

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Diehl for U.S. Senate

ADDRESS (number and street)

PO Box 5461

Check if different than previously reported. (ACC)

Norwell

MA

02061-5461

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00637611

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MA

07

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2019

through

M M /

D D /

Y Y Y Y 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Eaton, Gregory, A, ,

Type or Print Name of Treasurer

Eaton, Gregory, A, ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Diehl for U.S. Senate

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6818.45	14857.01
(b) Total Contribution Refunds (from Line 20(d))	0.00	13950.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6818.45	907.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13149.34	55223.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	13149.34	55223.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2574.82	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2574.82	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Diehl for U.S. Senate

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1063.00	6623.00
(ii) Unitemized.....	5755.45	8134.01
(iii) TOTAL of contributions from individuals ▶	6818.45	14757.01
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	100.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6818.45	14857.01
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	6818.45	14857.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13149.34	55223.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	13950.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	13950.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	13149.34	69173.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8905.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6818.45
25. SUBTOTAL (add Line 23 and Line 24).....	15724.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13149.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2574.82

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3T
Transaction ID :

Remaining balance will be used to pay remaining debt to Mimi Crampton for payroll purposes.

Form/Schedule:
Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 12
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Diehl for U.S. Senate

A. Full Name (Last, First, Middle Initial)
Haines, Bruce, , ,

Mailing Address 15742 Glenisle Way

City Fort Myers	State FL	Zip Code 33912-3922
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Historic Hotel Bethlehem	Occupation Hotel Owner
--	---------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 01 / 2019

Transaction ID : A765CB249395B4B83AA9

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Drewry, Denzil, , ,

Mailing Address 9 Denfeld Drive

City Westborough	State MA	Zip Code 01581-3505
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : A78FFF65C003C41DCAA2

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mahoney Jr, Thomas, , ,

Mailing Address 411 Bridge St

City East Bridgewater	State MA	Zip Code 02333-2109
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FEC ID number of contributing federal political committee. **C**

Name of Employer Thomas Mahoney Plumbing Co LLC	Occupation Plumber
--	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : A36762874B78D4575BF9

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	850.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 7 OF 12	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Diehl for U.S. Senate

A. Full Name (Last, First, Middle Initial)
Safety insurance

Mailing Address PO Box 55089

City Boston	State MA	Zip Code 02205-5089
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
213.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 30 / 2019

Transaction ID : A65A278E8329448FA99A

Amount of Each Receipt this Period
213.00

Memo Item
 Refund

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	213.00
TOTAL This Period (last page this line number only).....▶	1063.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Diehl for U.S. Senate

Full Name (Last, First, Middle Initial) A. Complete Payroll Solutions			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019		
Mailing Address 1 Carando Dr			FEC Identification Number C		
City Springfield	State MA	Zip Code 01104-3211	Amount of Each Disbursement this Period 210.77		
Purpose of Disbursement Payroll Processing		Category/ Type 001	Transaction ID : B607D186E4010439AA1A		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Washington Intelligence Bureau			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2019		
Mailing Address 4128 Pepsi Pl			FEC Identification Number C		
City Chantilly	State VA	Zip Code 20151-1501	Amount of Each Disbursement this Period 605.09		
Purpose of Disbursement Campaign Caging Services		Category/ Type 003	Transaction ID : BACEBD9586711431D960		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Campaign Solutions			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2019		
Mailing Address 117 N Saint Asaph St			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-3109	Amount of Each Disbursement this Period 634.77		
Purpose of Disbursement direct email fundraising		Category/ Type 003	Transaction ID : BD0C729F73BC24CACB88		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1450.63
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Diehl for U.S. Senate

Full Name (Last, First, Middle Initial) A. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2019
Mailing Address 60 New Driftway Suite #18			FEC Identification Number C
City Scituate	State MA	Zip Code 02066-4549	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Salary and Reimbursement - see sub-vendor		Category/Type	Transaction ID : B42F4A0B774724EEFAF3
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Tuesday Associates			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2018
Mailing Address 60 New Driftway Suite #18			FEC Identification Number C
City Scituate	State MA	Zip Code 02066-4549	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement General Consulting		Category/Type 001	Transaction ID : B5D93ECF238DD4808841
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Aristotle International Inc.			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019
Mailing Address 205 Pennsylvania Ave. SE			FEC Identification Number C
City Washington	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 2250.00
Purpose of Disbursement Software		Category/Type	Transaction ID : B872428B08FE349128E1
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	7250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 12	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Diehl for U.S. Senate

Full Name (Last, First, Middle Initial) A. Authorize.net			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address P.O. Box 8999			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94128-8999	Amount of Each Disbursement this Period 3565.50	
Purpose of Disbursement Online donation processing fee		Category/ Type 003	Transaction ID : B8D2B1193EE6D4783B15	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Mcwalter Volunteer Insurance			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address 30 Monument Square #135			FEC Identification Number C	
City Concord	State MA	Zip Code 01742-1871	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement Insurance		Category/ Type 001	Transaction ID : BFBD4188CB27C4BD8A4B	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4165.50
TOTAL This Period (last page this line number only).....▶	12866.13

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Diehl for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mcwalter Volunteer Insurance			Nature of Debt (Purpose): Insurance
Mailing Address 30 Monument Square #135			
City Concord	State MA	Zip Code 01742-1871	

Outstanding Balance Beginning This Period 600.00	Transaction ID : D6A6E8C6F15C9483584B	
Amount Incurred This Period 0.00	Payment This Period 600.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crampton, Mimi, , ,			Nature of Debt (Purpose): Payroll
Mailing Address 7 Lockwood Rd			
City Lexington	State MA	Zip Code 02420-3816	

Outstanding Balance Beginning This Period 4131.99	Transaction ID : D34AFD569227C470DB95	
Amount Incurred This Period 0.00	Payment This Period 1557.17	Outstanding Balance at Close of This Period 2574.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tuesday Associates			Nature of Debt (Purpose): Salary and Reimbursement - see sub-vendor
Mailing Address 60 New Driftway Suite #18			
City Scituate	State MA	Zip Code 02066-4549	

Outstanding Balance Beginning This Period 5193.83	Transaction ID : DE619BED066A74051A11	
Amount Incurred This Period 0.00	Payment This Period 5193.83	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	▶	2574.82
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Diehl for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tuesday Associates			Nature of Debt (Purpose): Salary and Reimbursement - see sub-vendor
Mailing Address 60 New Driftway Suite #18			
City Scituate	State MA	Zip Code 02066-4549	

Outstanding Balance Beginning This Period		Transaction ID : D20C059E46A634371A38	
18309.02			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	18309.02	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International Inc.			Nature of Debt (Purpose): Software
Mailing Address 205 Pennsylvania Ave. SE			
City Washington	State DC	Zip Code 20003-1164	

Outstanding Balance Beginning This Period		Transaction ID : D29DDCC0936014ED582F	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2250.00	2250.00	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	2574.82
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2574.82