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 | | СОМІ | MITTEE | ✓ | LOBI | BYIST | | |
|---|----------------------------------|-------------|-----------------------|---------|----------------|------------------------|------------|--------------------|--------------|--------|------------------------|--------------------------|----------------|---------|--------|--------------|--------------|
| Name of Filing C | Committee, Candid | ate or Lo | obbyist: | | DIAMO | ND, | RUS | SS FRIE | NDS O | F | | | | | | - | |
| Street Address: | 305 W SHERI | DAN AV | E | | | | | | | | | | | | | | |
| City: | ANNVILLE | | | | | | s | itate: | PA | | | Zip Co | de: 17 | 003 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE- | · 2. | | DAY MAF | | POST- | 3. | | AMENDMENT REPORT? | | Yes | ٦ | lo | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | - 5. | | DAY CTI | | POST- 6. | | TERMINATION REPORT? | | Yes | 1 | lo | \checkmark | |
| report type) | ANNUAL REPORT | 7. X | Year 2023 | | | | | G METHO HECK OF | | | | PAPER | \checkmark | DIS | ETTE | | |
| Name of Office S | L Sought by Candida | te: | | | | | Į. | DATE O | F ELEC | TIO | N | District Number | Office Code | Par | ty Coc | e Cou Cod | |
| | ···· · ····· | | | | | | P | 10 | DAY | YE | AR | Number | code | | | 1000 | |
| | | | | | | | | 11 | | 7 | 2023 | | (SEE INS | TRUCTI | ONS FO | R CODE | S) |
| | Receipts and | мо | DAY | YEAR | | | N | 10 | DAY | YE | AR | FC | R OFFIC | E USE | ONL | (| |
| Expenditures | s from: | 1 | 1 28 | 20 | 023 1 | 0 | Г | 12 | 3 | 1 | 2023 | | | | | | |
| A. Amount Bro | ught Forward From | n Last R | eport | | | | \$ | | | 6,3 | 89.99 |] | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I | | | | | | | \$ | | | 5,6 | 70.00 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | | \$ | | | 12,0 | 59.99 | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | | \$ | | | 4 | 55.31 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line | C) | | | \$ | | | 11,6 | 04.68 | | | | | | |
| F. Value Of In- | Kind Contributions | Receive | ed (From S | chedul | le II) | | \$ | | | | 0.00 | - | | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | chedule IV | /) | | | \$ | | | 14,6 | 87.50 | | | | | | |
| | | | | AFF | IDAVI | IT S | SEC | TION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign | here. I | (f this i | s a C | and | lidate re | eport, ca | andic | late sig | gn here. | | | | | |
| I swear (or affirm correct and compl |) that this report, incl ete. | uding the | attached sc | hedules | filed on | pape | er or | by electi | ronic me | dium, | are to t | the best o | f my knov | vledge | and be | lief , t | rue |
| Sworn to and subs | scribed before me this day of | 5 | 20 | | | | | | | S | ignature | e of Perso | n Submitt | ing Rep | oort | | _ |
| | Signatu | re | | | | _ | | | | | | Prin | ted Name | | | | - |
| My Commission E | - | | | | | | | | | | | Ema | il | | | | — |
| | мо | DA | AY | YR | | | | | Are | a Cod | e | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a cand | lidate's | authorized | Comm | nittee, G | Candi | idat | te shall s | sign he | re. | | | | | | | |
| I swear (or affirm) No 320) as amendo |) that to the best of n ed. | ny knowle | dge and beli | ef this | political | com | nmitt | tee has no | ot violat | ed any | y provis | ions of th | e act of Ju | ine 3,1 | 937 (F | .L. 133 | 33, |
| Sworn to and subso | ribed before me this day of | | 20 | | | Signature of Candidate | | | | | | | | | | | |
| | | | | | | _ | | | Printed Name | | | | | | _ | | |
| | Signature | | | | | _ | | | | | | F | | | | | _ |
| My Commission Exp | bires | | | | | _ | | | Email | | | | | | | | |
| | мо | DA | AY | YR | | - | | | Area C | Code | | Daytime Telephone Number | | | | | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

| Detailed Summary Page | | | | |
|---|-----------|------------------|---------------|-------------------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| DIAMOND, RUSS FRIENDS OF | From: | <u>11/28/202</u> | <u>.3</u> To: | <u>12/31/2023</u> |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | - | |
| TOTAL for the Reporting | Period | (1) | \$ | 345.00 |
| 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) | | | \$ | 325.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 325.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 2,500.00 |
| All Other Contributions (Part D) | | | \$ | 2,500.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 5,000.00 |
| 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 and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page | | | \$ | 5,670.00 |

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 Candida | te | | Re | porting l | Period | | | |
|-------------------------------------|----|--|-----|-----------|--------|------|----|------------|
| | | | Fro | From: To | | | • | |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contributing Committee | | | | 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 ite | emize all other 0.01 to \$250.(| 1 TO \$250.00 contribution 00 in the repo | s w ortir | ith an 1g peri | aggrega od. | | | rom | |
|--|------------------------------------|---|--------------|-------------------|----------------------------|------|----|--------------------------|--|
| Name of Filing Committee or Candidat | | | | | | | | | |
| DIAMOND, RUSS FRIENDS OF | | | | | From: <u>11/28/2023</u> To | | | : <u>12/31/2023</u> | |
| | | | | | DATE | | | AMOUNT | |
| Full Name of Contributor Gordon Tomb | | | | | DAY | YEAR | | | |
| Mailing Address 91 Fairfax Lane | | | | | | | \$ | 250.00 | |
| City Annville | State PA | Zip Code (Plus 4) 17003 | | 11 | 28 | 2023 | | | |
| Full Name of Contributor Angela Robinson | | | | мо | DAY | YEAR | | | |
| Mailing Address 106 Elm Street | | | | 10 | 2.6 | | \$ | 75.00 | |
| City Washington | State PA | Zip Code (Plus 4) 15301 | | 12 | 26 | 2023 | | | |
| Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. | | | | | | | \$ | PAGE TOTAL 325.00 | |

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 | | | |
|---|--|----------------------------|--------------------------|-------------|---------------|------|-------------------|
| DIAMOND, RUSS FRIENDS OF | | | From: | <u>11/2</u> | <u>8/2023</u> | То: | <u>12/31/2023</u> |
| | | | | DA | TE | | AMOUNT |
| Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC | | | | мо | DAY | YEAR | |
| Mailing Address 1800 CENTER ST | | | | | | | \$ 500.00 |
| City CAMP HILL | State PA | Zip Code 17089-0 | e (Plus 4) 0000 | 12 | 4 | 2023 | |
| Full Name of Contributing Committee PA OIL MARKETERS PAC (POMPAC) Mailing Address | | | | мо | DAY | YEAR | |
| Mailing Address 911B S EISENHOWER | WER BLVD State Zip Code (Plus 4) PA 17057-5504 | | | 12 | 14 | 2023 | \$ |
| Full Name of Contributing Committee PABAR PAC (PA BAR ASSN) | | | | мо | DAY | YEAR | |
| Mailing Address 100 SOUTH STREET | State PA | Zip Code 171010 | e (Plus 4) 000 | 12 | 14 | 2023 | \$ 500.00 |
| Full Name of Contributing Committee FRIENDS OF ERIC DAVANZO | | - | | мо | DAY | YEAR | |
| Mailing Address 371 STATE HILL RD City SMITHTON | State PA | Zip Code 15479 | e (Plus 4) | 12 | 14 | 2023 | \$ |
| Full Name of Contributing Committee Versant Strategies PAC | | | мо | DAY | YEAR | | |
| | 2nd Street, Suite 1002 State Zip Code (Plus 4) PA 17101 | | 12 | 14 | 2023 | \$ | |

\$

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

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 | | | | |
|--|---|-----------------------------------|------------|---------------------------|-----------|----------------|---------------|---------------------|--|--|
| DIAMOND, RUSS FRIENDS OF | | | | Fron | n: | <u>11/28/2</u> | <u>023</u> To | : <u>12/31/2023</u> | | |
| | | | | | DA | ATE | | AMOUNT | | |
| Full Name of Contributor Thomas Mehaffie | | | | | мо | DAY | YEAR | | | |
| Mailing 921 Ebenezer Rd Address | | | | | | | | \$ 500.00 | | |
| City Middletown | State PA | Zip Code (Plus 4) 17057 | | : 4) | 12 | 14 | 2023 | | | |
| Employer Name Commonwealth of Pennsylvania | | | | | Occupat | t ion E | lected F | Representative | | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | | State | | Zip Code (Plus 4) | | |
| 501 N 3rd St Harrisburg | | | g | | PA | | 17120 | | | |
| Full Name of Contributor John EE Gallagher | | | | мо | DAY | YEAR | | | | |
| Mailing 17850 Lake Ave | | | | | | | | \$ 1,000.00 | | |
| City Lakewood | State OH | Zip 441 | Code (Plus | ; 4) | 12 | 20 | 2023 | | | |
| Employer Name Arrow International, I | nc. | | | | Occupat | c ion | hief Op | erating Officer | | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | State | | | Zip Code (Plus 4) | | |
| 9900 Clinton Rd | | | Cleveland | ł | | он | | 44144 | | |
| Full Name of Contributor WIND CREEK BETHLEHEM LLC | | | | | мо | DAY | YEAR | | | |
| Mailing 77 WIND CREEK BOU | LEVARD | | | | | | | \$ 1,000.00 | | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18015 | | : 4) | 12 | 26 | 2023 | | | |
| Employer Name WIND CREEK BETHLEHEM LLC | | | | Occupation Partnership | | | | | | |
| Employer Mailing Address/Principal Plac Business | Employer Mailing Address/Principal Place of Cit | | | State | | | | Zip Code (Plus 4) | | |
| 77 WIND CREEK BOULEVARD BETHLEHE | | | EM | РА | | | 18015 | | | |

\$

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 | | | Report | ing Perio | d | | | | |
|---------------------------------------|---------------------|---------------|---------|-----------|-----|------|----|---------|------|
| | | | From: | From: To: | | | | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | \$ | i | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | | | | | | | | | |
| Enter Grand Total of Part E on Schedu | le T. Detailed Summ | nary Page | Section | 4 | | | | PAGE TO | ΓAL |
| | | iiai 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>11/28/2023</u> то: | <u>12/31/2023</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, 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 | Period | | | |
|--|-------|-------------------|-----------|--------|------|----------|------------|
| | | | From: | | | То: | |
| [| | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | 2 | | | | |
| Description of Contribution: | | | | 1 | 1 | <u> </u> | |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, | | | | | | F | PAGE TOTAL |
| Section 2. | | | | | 4 | 5 | 0.00 |

PAGE 12

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

| Name of Filing Committee or Candidate | | | | | Re | porting P | Period | | | | |
|--|--------------|------------------|-------------|--------|--------|-----------|-----------|--------|---------|---------------------------|--|
| | | | | | Fro | om: | | То: | То: | | |
| | | | | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | | |
| Mailing Address | ss | | | | | | | | \$ | 0.00 | |
| City | State | Zip Code(Plus 4) | | | | | | | | | |
| Employer of Contributor | | | | | | Occupa | tion | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | State | | Zip 4) | Code(Plus | Descri | ption o | of Contribution | |
| Enter Grand Total of Part G on Sch Summary Page, Section 3. | edule II, Ir | n-Kind | Contributio | ons De | etaile | ed | | | | PAGE TOTAL 0.00 | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reporti | ng Period | | | | | | |
|--|--------------------------------|-----------------------------------|---|---|---------------|--------|-------------------|--|--|--|
| DIAMOND, RUSS FRIENDS OF | | | From | <u>11/2</u> | <u>8/2023</u> | То: | <u>12/31/2023</u> | | | |
| | | | | DATE | | | AMOUNT | | | |
| To Whom Paid USPS | | | мо | DAY | YEAR | | | | | |
| Mailing Address 51 N Lancaster St | | | 11 | 29 | 2023 | \$ | 66.00 | | | |
| City Annville | State PA | Zip Code (Plus 4) 17003 | | Description of Expenditure Postage | | | | | | |
| To Whom Paid Network Solutions, LLC | | | мо | DAY | YEAR | | | | | |
| Mailing Address 5335 Gate Parkway | ling Address 5335 Gate Parkway | | 12 | 4 | 2023 | \$ | 36.98 | | | |
| City Jacksonville | State FL | Zip Code (Plus 4) 32256 | - | Description of Expenditure Advertising & Promotion | | | | | | |
| To Whom Paid Network Solutions, LLC | | | мо | DAY | YEAR | | | | | |
| Mailing Address 5335 Gate Parkway | | | 12 | 26 | 2023 | \$ | 9.99 | | | |
| City Jacksonville | State FL | Zip Code (Plus 4) 32256 | Descrip Adverti | | | | | | | |
| To Whom Paid GoDaddy | | | мо | DAY | YEAR | | | | | |
| Mailing Address 2155 E GoDaddy W | ау | | 12 | 4 | 2023 | \$ | 143.88 | | | |
| City Tempe | State AZ | Zip Code (Plus 4) 85284 | | otion of Exp ising & Pro | | 2 | | | | |
| To Whom Paid GoDaddy | | | мо | DAY | YEAR | | | | | |
| Mailing Address 2155 E GoDaddy Way | | 12 | 7 | 2023 | \$ | 143.34 | | | | |
| City Tempe | State AZ | Zip Code (Plus 4) 85284 | Description of Expenditure Advertising & Promotion | | | | | | | |

| To Whom Paid Constant Contact | nstant Contact | | | DAY | YEAR | | |
|----------------------------------|---|--------------------------|----|-----|------|----|--------|
| Mailing Address 1601 Trape | elo Road | | 12 | 26 | 2023 | \$ | 55.12 |
| City Waltham | Description of Expenditure Advertising & Promotion | | | | | | |
| | | PAGE TOTAL | | | | | |
| Enter Grand Total of Expen | ditures on Page 1, Re | eport Cover Page, Item D | • | | | \$ | 455.31 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

SCHEDULE IV 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 Report | | | | | ng Period | | | | | |
|---|--|-------------------------------|------------------------------|-------|---|--|------|--------------------------------|--------------------------------|--|
| DIAMOND, RUSS FRIENDS OF | | | | | <u>11/28/2023</u> To: | | | | <u>12/31/2023</u> | |
| | | | | | 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 | | StateZip Code (Plus 4)PA17003 | | | Description of Debt Loan to Campaign | | | | | |
| DATE | | | | | | | | Outstanding Balance of Debt | | |
| Name of Creditor RAINTREE | | | | | МО | DAY | YEAR | | | |
| Mailing Address 305 W Sheridan Ave | | | | | 4 | 1 | 2022 | \$ | 1,250.00 | |
| City ANNVILLE | | StateZip Code (Plus 4)PA17003 | | | | Description of Debt Creative Services - Delco GOP | | | | |
| | | | | | | DATE | | Outstanding Balance of Debt | | |
| Name of Creditor RAINTREE | | | | | мо | DAY | YEAR | | | |
| Mailing Address 305 W Sheridan Ave | | | | | 4 | 1 | 2022 | \$ | 3,437.50 | |
| City ANNVILLE | | State PA | Zip Code (Pl 17003 | us 4) | Description of Debt Creative Services - HRCC | | | | | |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | | | | \$ | PAGE TOTAL 14,687.50 | |