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 20	24C0170			Repor Filed		CANDI	DATE	\checkmark	cc	OMMITTE		LOBE	BYIST	
Name of Filing C	Committee, Can	didate or L	obbyist:		DIAMO	ND, R	USSELL H	1							
Street Address:															
City:							State:				Zip Cod	e: 17	003		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?	ENT	Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	5.	30 DA		POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL REPO	RT 7. X	Year 2024	-			NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candi	date:					DATE O	F ELEC	CTION		District Number	Office Code	Par	ty Code	County Code
	IVE IN THE GEN						мо	DAY	YEA	R	102	STH	REP		38
REPRESENTATI		ILKAL ASS					11		5 2	2024]	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YEA	R	FO	R OFFIC	E USE	ONLY	
Expenditures	s from:		11 26	5 2	024	ГО	12	(*)	31 2	2024					
A. Amount Bro	ught Forward F	rom Last F	Report			\$				0.00					
B. Total Monet	dule I)	\$	\$ 0.00												
C. Total Funds Available (Sum Of Lines A and B)										0.00					
D. Total Expenditures (From Schedule III)										0.00					
E. Ending Cash	Balance (Subtr	act Line D	From Line	C)		\$			(0.00	-				
F. Value Of In-	Kind Contribution	ons Receiv	ved (From S	Schedu	le II)	\$			(0.00	4				
G. Unpaid Deb	ts And Obligatio	ons (From	Schedule I	/)		\$			41,59	1.38					
				AFF	IDAV	IT SE	CTION								
PART I - If this is			_								-				
I swear (or affirm correct and compl		including th	e attached so	chedules	s filed or	paper	or by elect	ronic me	edium, a	re to f	the best of	my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me day of	this	20						Sig	nature	e of Person	Submitt	ing Rep	ort	
						_					Print	ed Name			
My Commission E	-	ature									Emai	1			
	мо	D	ΑΥ	YR				Are	a Code		Daytime	e Teleph	one Nu	mber	
Part II- If this is	a report of a c	andidate's	authorized	l Comn	nittee, (Candid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		of my knowl	edge and bel	ief this	political	comm	ittee has n	ot violat	ed any p	provis	ions of the	act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso		his	20							s	ignature o	f Candida	ite		
	day of					_					Printee	d Name			
	Signatu	re				_					E *				
My Commission Exp	bires										Emai	• 			
	мо	D	AY	YR	1	_		Area	Code		Da	ytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pag	E			
Name of Filing Committee or Candidate	Reporting	g Period		
DIAMOND, RUSSELL H	From:	<u>11/26/202</u>	2 <u>4</u> To:	<u>12/31/2024</u>
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	\$	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	g 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

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 Candi	date		Re	porting	Period			
			Fro	om:		То	•	
					DATE			AMOUNT
Full Name of Contributing 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

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. (Exclude contributions from political committees reported in Part A)									
Name of Filing Committee or Candida	te		Rep	orting P	eriod				
					From: Te				
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City									
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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		A	AMOUNT
Full Name of Contributing Committee	мо		DAY	YEAR		0.00		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						PAGE TOTAL		
Enter Grand Total of Part C on Sched	nmary Pa	age, Sectio	n 3.			\$	0.00	

PART D 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.)

		Reporting Period					
		From	n:		Т	То:	
			D	ATE		AM	OUNT
			мо	DAY	YEAR	\$	0.00
Mailing Address							
State	Zip Code (Plu	s 4)					
•			Occupation				
ce of Business	City			State		Zip Code	(Plus 4)
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code

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 Peric	d				
			From:			То:			
	Full Name			D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description		•					•		
		_						PAGE TO	TAL
nter Grand Total of Part E on Schedule I, Detailed 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 REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
DIAMOND, RUSSELL H	From:	<u>11/26/2024</u> то:	<u>12/31/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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, 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)						
Description of Contribution:						-		
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.				mary Pag	e,		PAGE TOTA	<u>، ۱</u>
						\$		0.00

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

Name of Filing Committee or Candidate			Rej	porting I	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor	•	·		Occupa	ation		•
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
			From			То:	
				DATE			AMOUNT
To Whom Paid				DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Enter Grand Tatal of Evnanditures	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item						PAGE TOTAL
Enter Grand Total of Expenditures (m Page 1, Report C	lover Page, Item L				\$	0.00

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			Reporti	ng Period					
DIAMOND, RUSSELL H			From:	<u>11</u>	/26/2024	То:	<u>12/3</u>	<u>1/2024</u>	
					DATE		Outsta Balanc	nding e of Debt	
Name of Creditor Larry Otter				мо	DAY	YEAR			
Mailing Address PO BOX 2131				1	1	2024	\$	4,195.00	
City DOYLESTOWN State Zip Code (Plus 4) PA 18901				Description of Debt Legal Fees from Previous Campaigns					
Name of Creditor RAINTREE				мо	DAY	YEAR			
Mailing Address 305 W Sheridan Ave				1	1	2024	\$	25,391.03	
City ANNVILLE	State PA	Zip Code (P 17003	lus 4)	Description of Debt Promotional Costs from Previous Campaigns					
Name of Creditor Russ Diamond				мо	DAY	YEAR			
Mailing Address 305 W Sheridan Ave				1	1	2024	\$	12,005.35	
City ANNVILLE	State	Zip Code (P	lus 4)	Descript	tion of Deb)t			
	РА	17003		Loans to	o Previous	Campa	igns		
Enter Grand Total of Unpaid Debt	s on Page 1. Pono	ert Cover Ba	ao Itom	G			F	PAGE TOTAL	
Enter Grand Total of Unpaid Debt	s on Page 1, Repo	it Cover Pa	ye, nem				\$	41,591.38	