

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20200384		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> Friends of Michael C. Lambert												
<b>Street Address:</b> 5724 Rising Sun Ave												
<b>City:</b> Philadelphia						<b>State:</b> PA			<b>Zip Code:</b> 19111			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2021		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
JUDGE OF THE MUNICIPAL COURT						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	1	MCJ	DEM	51
						11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		9	14	2021		10	18	2021				
<b>A. Amount Brought Forward From Last Report</b>						\$		9,536.64				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$		3,551.83				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$		13,088.47				
<b>D. Total Expenditures (From Schedule III)</b>						\$		13,003.94				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$		84.53				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$		37,400.00				

## 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 filed 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

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**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 Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Friends of Michael C. Lambert	From: <u>9/14/2021</u> To: <u>10/18/2021</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 51.83
<b>TOTAL for the Reporting Period (2)</b>	\$ 51.83

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 2,500.00
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 3,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 3,551.83
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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)**

<b>Name of Filing Committee or Candidate</b> Friends of Michael C. Lambert	<b>Reporting Period</b> <b>From:</b> <u>9/14/2021</u> <b>To:</b> <u>10/18/2021</u>
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				DATE			AMOUNT	
Full Name of Contributor Mark Terry				MO	DAY	YEAR	\$ 51.83	
Mailing Address 1333 N 26th St				10	11	2021		
City Philadelphia	State PA	Zip Code (Plus 4) 191214636						

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

<b>PAGE TOTAL</b>
\$ 51.83

## 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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Friends of Michael C. Lambert	<b>From:</b> <u>9/14/2021</u> <b>To:</b> <u>10/18/2021</u>

DATE				AMOUNT
Full Name of Contributing Committee				
Int'l Union of Operating Engineers Local 542 PAC				
Mailing Address				
2375 Virginia Street Dr Ste 100				
City	State	Zip Code (Plus 4)		
Fort Washington	PA	19034		
		10	4	2021
				\$ 2,500.00

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

<b>PAGE TOTAL</b>
\$ 2,500.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  Friends of Michael C. Lambert	<b>Reporting Period</b>  <b>From:</b> <u>9/14/2021</u> <b>To:</b> <u>10/18/2021</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Laborers District Council PAC Fund							
<b>Mailing Address</b> 665 N Broad St Fl 5				10	1	2021	\$ 1,000.00
City      Philadelphia	State PA	Zip Code (Plus 4) 191232537					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 1,000.00

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	Reporting Period
	From: To:

DATE				AMOUNT
Full Name				
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Receipt Description				

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
Friends of Michael C. Lambert		From: <u>9/14/2021</u> To: <u>10/18/2021</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: <span style="float: right;">To:</span>

			DATE			AMOUNT
Full Name of Contributor			MO	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 Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b> \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Friends of Michael C. Lambert	From <u>9/14/2021</u> To: <u>10/18/2021</u>

DATE				AMOUNT
<b>To Whom Paid</b> Banana's Bar	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,366.45
<b>Mailing Address</b> 5500 Rising Sun Ave	9	17	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191203011	<b>Description of Expenditure</b> Event space rental fee	
<b>To Whom Paid</b> Banana's Bar	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,366.45
<b>Mailing Address</b> 5500 Rising Sun Ave	9	24	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191203011	<b>Description of Expenditure</b> Event space rental fee, ii	
<b>To Whom Paid</b> Bank of America	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 16.00
<b>Mailing Address</b> 4610 City Ave	10	1	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191311566	<b>Description of Expenditure</b> Bank Fees	
<b>To Whom Paid</b> Conoco Gas Station	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 37.72
<b>Mailing Address</b> 5701 Rising Sun Ave	9	28	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191201630	<b>Description of Expenditure</b> Travel gas	
<b>To Whom Paid</b> Conoco Gas Station	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 65.34
<b>Mailing Address</b> 5701 Rising Sun Ave	10	7	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191201630	<b>Description of Expenditure</b> Travel gas	

<b>To Whom Paid</b> Have Faith Home Care LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 4,204.50
<b>Mailing Address</b> 7050 Reedland St			10	1	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191421716	<b>Description of Expenditure</b> venue payment			

  

<b>To Whom Paid</b> Law Office of Michael Lambert LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3,400.00
<b>Mailing Address</b> 5724 Rising Sun Ave			10	6	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191201640	<b>Description of Expenditure</b> Loan Repayment			

  

<b>To Whom Paid</b> Paragon Solution			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 114.75
<b>Mailing Address</b> 2141 E Broadway Rd Ste 202			10	4	2021	
<b>City</b> Tempe	<b>State</b> AZ	<b>Zip Code (Plus 4)</b> 852821895	<b>Description of Expenditure</b> Operating Expenditure			

  

<b>To Whom Paid</b> USPS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 432.73
<b>Mailing Address</b> 101 E Olney Ave Unit 330			10	2	2021	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191202543	<b>Description of Expenditure</b> Postage			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 13,003.94

**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

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
Friends of Michael C. Lambert				<b>From:</b> <u>9/14/2021</u> <b>To:</b> <u>10/18/2021</u>			

  

<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Barbara P Lambert				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,000.00
<b>Mailing Address</b> 1213 Fanshawe St				4	14	2021	
<b>City</b> Philadelphia	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 191114923		<b>Description of Debt</b> Loan		

  

<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Michael C Lambert				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b> 5724 Rising Sun Ave				12	11	2020	
<b>City</b> Philadelphia	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 191201640		<b>Description of Debt</b> Loan		

  

<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Michael C Lambert				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 5724 Rising Sun Ave				1	26	2021	
<b>City</b> Philadelphia	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 191201640		<b>Description of Debt</b> Loan		

  

<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Michael C Lambert				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 5724 Rising Sun Ave				1	27	2021	
<b>City</b> Philadelphia	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 191201640		<b>Description of Debt</b> Loan		

DATE					Outstanding Balance of Debt	
Name of Creditor Michael C Lambert			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 5724 Rising Sun Ave			4	27	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191201640	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Law Office of Michael Lambert LLC			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 5724 Rising Sun Ave			2	3	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191201640	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Law Office of Michael Lambert LLC			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 5724 Rising Sun Ave			3	29	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191201640	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Law Office of Michael Lambert LLC			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 5724 Rising Sun Ave			4	5	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191201640	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 300.00
Mailing Address 1213 Fanshawe St			1	27	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan			

DATE					Outstanding Balance of Debt	
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 100.00
Mailing Address 1213 Fanshawe St			1	27	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 1213 Fanshawe St			2	26	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 1213 Fanshawe St			2	26	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 1213 Fanshawe St			3	15	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan			
DATE					Outstanding Balance of Debt	
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 1213 Fanshawe St			3	15	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan			

				DATE			Outstanding Balance of Debt
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 5,000.00	
Mailing Address 1213 Fanshawe St			3	25	2021		
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan				
				DATE			Outstanding Balance of Debt
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 5,000.00	
Mailing Address 1213 Fanshawe St			3	25	2021		
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan				
				DATE			Outstanding Balance of Debt
Name of Creditor Barbara Smith-Lambert			MO	DAY	YEAR	\$ 2,500.00	
Mailing Address 1213 Fanshawe St			5	4	2021		
City Philadelphia	State PA	Zip Code (Plus 4) 191114923	Description of Debt Loan				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 37,400.00	