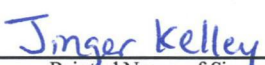
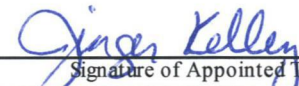


Disclosure Report Cover

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information				
a. Full Name			c. ID Number	
COMMITTEE TO ELECT JACK LAMBERT			109-9N9F01-C-001	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
57 UNION STREET SOUTH CONCORD, NC 28025			10/25/2023	
			e. Phone Number	
			(828) 776-2774	
2. Report Year	3. Period Start Date (m m/dd/yy)	4. Period End Date (m m/dd/yy)	5. Treasurer Full Name	
2023	09/27/2023	10/23/2023	JINGER KELLEY	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input checked="" type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
8. Number of Fundraisers this Report		10. Special Report Name		
1				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
F&M BANK				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
MAINTAINING INCOME & EXPENSES	JLL			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 33,759.66		\$	
CERTIFICATION				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board				
 Printed Name of Signer		 Signature of Appointed Treasurer		10/25/2023 Date
FOR OFFICE USE ONLY				
Date Received:	10/30/2023	Employee:	WAN	
Date Postmarked:	10/26/2023	Employee:	WAN	
Date Scanned:	10/30/2023	Employee:	WAN	
Date Data Entered:		Employee:		
Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training				
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.				

Detailed Summary

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
COMMITTEE TO ELECT JACK LAMBERT	2023 Pre-Election	109-9N9F01-C-001	
Start of Election Cycle: January 1, 2022		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 33,759.66	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 367.00	\$ 1,127.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,600.00	\$ 13,749.33
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 1,050.00
9) Loan Proceeds	(CRO-1410)	\$ 4,000.00	\$ 35,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 5,967.00	\$ 50,926.33
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 1,234.17	\$ 11,235.12
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 300.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 92.09	\$ 990.81
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,326.26	\$ 12,525.93
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 38,400.40	\$ 38,400.40
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 35,000.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Page 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT				109-9N9F01-C-001	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	JLL	Credit Card		09/28/2023	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Credit Card		09/28/2023	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Credit Card		09/28/2023	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Check		09/28/2023	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Cash		09/28/2023	\$ 42.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Cash		09/28/2023	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Credit Card		10/18/2023	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Cash		09/28/2023	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	JLL	Cash		09/28/2023	\$ 20.00
<input type="checkbox"/> Remove					
4. Total only this Page				\$	\$367.00
5. Total of ALL CRO-1205 Pages				\$	\$367.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT						109-9N9F01-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SUSAN BARE PO BOX 1225 KANNAPOLIS, NC 28082				NO JOB TITLE			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JLL	Check		09/28/2023	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JENNIFER BOST 1073 HEARTH LN SW CONCORD, NC 28025				NO JOB TITLE			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		e. Election Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JLL	Credit Card		10/03/2023	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ADAM BROWN PO BOX 608 CONCORD, NC 28026				MAIL CARRIER			
				c. Employer's Name/Specific Field			
				USPS		e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JLL	Credit Card		10/07/2023	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1,600.00	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT						109-9N9F01-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SAMUEL COLLINS 5562 VILLAGE DR NW CONCORD, NC 28027				NO JOB TITLE			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED			
				e. Election Sum to Date			
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	JLL	Check		09/28/2023		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LORETTA COLTRANE 110 FOREST CLIFF CT NE CONCORD, NC 28025				NO JOB TITLE			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED			
				e. Election Sum to Date			
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	JLL	Check		09/28/2023		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JENNIFER HURLOCKER 6617 MOUNT OLIVE RD CONCORD, NC 28025				PARALEGAL			
				c. Employer's Name/Specific Field			
				MILLSAPS & BRATTON			
				e. Election Sum to Date			
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	JLL	Credit Card		09/30/2023		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1,600.00	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT				109-9N9F01-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
V ELIZABETH WILLIS 9350 HWY 601 S MIDLAND, NC 28107			NO JOB TITLE		
			c. Employer's Name/Specific Field		e. Election Sum to Date
			NOT EMPLOYED		
					\$ 1,500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	JLL	Check		09/29/2023	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 500.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,600.00

Loan Proceeds

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report proceeds from a loan and loan endorser's information
 A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT				109-9N9F01-C-001	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
JACKSON L LAMBERT 57 UNION STREET SOUTH STE 501 CONCORD, NC 28025		PARTNER			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		L&L CORE SUPPLY		10/03/2023	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
%		JLL	Electric Funds Tran	\$ 4,000.00	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
5. Total of ALL CRO-1410 Pages <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>				\$ 4,000.00	

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT						109-9N9F01-C-001	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
AMAZON.COM, INC 410 TERRY AVE N SEATTLE, WA 98109							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 74.89	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JLL	Debit Card	O	10/16/2023	\$ 74.89	TENT/CHAIR		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
CABARRUS HEALTHCARE FOUNDATION 920 CHURCH ST N CONCORD, NC 28025							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JLL	Check	O	10/15/2023	\$ 150.00	EVENT TICKETS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
CABARRUS REGIONAL CHAMBER OF COMMERCE 3003 DALE EARNHARDT BLVD KANNAPOLIS, NC 28083							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JLL	Debit Card	O	10/11/2023	\$ 100.00	EVENT TICKET		
				\$			
5. Total only this Page						\$ 324.89	
6. Total of ALL CRO-1310 Pages							
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						\$ 1,234.17	
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT						109-9N9F01-C-001	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CASCO SIGNS 199 WILSHIRE AVE SW CONCORD, NC 28025							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 2,995.87	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JLL	Debit Card	O	10/05/2023	\$ 694.33	PALM CARDS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CUSTOM INK 6800 D, PHILLIPS PL CT CHARLOTTE, NC 28210							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 64.95	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JLL	Debit Card	O	10/18/2023	\$ 64.95	CMPN HOODIE		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
FLYWHEEL 57 UNION ST S CONCORD, NC 28025							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JLL	Check	O	10/19/2023	\$ 150.00	EVENT SPACE RENT		
				\$			
5. Total only this Page						\$ 909.28	
6. Total of ALL CRO-1310 Pages						\$ 1,234.17	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Aggregated Non-Media Expenditures

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT						109-9N9F01-C-001	
3. Payee Information							
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JLL	Draft	O	10/02/2023	\$ 10.20	CC FEES	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JLL	Draft	O	10/09/2023	\$ 20.60	CC FEES	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JLL	Draft	O	10/23/2023	\$ 2.30	CC FEES	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JLL	Debit Card	O	09/29/2023	\$ 29.99	DIGITAL MAILBOX SUBSCRIPTION	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JLL	Debit Card	O	09/29/2023	\$ 23.00	CMPN WEBSITE MGMT	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JLL	Debit Card	O	10/11/2023	\$ 6.00	CMPN WEBSITE MGMT	
4. Total only this Page						\$	92.09
5. Total of ALL CRO-1315 Pages						\$	92.09
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>							
6. Purpose Codes (List detailed expenditure code in (d) above)							
B* - Printing		C* - Fundraising		D - To Another Candidate			
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donations to Legal Expense Fund	
O* - Other							
* Codes require detailed explanation in required remarks field (g)							

Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT		109-9N9F01-C-001	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JACKSON L LAMBERT 57 UNION STREET SOUTH STE 501 CONCORD, NC 28025		PARTNER	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		L&L CORE SUPPLY	11/03/2022
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 20,000.00	\$ 20,000.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JACKSON L LAMBERT 57 UNION STREET SOUTH STE 501 CONCORD, NC 28025		PARTNER	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		L&L CORE SUPPLY	12/29/2022
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 2,000.00	\$ 2,000.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JACKSON L LAMBERT 57 UNION STREET SOUTH STE 501 CONCORD, NC 28025		PARTNER	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		L&L CORE SUPPLY	05/22/2023
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 9,000.00	\$ 9,000.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 31,000.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 35,000.00	

Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT JACK LAMBERT		109-9N9F01-C-001	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JACKSON L LAMBERT 57 UNION STREET SOUTH STE 501 CONCORD, NC 28025		PARTNER	
		e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field	10/03/2023
		L&L CORE SUPPLY	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 4,000.00	\$ 4,000.00
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 4,000.00
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 35,000.00



NORTH CAROLINA STATE BOARD OF ELECTIONS

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- **Name of committee to receive loan:** The Committee to Elect Jack Lambert
- **Person or committee to make loan:** Jackson L. Lambert
- **Date of loan to committee:** 10/03/2023
- **Name of lending institution (source):**
Jackson L. Lambert
- **Amount of loan:** \$4,000.00 (Four Thousand)
- **Description (if in-kind loan):** _____
- **Names of all parties responsible for payment of loan (guarantors):**
N/A
- **Period of loan:** N/A
- **Rate of interest of loan:** 0%
- **Security pledged for loan:** 0%

I, Jackson L. Lambert, acknowledge that all of the information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Jackson L. Lambert 10/3/23
Signature of Lender **Date Signed**

James A. Kelley 10/20/23
Signature of Treasurer of Committee **Date Signed**

Committee to Elect ~~Todd Lamb~~
c/o Jinger Kelley

236 Summerhouse Pt
Norwood, NC 28128



28026

RDC 99

U.S. POSTAGE PAID
FCM LETTER
NORWOOD, NC 28128
OCT 26, 2023

\$0.90

R2304H109010-02

Cabarrus County BOE
ATTN: Wyatt Newsome
369 Church St. N
Concord, NC 28026