

### Campaign Finance Report

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

Filer Identification Number: 20200384		Report Filed By:	Candidate <sup>1.</sup> <input type="checkbox"/>	Committee <sup>2.</sup> <input checked="" type="checkbox"/>	Lobbyist <sup>3.</sup> <input type="checkbox"/>						
Name of Filing Committee, Candidate or Lobbyist: Friends of Michael C. Lambert											
Street Address: 5724 Rising Sun Ave											
City: Philadelphia			State: PA	Zip Code: 19111							
TYPE OF REPORT	6th Tuesday Pre-Primary	1. <input type="checkbox"/>	2nd Friday Pre-Primary	2. <input type="checkbox"/>	30 Day Post Primary	3. <input checked="" type="checkbox"/>	Amendment Report?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	6th Tuesday Pre-Election	4. <input type="checkbox"/>	2nd Friday Pre-Election	5. <input type="checkbox"/>	30 Day Post Election	6. <input type="checkbox"/>	Termination Report?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Other	Annual Report	7. <input type="checkbox"/>	YEAR	2021							
Name of Office Sought by Candidate: Judge of the Municipal Court			DATE OF ELECTION 05/18/2021	District Number:	Office Code: MCJ	Party Code: DEM	County Code: 51				
Summary of Receipts and Expenditures		From Date		To Date		FOR OFFICE USE ONLY COUNTY BD. OF ELECTIONS 21 AUG 25 AM 5:47 CITY COMMISSIONERS					
		05/04/2021		06/07/2021							
A. Amount Brought Forward From Last Report				\$17,892.14							
B. Total Monetary Contributions and Receipts (From Schedule I)				\$37,387.41							
C. Total Funds Available (Sum of Lines A and B)				\$55,279.55							
D. Total Expenditures (From Schedule III)				\$35,334.61							
E. Ending Cash Balance (Subtract Line D from Line C)				\$19,944.94							
F. Value of In-Kind Contributions Received (From Schedule II)				\$10,620.71							
G. Unpaid Debts and Obligations (From Schedule IV)				\$42,900.00							
<b>Affidavit Section</b>											
PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.											
I swear (or affirm) that this report, including the attached schedules, on paper or by electronic medium, are to the best of my knowledge and belief true, correct, and complete.											
Sworn to and subscribed before me this _____ day of _____ 20____				_____ Signature of Person Submitting Report _____ Printed Name _____ Area Code                      _____ Daytime Telephone Number							
Signature _____											
My commission expires _____ MO.      DAY      YR.											
PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.											
I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.											
Sworn to and subscribed before me this _____ day of _____ 20____				_____ Signature of Person Submitting Report _____ Printed Name _____ Area Code                      _____ Daytime Telephone Number							
Signature _____											
My commission expires _____ MO.      DAY      YR.											

### Campaign Finance Report

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

Filer Identification Number: 20200384		Report Filed By:	Candidate <sup>1.</sup> <input type="checkbox"/>	Committee <sup>2.</sup> <input type="checkbox"/>	Lobbyist <sup>3.</sup> <input type="checkbox"/>						
Name of Filing Committee, Candidate or Lobbyist: Friends of Michael C. Lambert											
Street Address:											
City:			State:	Zip Code:							
<b>TYPE OF REPORT</b>	6th Tuesday Pre-Primary	1. <input type="checkbox"/>	2nd Friday Pre-Primary	2. <input type="checkbox"/>	30 Day Post Primary	3. <input checked="" type="checkbox"/>	Amendment Report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	6th Tuesday Pre-Election	4. <input type="checkbox"/>	2nd Friday Pre-Election	5. <input type="checkbox"/>	30 Day Post Election	6. <input type="checkbox"/>	Termination Report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Other	Annual Report	7. <input type="checkbox"/>	YEAR								
Name of Office Sought by Candidate: Judge of the Municipal Court			DATE OF ELECTION	District Number:	Office Code:	Party Code::	County Code:				

Summary of Receipts and Expenditures	From Date	To Date	FOR OFFICE USE ONLY
	A. Amount Brought Forward From Last Report		
B. Total Monetary Contributions and Receipts (From Schedule I)			
C. Total Funds Available (Sum of Lines A and B)			
D. Total Expenditures (From Schedule III)			
E. Ending Cash Balance (Subtract Line D from Line C)			
F. Value of In-Kind Contributions Received (From Schedule II)			
G. Unpaid Debts and Obligations (From Schedule IV)			

#### Affidavit Section

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct, and complete.

Sworn to and subscribed before me this _____ day of _____ 20____  _____ Signature  My commission expires _____ MO. DAY YR.	_____ Signature of Person Submitting Report  _____ Printed Name  _____ Area Code _____ Daytime Telephone Number
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PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20____  _____ Signature  My commission expires _____ MO. DAY YR.	_____ Signature of Person Submitting Report  _____ Printed Name  _____ Area Code _____ Daytime Telephone Number
---	---



**Pennsylvania Department of State**

Bureau of Campaign Finance & Civic Engagement

210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

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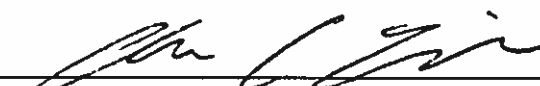
## Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

**Note:** Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports. This form must be signed by hand where a signature is required.**

Name of Filing Committee, Candidate, or Lobbyist				
Friends of Michael C. Lambert				
Reporting Cycle Name				
<input type="checkbox"/> <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<input type="checkbox"/> <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	<input checked="" type="checkbox"/> <b>Cycle 3</b> 30 Day Post Primary	<input type="checkbox"/> <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election	<input type="checkbox"/> <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election
<input type="checkbox"/> <b>Cycle 6</b> 30 Day Post-Election	<input type="checkbox"/> <b>Cycle 7</b> Annual Report	<input type="checkbox"/> <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election		<input type="checkbox"/> <b>Cycle 9</b> 30 Day Post-Special Election

**Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.**

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.**

  
\_\_\_\_\_  
Signature of Treasurer, Candidate, or Lobbyist

Adam Erickson

\_\_\_\_\_  
Printed Name

8/25/2021  
\_\_\_\_\_  
Date (DD/MM/YYYY)

Philadelphia, PA, USA

\_\_\_\_\_  
Location (City/State/Country)



**Pennsylvania Department of State**

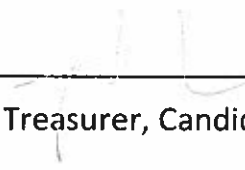
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**Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.**

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.**

  
\_\_\_\_\_  
Signature of Treasurer, Candidate, or Lobbyist

Michael C. Lambert  
\_\_\_\_\_  
Printed Name

8/25/2021  
\_\_\_\_\_

Date (DD/MM/YYYY)  
Philadelphia, PA, USA  
\_\_\_\_\_

Location (City/State/Country)

SCHEDULE I  
**Contributions and Receipts**

Detailed Summary Page

Filer Identification Number: 20200384
---------------------------------------

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period	(1) \$1,435.49

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND B)		
Contributions Received from Political Committees (Part A)		\$0.00
All Other Contributions (Part B)		\$1,760.90
	TOTAL for the Reporting Period	(2) \$1,760.90

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND D)		
Contributions Received from Political Committees (Part C)		\$27,000.00
All Other Contributions (Part D)		\$7,191.02
	TOTAL for the Reporting Period	(3) \$34,191.02

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period	(4) \$0.00

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> <i>( Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$37,387.41
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## 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.)

Filer Identification Number: 20200384					
Full Name of Contributor Michelle Adams		MO.	DAY	YEAR	\$100.00
		5	10	2021	
Mailing Address 1000 E Rittenhouse St					
City Philadelphia		State PA	Zip Code (Plus 4) 19138-1803		
Full Name of Contributor Debra Avi		MO.	DAY	YEAR	\$107.72
		5	7	2021	
Mailing Address 5224 Castor Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19124-1723		
Full Name of Contributor Margaret G. & Chris Chaplin		MO.	DAY	YEAR	\$100.00
		5	17	2021	
Mailing Address 627 Cheltenham Hills Dr					
City Elkins Park		State PA	Zip Code (Plus 4) 19027-1319		
Full Name of Contributor Michael Diamondstein		MO.	DAY	YEAR	\$200.00
		5	11	2021	
Mailing Address 11 Penarth Rd					
City Bala Cynwyd		State PA	Zip Code (Plus 4) 19004-2628		
Full Name of Contributor Kevin Harden Jr		MO.	DAY	YEAR	\$100.00
		5	13	2021	
Mailing Address 6436 Emlen St					
City Philadelphia		State PA	Zip Code (Plus 4) 19119-2708		
Full Name of Contributor Shauntel Jones		MO.	DAY	YEAR	\$50.00
		5	10	2021	
Mailing Address 5628 N 2nd St					
City Philadelphia		State PA	Zip Code (Plus 4) 19120-2426		
Full Name of Contributor Shauntel Jones		MO.	DAY	YEAR	\$25.00
		5	17	2021	
Mailing Address 5628 N 2nd St					
City Philadelphia		State PA	Zip Code (Plus 4) 19120-2426		
Full Name of Contributor david mischak		MO.	DAY	YEAR	\$250.00
		5	19	2021	
Mailing Address 1845 Walnut St Fl 19					
City Philadelphia		State PA	Zip Code (Plus 4) 19103-4720		

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

PAGE TOTAL

\$932.72

## 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.)

Filer Identification Number: 20200384						
Full Name of Contributor Andre Murphy			MO. 5	DAY 7	YEAR 2021	\$54.67
Mailing Address 1240 Harding Dr						
City Havertown			State PA	Zip Code (Plus 4) 19083-5223		
Full Name of Contributor Kenneth Murphy			MO. 5	DAY 7	YEAR 2021	\$54.67
Mailing Address 7320 Brentwood Rd						
City Philadelphia			State PA	Zip Code (Plus 4) 19151-2215		
Full Name of Contributor Wade Murray			MO. 5	DAY 7	YEAR 2021	\$200.00
Mailing Address 6045 Baltimore Ave						
City Philadelphia			State PA	Zip Code (Plus 4) 19143-2347		
Full Name of Contributor Dean Owens			MO. 5	DAY 10	YEAR 2021	\$73.00
Mailing Address 749 W Allens Ln						
City Philadelphia			State PA	Zip Code (Plus 4) 19119-3311		
Full Name of Contributor Damon Rawls			MO. 5	DAY 10	YEAR 2021	\$50.00
Mailing Address 7525 Devon St						
City Philadelphia			State PA	Zip Code (Plus 4) 19119-1045		
Full Name of Contributor Damon Rawls			MO. 5	DAY 17	YEAR 2021	\$25.00
Mailing Address 7525 Devon St						
City Philadelphia			State PA	Zip Code (Plus 4) 19119-1045		
Full Name of Contributor S&D Realty			MO. 5	DAY 11	YEAR 2021	\$180.00
Mailing Address 998 C Old Country Rd # 413						
City Plainview			State NY	Zip Code (Plus 4) 11803-4917		
Full Name of Contributor Elyshia Sawyer			MO. 5	DAY 5	YEAR 2021	\$50.00
Mailing Address 1010 E Washington Ln						
City Philadelphia			State PA	Zip Code (Plus 4) 19138-1028		

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

PAGE TOTAL

\$687.34

## 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.)

Filer Identification Number: 20200384				
Full Name of Contributor Elyshia Sawyer	MO. 5	DAY 17	YEAR 2021	\$39.01
Mailing Address 1010 E Washington Ln				
City Philadelphia	State PA	Zip Code (Plus 4) 19138-1028		
Full Name of Contributor Mark Terry	MO. 5	DAY 11	YEAR 2021	\$51.83
Mailing Address 1333 N 26th St				
City Philadelphia	State PA	Zip Code (Plus 4) 19121-4636		
Full Name of Contributor Mark Terry	MO. 5	DAY 17	YEAR 2021	\$50.00
Mailing Address 1333 N 26th St				
City Philadelphia	State PA	Zip Code (Plus 4) 19121-4636		

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

PAGE TOTAL

\$140.84



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 over \$250.00 in the reporting period.

<b>Filer Identification Number:</b> 20200384					
<b>Full Name of Contributing Committee</b> 55th Ward Democratic Executive Committee		<b>MO.</b> 5	<b>DAY</b> 11	<b>YEAR</b> 2021	\$5,000.00
<b>Mailing Address</b> 3200 Magee Ave					
<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19149-2615		
<b>Full Name of Contributing Committee</b> AFSCME AFL-CIO 1199C		<b>MO.</b> 5	<b>DAY</b> 13	<b>YEAR</b> 2021	\$5,000.00
<b>Mailing Address</b> 1625 L St NW					
<b>City</b> Washington		<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20036-5665		
<b>Full Name of Contributing Committee</b> Greater PA Carpenters PAC		<b>MO.</b> 5	<b>DAY</b> 17	<b>YEAR</b> 2021	\$1,000.00
<b>Mailing Address</b> 1803 Spring Garden St					
<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130-3916		
<b>Full Name of Contributing Committee</b> Local Union #98 IBEW		<b>MO.</b> 5	<b>DAY</b> 19	<b>YEAR</b> 2021	\$12,000.00
<b>Mailing Address</b> 1719 Spring Garden St					
<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130-3915		
<b>Full Name of Contributing Committee</b> Plumbers Local Union 690		<b>MO.</b> 5	<b>DAY</b> 14	<b>YEAR</b> 2021	\$2,500.00
<b>Mailing Address</b> 2791 Southampton Rd					
<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19154-1211		
<b>Full Name of Contributing Committee</b> Sprinkler Fitters Local Union 692		<b>MO.</b> 5	<b>DAY</b> 13	<b>YEAR</b> 2021	\$1,500.00
<b>Mailing Address</b> 14004 McNulty Rd					
<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19154-1106		

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

**PAGE TOTAL**

\$27,000.00

## 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)

Filer Identification Number: 20200384						
Full Name of Contributor Kenneth Baritz			MO.	DAY	YEAR	\$500.00
			5	19	2021	
Mailing Address 100 S Broad St Ste 1205						
City Philadelphia			State PA	Zip Code (Plus 4) 19110-1015		
Employer Name Kenneth L. Baritz and Associates PC				Occupation Attorney		
Employer Mailing Address/Principal Place of Business 100 S Broad St Ste 1205 Philadelphia, PA 19110-1015						
Full Name of Contributor Georgia Davis			MO.	DAY	YEAR	\$400.00
			5	4	2021	
Mailing Address 2192 Homer St						
City Philadelphia			State PA	Zip Code (Plus 4) 19138-1934		
Employer Name Requested				Occupation Requested		
Employer Mailing Address/Principal Place of Business 2192 Homer St Philadelphia, PA 19138-1934						
Full Name of Contributor Thomas Fitzpatrick			MO.	DAY	YEAR	\$258.32
			5	19	2021	
Mailing Address 638 Drexel Ave						
City Drexel Hill			State PA	Zip Code (Plus 4) 19026-3826		
Employer Name MFR, LLC				Occupation Attorney		
Employer Mailing Address/Principal Place of Business 1500 Market St Philadelphia, PA 19102-2100						
Full Name of Contributor Noel Nkusi Karasayl			MO.	DAY	YEAR	\$500.00
			5	17	2021	
Mailing Address 657 Parkview Blvd						
City Yeadon			State PA	Zip Code (Plus 4) 19050-3433		
Employer Name The Barn				Occupation Owner		
Employer Mailing Address/Principal Place of Business 657 Parkview Blvd Yeadon, PA 19050-3433						
Full Name of Contributor Joseph Kunnel			MO.	DAY	YEAR	\$1,032.70
			5	19	2021	
Mailing Address 37 Brown Dr						
City Southampton			State PA	Zip Code (Plus 4) 18966-1172		
Employer Name Self Employed				Occupation Attorney		
Employer Mailing Address/Principal Place of Business 121 S Broad St Fl 18 Philadelphia, PA 19107-4533						

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

**PAGE TOTAL**

\$2,691.02

### 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)

Filer Identification Number: 20200384					
Full Name of Contributor Michael C Lambert		MO.	DAY	YEAR	\$500.00
		5	11	2021	
Mailing Address 5724 Rising Sun Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1640		
Employer Name Michael Lambert Law Office			Occupation Attorney		
Employer Mailing Address/Principal Place of Business 5724 Rising Sun Ave Philadelphia, PA 19120-1640					
Full Name of Contributor Peter Michael Lyde		MO.	DAY	YEAR	\$500.00
		5	11	2021	
Mailing Address 808 69th Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19126-2907		
Employer Name Requested			Occupation Requested		
Employer Mailing Address/Principal Place of Business 808 69th Ave Philadelphia, PA 19126-2907					
Full Name of Contributor Mountain Bay Distributors		MO.	DAY	YEAR	\$1,000.00
		5	20	2021	
Mailing Address 300 E Godfrey Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1646		
Employer Name			Occupation		
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor Barbara Smith-Lambert		MO.	DAY	YEAR	\$2,500.00
		5	4	2021	
Mailing Address 1213 Fanshawe St					
City Philadelphia		State PA	Zip Code (Plus 4) 19111-4923		
Employer Name American Airlines			Occupation Flight Attendant		
Employer Mailing Address/Principal Place of Business Phl International Airport Philadelphia, PA 19153					

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

PAGE TOTAL

\$4,500.00

**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

Filer Identification Number: 20200384

**1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the Reporting Period	(1)	\$0.00
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**2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)**

TOTAL for the Reporting Period	(2)	\$0.00
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**3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)**

TOTAL for the Reporting Period	(3)	\$10,620.71
--------------------------------	-----	-------------

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> ( Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1. Report Cover Page, Item F.)		\$10,620.71
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**In-Kind Contributions Received**  
**VALUE OVER \$250.00**

Filer Identification Number: 20200384					
Full Name of Contributor Democratic City Committee		MO. 5	DATE 10	YEAR 2021	\$10,620.71
Mailing Address 219 Spring Garden St					
City Philadelphia		State PA	Zip Code (Plus 4) 19123-2925		
Employer of Contributor N/A		Occupation N/A			
Employer Mailing Address/Principal Place of Business		Description of Contribution Design, Production, Mail House, and Postage			

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b> \$10,620.71
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## Statement of Expenditures

Filer Identification Number: 20200384						
To Whom Paid			MO.	DAY	YEAR	
Bank of America			5	7	2021	\$35.00
Mailing Address						
4610 City Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19131-1566			
Description of Expenditure						
Bank fees						
To Whom Paid			MO.	DAY	YEAR	
Bank of America			5	7	2021	\$35.00
Mailing Address						
4610 City Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19131-1566			
Description of Expenditure						
Bank fees						
To Whom Paid			MO.	DAY	YEAR	
Bank of America			5	12	2021	\$12.00
Mailing Address						
4610 City Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19131-1566			
Description of Expenditure						
Bank Fees						
To Whom Paid			MO.	DAY	YEAR	
Best Buy			5	7	2021	\$107.99
Mailing Address						
7601 Penn Ave S						
City		State	Zip Code (Plus 4)			
Richfield		MN	55423-8500			
Description of Expenditure						
Operating expenditure- campaign supplies						
To Whom Paid			MO.	DAY	YEAR	
BP Oil Company			5	7	2021	\$33.83
Mailing Address						
501 Westlake Park Blvd						
City		State	Zip Code (Plus 4)			
Houston		TX	77079-2604			
Description of Expenditure						
Gas for travel						
To Whom Paid			MO.	DAY	YEAR	
Cash App			5	17	2021	\$2.25
Mailing Address						
1455 Market St Ste 600						
City		State	Zip Code (Plus 4)			
San Francisco		CA	94103-1332			
Description of Expenditure						
Fee						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$226.07

## Statement of Expenditures

Filer Identification Number: 20200384					
To Whom Paid ChickFila		MO.	DAY	YEAR	\$40.00
		5	19	2021	
Mailing Address 9711 Roosevelt Blvd					
City Philadelphia	State PA	Zip Code (Plus 4) 19114-1010			
Description of Expenditure					
To Whom Paid Collective New Directions PAC		MO.	DAY	YEAR	\$5,000.00
		5	17	2021	
Mailing Address 3917 Reno St					
City Philadelphia	State PA	Zip Code (Plus 4) 19104-4807			
Description of Expenditure					
To Whom Paid Collective New Directions PAC		MO.	DAY	YEAR	\$5,000.00
		5	18	2021	
Mailing Address 3917 Reno St					
City Philadelphia	State PA	Zip Code (Plus 4) 19104-4807			
Description of Expenditure					
To Whom Paid Democratic City Committee		MO.	DAY	YEAR	\$5,000.00
		5	6	2021	
Mailing Address 219 Spring Garden St					
City Philadelphia	State PA	Zip Code (Plus 4) 19123-2925			
Description of Expenditure Contribution					
To Whom Paid Democratic City Committee		MO.	DAY	YEAR	\$5,000.00
		5	17	2021	
Mailing Address 219 Spring Garden St					
City Philadelphia	State PA	Zip Code (Plus 4) 19123-2925			
Description of Expenditure contribution					
To Whom Paid Dollar Plus		MO.	DAY	YEAR	\$40.61
		5	17	2021	
Mailing Address 2800 Fox St					
City Philadelphia	State PA	Zip Code (Plus 4) 19129-1838			
Description of Expenditure					

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$20,080.61

## Statement of Expenditures

Filer Identification Number: 20200384						
To Whom Paid			MO.	DAY	YEAR	
Francisco Echevarria			5	17	2021	\$125.00
Mailing Address						
1443 S 52nd St						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19143-5006			
Description of Expenditure						
Contribution						
To Whom Paid			MO.	DAY	YEAR	
Five Below			5	7	2021	\$5.40
Mailing Address						
701 Market St Ste 100						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19106-1533			
Description of Expenditure						
Operating expenditure- campaign supplies						
To Whom Paid			MO.	DAY	YEAR	
Friends of 21st Ward			5	13	2021	\$400.00
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure						
Contribution						
To Whom Paid			MO.	DAY	YEAR	
Gabi Jackmon			5	18	2021	\$30.00
Mailing Address						
145 Walnut St						
City		State	Zip Code (Plus 4)			
Jenkintown		PA	19046-3127			
Description of Expenditure						
To Whom Paid			MO.	DAY	YEAR	
Kennedy Printing Co.			5	5	2021	\$4,535.00
Mailing Address						
5534 Baltimore Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19143-3106			
Description of Expenditure						
Operating Expenditure						
To Whom Paid			MO.	DAY	YEAR	
Kennedy Printing Co.			5	10	2021	\$2,541.84
Mailing Address						
5534 Baltimore Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19143-3106			
Description of Expenditure						
Operating expenditure- campaign supplies						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$7,637.24



## Statement of Expenditures

Filer Identification Number: 20200384					
To Whom Paid Kennedy Printing Co.		MO.	DAY	YEAR	\$1,023.84
		5	12	2021	
Mailing Address 5534 Baltimore Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19143-3106		
Description of Expenditure					
To Whom Paid Kennedy Printing Co.		MO.	DAY	YEAR	\$1,142.00
		5	14	2021	
Mailing Address 5534 Baltimore Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19143-3106		
Description of Expenditure					
To Whom Paid Kennedy Printing Co.		MO.	DAY	YEAR	\$2,130.84
		5	17	2021	
Mailing Address 5534 Baltimore Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19143-3106		
Description of Expenditure					
To Whom Paid Michael C Lambert		MO.	DAY	YEAR	\$500.00
		5	12	2021	
Mailing Address 5724 Rising Sun Ave					
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1640		
Description of Expenditure Refund					
To Whom Paid North Philadelphia League of Voters		MO.	DAY	YEAR	\$750.00
		5	17	2021	
Mailing Address 123 S Broad St Ste 1800					
City Philadelphia		State PA	Zip Code (Plus 4) 19109-1026		
Description of Expenditure contribution					
To Whom Paid Paragon Solution		MO.	DAY	YEAR	\$103.90
		6	2	2021	
Mailing Address 2141 E Broadway Rd Ste 202					
City Tempe		State AZ	Zip Code (Plus 4) 85282-1895		
Description of Expenditure Merchant Fees					

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$5,650.58

## Statement of Expenditures

Filer Identification Number: 20200384						
To Whom Paid			MO.	DAY	YEAR	
Philadelphia Mailroom			6	1	2021	\$34.03
Mailing Address						
2722 Rhawn St						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19152-3420			
Description of Expenditure						
To Whom Paid			MO.	DAY	YEAR	
Deja Robinson			5	4	2021	\$100.00
Mailing Address						
8559 Michener Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19150-1601			
Description of Expenditure						
New logo						
To Whom Paid			MO.	DAY	YEAR	
Elyshia Sawyer			5	4	2021	\$6.00
Mailing Address						
1010 E Washington Ln						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19138-1028			
Description of Expenditure						
Reimbursement (CashApp)						
To Whom Paid			MO.	DAY	YEAR	
Elyshia Sawyer			5	17	2021	\$40.00
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure						
Reimbursement						
To Whom Paid			MO.	DAY	YEAR	
Elyshia Sawyer			5	17	2021	\$120.00
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure						
Reimbursement						
To Whom Paid			MO.	DAY	YEAR	
Shoprite			5	18	2021	\$49.92
Mailing Address						
6725 Frankford Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19135-2103			
Description of Expenditure						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$349.95

**Statement of Expenditures**

Filer Identification Number: 20200384			
To Whom Paid Staples		MO. DAY YEAR 5 10 2021	\$42.11
Mailing Address 7700 Germantown Avenue Chestnut H1			
City Philadelphia	State PA	Zip Code (Plus 4) 19118	
Description of Expenditure Operating expenditure- campaign supplies			
To Whom Paid Starbucks		MO. DAY YEAR 5 28 2021	\$25.44
Mailing Address 4600 City Ave			
City Philadelphia	State PA	Zip Code (Plus 4) 19131-1501	
Description of Expenditure			
To Whom Paid Starbucks		MO. DAY YEAR 5 28 2021	\$2.92
Mailing Address 4600 City Ave			
City Philadelphia	State PA	Zip Code (Plus 4) 19131-1501	
Description of Expenditure			
To Whom Paid Kim Washington		MO. DAY YEAR 5 17 2021	\$750.00
Mailing Address			
City	State	Zip Code (Plus 4)	
Description of Expenditure Operating Expenditure			
To Whom Paid Kim Washington		MO. DAY YEAR 5 18 2021	\$100.00
Mailing Address 5813 Delancey St			
City Philadelphia	State PA	Zip Code (Plus 4) 19143-1207	
Description of Expenditure			
To Whom Paid Kim Washington		MO. DAY YEAR 5 18 2021	\$250.00
Mailing Address 5813 Delancey St			
City Philadelphia	State PA	Zip Code (Plus 4) 19143-1207	
Description of Expenditure			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL**

\$1,170.47

**Statement of Expenditures**

Filer Identification Number: 20200384						
To Whom Paid			MO.	DAY	YEAR	
ZOOM Video Communication			5	7	2021	\$190.79
Mailing Address						
300 Park Ave Ste 14108						
City		State	Zip Code (Plus 4)			
New York		NY	10022-7402			
Description of Expenditure						
Operating expenditure- communications via Zoom						
To Whom Paid			MO.	DAY	YEAR	
ZOOM Video Communication			6	7	2021	\$28.90
Mailing Address						
300 Park Ave Ste 14108						
City		State	Zip Code (Plus 4)			
New York		NY	10022-7402			
Description of Expenditure						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

<p><b>PAGE TOTAL</b> \$219.69</p>
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**Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Filer Identification Number: 20200384					
Name of Creditor Barbara P Lambert					Outstanding Balance of Debt \$2,000.00
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO. 4	DAY 14
City Philadelphia			State PA	Zip Code (Plus 4) 19111-4923	
Description of Debt Loan					
Name of Creditor Michael C Lambert					Outstanding Balance of Debt \$1,500.00
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO. 12	DAY 11
City Philadelphia			State PA	Zip Code (Plus 4) 19120-1640	
Description of Debt Loan					
Name of Creditor Michael C Lambert					Outstanding Balance of Debt \$2,000.00
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO. 1	DAY 14
City Philadelphia			State PA	Zip Code (Plus 4) 19120-1640	
Description of Debt Loan					
Name of Creditor Michael C Lambert					Outstanding Balance of Debt \$1,000.00
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO. 1	DAY 26
City Philadelphia			State PA	Zip Code (Plus 4) 19120-1640	
Description of Debt Loan					
Name of Creditor Michael C Lambert					Outstanding Balance of Debt \$1,000.00
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO. 1	DAY 27
City Philadelphia			State PA	Zip Code (Plus 4) 19120-1640	
Description of Debt Loan					
Name of Creditor Michael C Lambert					Outstanding Balance of Debt \$1,000.00
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO. 4	DAY 27
City Philadelphia			State PA	Zip Code (Plus 4) 19120-1640	
Description of Debt Loan					

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

**PAGE TOTAL**  
\$8,500.00

**Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Filer Identification Number: 20200384						
Name of Creditor Michael C Lambert					Outstanding Balance of Debt \$500.00	
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO.	DAY	YEAR
				5	11	2021
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1640			
Description of Debt Loan						
Name of Creditor Law Office of Michael Lambert LLC					Outstanding Balance of Debt \$2,000.00	
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO.	DAY	YEAR
				2	3	2021
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1640			
Description of Debt Loan						
Name of Creditor Law Office of Michael Lambert LLC					Outstanding Balance of Debt \$5,000.00	
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO.	DAY	YEAR
				3	29	2021
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1640			
Description of Debt Loan						
Name of Creditor Law Office of Michael Lambert LLC					Outstanding Balance of Debt \$2,000.00	
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO.	DAY	YEAR
				4	5	2021
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1640			
Description of Debt Loan						
Name of Creditor Law Office of Michael Lambert LLC					Outstanding Balance of Debt \$3,000.00	
Mailing Address 5724 Rising Sun Ave			Date Debt Incurred	MO.	DAY	YEAR
				4	5	2021
City Philadelphia		State PA	Zip Code (Plus 4) 19120-1640			
Description of Debt Loan						
Name of Creditor Barbara Smith-Lambert					Outstanding Balance of Debt \$300.00	
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO.	DAY	YEAR
				1	27	2021
City Philadelphia		State PA	Zip Code (Plus 4) 19111-4923			
Description of Debt Loan						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

**PAGE TOTAL**  
\$12,800.00

**Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Filer Identification Number: 20200384					
Name of Creditor Barbara Smith-Lambert					Outstanding Balance of Debt \$100.00
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO. 1	DAY 27
City Philadelphia			State PA	Zip Code (Plus 4) 19111-4923	
Description of Debt Loan					
Name of Creditor Barbara Smith-Lambert					Outstanding Balance of Debt \$2,000.00
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO. 2	DAY 26
City Philadelphia			State PA	Zip Code (Plus 4) 19111-4923	
Description of Debt Loan					
Name of Creditor Barbara Smith-Lambert					Outstanding Balance of Debt \$2,500.00
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO. 2	DAY 26
City Philadelphia			State PA	Zip Code (Plus 4) 19111-4923	
Description of Debt Loan					
Name of Creditor Barbara Smith-Lambert					Outstanding Balance of Debt \$2,500.00
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO. 3	DAY 15
City Philadelphia			State PA	Zip Code (Plus 4) 19111-4923	
Description of Debt Loan					
Name of Creditor Barbara Smith-Lambert					Outstanding Balance of Debt \$2,000.00
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO. 3	DAY 15
City Philadelphia			State PA	Zip Code (Plus 4) 19111-4923	
Description of Debt Loan					
Name of Creditor Barbara Smith-Lambert					Outstanding Balance of Debt \$5,000.00
Mailing Address 1213 Fanshawe St			Date Debt Incurred	MO. 3	DAY 25
City Philadelphia			State PA	Zip Code (Plus 4) 19111-4923	
Description of Debt Loan					

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

**PAGE TOTAL**  
\$14,100.00

**Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Filer Identification Number: 20200384							
Name of Creditor Barbara Smith-Lambert						Outstanding Balance of Debt \$5,000.00	
Mailing Address 1213 Fanshawe St				Date Debt Incurred	MO.	DAY	YEAR
					3	25	2021
City Philadelphia				State	Zip Code (Plus 4)		
				PA	19111-4923		
Description of Debt Loan							
Name of Creditor Barbara Smith-Lambert						Outstanding Balance of Debt \$2,500.00	
Mailing Address 1213 Fanshawe St				Date Debt Incurred	MO.	DAY	YEAR
					5	4	2021
City Philadelphia				State	Zip Code (Plus 4)		
				PA	19111-4923		
Description of Debt Loan							

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

<b>PAGE TOTAL</b> \$7,500.00
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