION	/ PRE	- !	5.	30 DA		Р	OST-	6.		TERMINA REPORT		Yes	1 1	No	<b>/</b>
report type)	ANNUAL REPO	<b>₹Т</b> 7. <b>Х</b>	Ye	<b>ear</b> 2022					IG MET					PAPER		<b>V</b>	DIS	KETTE	
Name of Office S	Sought by Candi	date:							DATE	0	F ELE	CTI	ON	District Number	Office Code	Pai	rty Co	de Cou	
	,								МО		DAY	Y	EAR	102	STH	REF	·	38	
REPRESENTATI	VE IN THE GEN	ERAL ASS	SEM	1BLY						11		8	2022	<u> </u>	(SEE IN	STRUCTI	ONS F	R CODE:	5)
	Receipts and	МО		DAY	YEAR				МО		DAY	Y	'EAR	FC	R OFFI	CE USE	ONL	Y	
Expenditures	from:		11	29	20	022	Т	0		1		2	2023						
A. Amount Bro	ught Forward F	om Last I	Rep	ort				\$				4,	.689.26						
B. Total Moneta	ary Contributior	s And Re	ceip	ots (From	Sche	dule	· I)	\$					50.00						
C. Total Funds	Available (Sum	Of Lines	A an	nd B)				\$				4,	739.26						
D. Total Expend	ditures (From S	chedule I	II)					\$					296.25						
E. Ending Cash	Balance (Subtr	act Line D	Fro	om Line C	c)			\$				4,	443.01	]					
F. Value Of In-	Kind Contribution	ons Receiv	ved	(From Sc	hedul	le II	:)	\$					0.00						
G. Unpaid Debt	s And Obligatio	ns (From	Sch	nedule IV	)			\$				10,	000.00			•			
					AFF	IDA	١٧٢	T SE	CTIO	N									
PART I - If this is	s a Committee r	eport, tre	asu	rer sign h	nere. 1	[f th	is is	a Car	ndidate	re	port, o	cand	idate si	gn here.					
I swear (or affirm) correct and comple		ncluding th	ne at	tached sch	edules	filed	d on	paper	or by el	ectr	onic m	ediur	n, are to	the best o	f my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me	:his	20	0									Signatur	e of Perso	n Submit	ting Re	port		
	Sign:	ature						- -						Prin	ted Name	<b>=</b>			
My Commission Ex	-	iture								-				Ema	il				_
	мо	Г	DAY		YR						Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	andidate's	au	thorized	Comm	nitte	e, C	andid	ate sha	all s	sign h	ere.							
I swear (or affirm) No 320) as amende		of my know	ledg	e and belie	ef this	polit	tical	comm	ittee ha	s no	ot viola	ted a	ny provis	ions of th	e act of J	une 3,1	937 (	P.L. 133	33,
Sworn to and subsc		nis											S	ignature o	of Candid	ate			-
	day of —— ———		20					-						Printe	d Name				-
	Signatu							-											_
My Commission Exp	ires													Ema	il				
	МО	Г	DAY		YR			•			Area	Code	ı	Da	aytime T	elephor	ne Nu	nber	_

# 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	<u>2</u> To:	1/2/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	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			\$	50.00

#### **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			
			Fre	om:		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.

### 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	Candidate		Rep	oorting P	eriod			
			Fro	m:		To	<b>o</b> :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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	<b>)</b> :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 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 C	andidate		Repor	ting Perio	od			
			From:			To:		
				D	ATE		АМ	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description		·					•	
Enter Grand Total of Part E or	n Schedule T. Detailed	d Summary Page	Section	4			PAC	GE TOTAL
	Juliania I Detaile	a cannual y 1 age,	2001011	••			\$	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 <b>To:</b>	1/2/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

#### **SCHEDULE III STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate	R	Reporting Period					
DIAMOND, RUSS FRIENDS OF	Fi	rom	11/29	9/2022	To:	1/2/2023	
			DATE			AMOUNT	
To Whom Paid		мо	DAY	YEAR			

				DATE			AMOUNT
<b>To Whom Paid</b> Meta Platforms, Inc			мо	DAY	YEAR		
Mailing Address 1 Facebook	c Way		11	30	2022	\$	222.61
City Menlo Park  CA  Zip Code (Plus 4)  94025			Description of Expenditure Advertising & Promotion				
<b>To Whom Paid</b> Network Solutions, LLC			МО	DAY	YEAR		
Mailing Address 5335 Gate	Parkway		12	5	2022	\$	25.94
<b>City</b> Jacksonville	<b>State</b> FL	<b>Zip Code (Plus 4)</b> 32256	Description of Expenditure Advertising & Promotion				
To Whom Paid Constant Contact	·		мо	DAY	YEAR		
Mailing Address 1601 Trape	elo Road		12	25	2022	\$	47.70
<b>City</b> Waltham	Waltham  State  Zip Code (Plus 4)  Description of Expenditure  MA  02451  Advertising & Promotion						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Enter Grand Total of Expen	aitures on Page 1, Re	port Cover Page, Item D	·•			\$	296.25

	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			Reporti	ng Period			
DIAMOND, RUSS FRIENDS OF			From:	<u>11</u>	/29/2022	То:	1/2/2023
					DATE		Outstanding Balance of Debt
Name of Creditor Russ Diamond				мо	DAY	YEAR	
Mailing Address 305 W Sheridan A	Ave			4	1	2022	\$ 10,000.00
City ANNVILLE	<b>State</b> PA	<b>Zip Code (Pl</b> 17003	us 4)	· -	otion of Del		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$ <b>PAGE TOTAL</b> 10,000.00