Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification 2024C0170 Number :					Report CANDID		DATE	\	CO	MMITTEE	1MITTEE LOBBYIST								
Name of Filing C	committe	e, Candida	ate or Lo	obbyist:		DIA	IOMA	ND, RI	JSSELI	L H									
Street Address:																			
City:									State:					Zip Code	e: 17	003			
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		P	OST-	ST- 3. AMENDMENT REPORT?					No)	\
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	y pri	≣-	5.	30 DAY POST- 6. X ELECTION					X	TERMINAT REPORT?	ΓΙΟΝ	Yes	No)	\
report type)	ANNUAL	REPORT	7.	Year 2024					IG MET					PAPER			DISKI	TTE	
Name of Office S	ought by	Candidat	:e:						DATE	OI	F ELEC	СТІ	ON	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	•	YEAR	102	STH	REP		38	•
REPRESENTATI	VE IN TH	ie gener	AL ASS	EMBLY					:	11		5	2024		(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of		s and	МО	DAY	YEAR	ł			МО		DAY	,	YEAR	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			10 22	2	024	Т	0	:	11	2	25	2024						
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$					0.00						
B. Total Monet	ary Contr	ibutions A	and Rec	eipts (From	Sche	dule	e I)	\$					0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$					0.00						
D. Total Expend	ditures (I	From Sche	dule II	I)				\$					0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$					0.00						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV)			\$				41	,591.38						
					AFF	ID	AVI	T SE	CTIO	N									
PART I - If this is		-		_									_						
I swear (or affirm) correct and complete		report, incl	uding the	attached scl	nedule:	s file	d on	paper (or by ele	ectr	onic me	ediu	m, are to t	he best of	my know	/ledge	and bel	ief , tr	ue
Sworn to and subs	cribed before day of	ore me this		20						•			Signature	of Person	Submitt	ing Rep	ort		_
	_	Signatur	·e					-		•				Printe	ed Name				_
My Commission Ex	cpires							_		-				Email					
		МО	D	AY	YR						Are	ea C	ode	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ef this	poli	itical	commi	ittee ha	s no	ot violat	ted a	any provis	ions of the	act of Ju	ne 3,19	937 (P.I	L. 133	3,
Sworn to and subsc	ribed befo day of	re me this		20									s	ignature of	Candida	te			_
								-						Printed	Name				-
Signature							-		-				E					_	
My Commission Exp	ires													Email					
	_	МО	D	AY	YR	l		•			Area	Cod	e	Day	time Te	lephon	e Numl	er	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DIAMOND, RUSSELL H	From:	10/22/202	<u>4</u> To:	11/25/2024
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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	(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			\$	0.00

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 Candidate			Reporting Period						
F			From:			o:			
		•		DATE			AMOUNT		
Full Name of Contributing Committee	Full Name of Contributing Committee				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.

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)

(Exclude		om pondedi comi			301 tCu		,				
Name of Filing Committee or	Name of Filing Committee or Candidate				Reporting Period						
				From: To) :				
					DATE			AMOUNT			
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus 4	i)								
								PAGE TOTAL			

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

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		0.0	
Mailing Address							- \$	0.0	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
inter Grand Total of Part C on Schedule I, Detailed Summary Page,				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	Reporting Period						
			Fror	n:		To):			
				D	ATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address							7			
City	State	Zip Code (Plu	s 4)							
Employer Name		•		Occupation						
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)		
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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 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 Peri	od							
DIAMOND, RUSSELL H	From:	<u>10/22/2024</u> To:	11/25/2024						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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 Candidate				Reporting 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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL		
						\$	(0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	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)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Place of Business City				State	e Zip	Code(Plus 4)	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL	
Summary Page, Section 3.							0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate			Reporting Period				
						То:		
		AMOUNT						
To Whom Paid				DAY	YEAR			
Mailing Address						\$	0.00	
City State Zip Code (Plus 4) Description of Expen					enditure			
Enter Grand Total of Evnenditures on Page 1. Penort Cover Page. Item D							PAGE TOTAL	
ter Grand Total of Expenditures on Page 1, Report Cover Page, Item D		·•			\$	0.00		

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 Fil	ame of Filing Committee or Candidate				Reporting Period					
DIAMOND,	RUSSELL H			From:	<u>10</u>)/22/2024	To:	11/25/2024		
						DATE		Outstanding Balance of Debt		
Name of Cr	editor				мо	DAY	YEAR			
Larry Otter	r				140		IZAK			
Mailing Add	dress				1	1	2024	1 5	\$	4,195.00
City DOYLESTOWN State Zip Code (Plus 4)				Description of Debt						
PA 18901					Legal Fees from Previous Campaigns					
Name of Creditor RAINTREE					мо	DAY	YEAR			
Mailing Add	dress				1	1	2024	1 5	\$	25,391.03
City AN	NVILLE	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t	•		
		PA	17003		Promotional Costs from Previous Campaigns					
Name of Cr Russ Diam					мо	DAY	YEAR			
Mailing Add	dress				1	1	2024	1 4	\$	12,005.35
City AN	NVILLE	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	17003		Loans to	o Previous	Campa	igns		
									PA	GE TOTAL
Enter G	Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item				G.			\$		41,591.38