

**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

THE COMMITTEE TO ELECT STUART AMORIELL

ADDRESS (number and street)

2720 MAIN STREET

SUITE 5

LAKE PLACID

NY

12946

☐ Check if different
than previously
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00928465

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NY

21

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

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer AMORIELL, STUART JAMESON, J.,

Signature of Treasurer

AMORIELL, STUART JAMESON, J.,

Date

M M /

D D /

Y Y Y Y

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**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

THE COMMITTEE TO ELECT STUART AMORIELL

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

	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))	17043.53	17043.53
(b) Total Contribution Refunds (from Line 20(d))	5000.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	12043.53	12043.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	89842.45	89842.45
(b) Total Offsets to Operating Expenditures (from Line 14)	100.23	100.23
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	89742.22	89742.22
8. Cash on Hand at Close of Reporting Period (from Line 27)	15806.10	
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)	107139.34	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

THE COMMITTEE TO ELECT STUART AMORIELL

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**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).....

2824.75

2824.75

(ii) Unitemized

9218.78

9218.78

(iii) TOTAL of contributions
from individuals ▶

12043.53

12043.53

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

5000.00

5000.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

17043.53

17043.53

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

93504.79

93504.79

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

93504.79

93504.79

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

100.23

100.23

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)..... ▶

110648.55

110648.55

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

89842.45

89842.45

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

5000.00

5000.00

(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)).....

5000.00

5000.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

94842.45

94842.45

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

110648.55

25. SUBTOTAL (add Line 23 and Line 24).....

110648.55

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

94842.45

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

15806.10

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 5 OF 58

☒ 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)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

ADIRONDACK REAL ESTATE DEVELOPMENT LLC

A.

Mailing Address P.O. BOX 1513

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 13 2026

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J. ,

B.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C

H6NY21223

Name of Employer

Occupation

Self-Employed

Business Owner

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

20005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 09 2026

Transaction ID : SA11AI.4919

Amount of Each Receipt this Period

5.00



Memo Item

Full Name (Last, First, Middle Initial)

Blauvelt, Thomas, , ,

C.

Mailing Address 251 May Rd

City

Potsdam

State

NY

Zip Code

13676

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 12 2026

Transaction ID : SA11AI.4956

Amount of Each Receipt this Period

250.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

755.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

Blazer, Teddy, T, ,

A.

Mailing Address PO Box 145

City

Lake Placid

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 15 2026

Transaction ID : SA11AI.4099

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ferretti, Joan, , ,

B.

Mailing Address 177 Tarbell hill lane

City

Long Lake

State

NY

Zip Code

12847

FEC ID number of contributing
federal political committee.

C

Name of Employer

Joan ferretti

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 06 2026

Transaction ID : SA11AI.4905

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Geil, Kevin, , ,

C.

Mailing Address PO Box 774

City

Lake Placid

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 02 2026

Transaction ID : SA11AI.4302

Amount of Each Receipt this Period

259.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1009.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

Platt, Robert, , ,

A.

Mailing Address 7 Park Rdg

City

TUPPER LAKE

State

NY

Zip Code

12986

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 04 2026

Transaction ID : SA11AI.5173

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Query, Jim, , ,

B.

Mailing Address 9370 Windsor Lake Blvd Apt 202

City

Columbia

State

SC

Zip Code

29223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 02 2026

Transaction ID : SA11AI.4640

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wells, Jane, , ,

C.

Mailing Address 690 Bagdad Rd

City

Potsdam

State

NY

Zip Code

13676

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 03 2026

Transaction ID : SA11AI.4290

Amount of Each Receipt this Period

310.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1060.75

2824.75

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)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d
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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 09 2026

Transaction ID : SA11D.4198

Amount of Each Receipt this Period

5000.00

☐ Memo Item

BANK RETURNED CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. 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

Full Name (Last, First, Middle Initial)

C. 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)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5000.00

5000.00

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)

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☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2026

Transaction ID : SA13A.4105

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

B.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2026

Transaction ID : SA13A.4106

Amount of Each Receipt this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

C.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2026

Transaction ID : SA13A.4108

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

55405.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	6

Transaction ID : SA13A.4109

Amount of Each Receipt this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

B. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

60420.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5345

Amount of Each Receipt this Period

5015.61

☐ Memo Item

Robocent

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

C. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

60487.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5347

Amount of Each Receipt this Period

66.60

☐ Memo Item

CANVA

SUBTOTAL of Receipts This Page (optional)..... ▶

45082.21

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

69263.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5348

Amount of Each Receipt this Period

8776.25

☐ Memo Item

NYS DEMS VOTER DATA

B.

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

73898.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5349

Amount of Each Receipt this Period

4634.55

☐ Memo Item

MFSTRATEGIES

C.

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

79839.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5350

Amount of Each Receipt this Period

5941.43

☐ Memo Item

FACEBOOK/META

SUBTOTAL of Receipts This Page (optional)..... ▶

19352.23

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J ,

A. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80886.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5351

Amount of Each Receipt this Period

1047.00

☐ Memo Item
CAUSEIQ

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J ,

B. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81303.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5352

Amount of Each Receipt this Period

417.00

☐ Memo Item
INTUIT QB

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J ,

C. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81487.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5353

Amount of Each Receipt this Period

183.60

☐ Memo Item
TEXTEDLY

SUBTOTAL of Receipts This Page (optional)..... ►

1647.60

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)

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☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81529.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5354

Amount of Each Receipt this Period

41.96

☐ Memo Item
ZOOM

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

B.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81739.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5355

Amount of Each Receipt this Period

210.90

☐ Memo Item
OOMA

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

C.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

84436.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5356

Amount of Each Receipt this Period

2697.00

☐ Memo Item
PH MEDIA

SUBTOTAL of Receipts This Page (optional)..... ►

2949.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

85836.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5357

Amount of Each Receipt this Period

1400.00

☐ Memo Item

JORDAN CRAIG PHOTOGRAPHY

B.

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

89836.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5358

Amount of Each Receipt this Period

4000.00

☐ Memo Item

JUNIPER ENTERPRISES

C.

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

90156.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5359

Amount of Each Receipt this Period

320.00

☐ Memo Item

VERIZON

SUBTOTAL of Receipts This Page (optional)..... ►

5720.00

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

90361.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5360

Amount of Each Receipt this Period

205.00

☐ Memo Item

FAIRFIELD INN & SUITES ROME

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

B.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

91288.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5361

Amount of Each Receipt this Period

926.70

☐ Memo Item

MOXY LOWER EAST SIDE

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

C.

Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

91628.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5362

Amount of Each Receipt this Period

340.00

☐ Memo Item

AMTRAK

SUBTOTAL of Receipts This Page (optional)..... ▶

1471.70

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

91938.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5363

Amount of Each Receipt this Period

309.65

☐ Memo Item

FAIRFIELD INN & SUITES VERONA

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

B. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

93138.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5364

Amount of Each Receipt this Period

1200.00

☐ Memo Item

RUN WEBSITES

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

C. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.

C H6NY21223

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

93299.79

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA13A.5365

Amount of Each Receipt this Period

161.54

☐ Memo Item

UPS STORE

SUBTOTAL of Receipts This Page (optional)..... ▶

1671.19

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

AMORIELL, STUART JAMESON, J, ,

A. Mailing Address 24 RASPBERRY WAY

City

LAKE PLACID

State

NY

Zip Code

12946

FEC ID number of contributing
federal political committee.**C** H6NY21223Name of Employer
Self-EmployedOccupation
Business Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

93509.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA13A.5366

Amount of Each Receipt this Period

210.00

☐ Memo Item
USPS

Full Name (Last, First, Middle Initial)

B. 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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

210.00

TOTAL This Period (last page this line number only)..... ▶

93504.79

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address 366 Summer St

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Aggregate Processing Fees

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

377.91

Transaction ID : SB17.5340

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
TRAIN TICKETS

002

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

340.00

Transaction ID : SB17.4277

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BCOM SOLUTIONS, LLCMailing Address 747 O STREET
#150City
LINCOLNState
NEZip Code
68508Purpose of Disbursement
SOCIAL MEDIA

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.4189

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6217.91

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. BonterratechMailing Address 1445 NEW YORK AVE NW
SUITE 200City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
NGP/Van

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

2697.30

Transaction ID : SB17.4263

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BonterratechMailing Address 1445 NEW YORK AVE NW
SUITE 200City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
Aggregate Transaction Fees 1/1 to 3/31

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

47.53

Transaction ID : SB17.5339

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSTANT CONTACTMailing Address 890 WINTER STREET
SUITE 300City
WALTHAMState
MAZip Code
02451

Purpose of Disbursement

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

113.40

Transaction ID : SB17.4170

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2858.23

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. CONSTANT CONTACTMailing Address 890 WINTER STREET
SUITE 300City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
COMMUNICATION

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M / D D / Y Y Y Y
03 / 30 / 2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

226.80

Transaction ID : SB17.4194

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DATAZAPPMailing Address 555 W GRANADA BLVD
STE G6City
ORMOND BEACHState
FLZip Code
32174Purpose of Disbursement
DATA

004

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M / D D / Y Y Y Y
01 / 20 / 2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

425.00

Transaction ID : SB17.4112

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DESIGNED TO RUN

Mailing Address 651 N BROAD ST

City
MIDDLETOWNState
DEZip Code
19709Purpose of Disbursement
WEBSITE

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17.4269

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1851.80

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 META WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C	C00928465
---	-----------

Purpose of Disbursement
FACEBOOK ADVERTISING

004

Amount of Each Disbursement this Period

5941.43

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.4245

☐ Memo Item

State: NY

District: 21

Full Name (Last, First, Middle Initial)

B. FAIRFIELD INN & SUITES ROME

Mailing Address 90 DART CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
ROMEState
NYZip Code
13441

FEC Identification Number

C	C00928465
---	-----------

Purpose of Disbursement
HOTEL

002

Amount of Each Disbursement this Period

205.00

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.4259

☐ Memo Item

State: NY

District: 21

Full Name (Last, First, Middle Initial)

C. FAIRFIELD INN & SUITES VERONA

Mailing Address 5280 WILLOW PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
VERONAState
NYZip Code
13478

FEC Identification Number

C	C00928465
---	-----------

Purpose of Disbursement
HOTEL

002

Amount of Each Disbursement this Period

309.65

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.4267

☐ Memo Item

State: NY

District: 21

SUBTOTAL of Disbursements This Page (optional).....▶

6456.08

TOTAL This Period (last page this line number only).....▶

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. GET OUT THE VOTE

Mailing Address 20 CLOVERLEAF DRIVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	6

City
NEW FAIRFIELDState
CTZip Code
06812

FEC Identification Number

C C00928465

Purpose of Disbursement
PETITIONING

001

Amount of Each Disbursement this Period

5717.50

Transaction ID : SB17.4124

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Full Name (Last, First, Middle Initial)

B. GET OUT THE VOTE

Mailing Address 20 CLOVERLEAF DRIVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	6

City
NEW FAIRFIELDState
CTZip Code
06812

FEC Identification Number

C C00928465

Purpose of Disbursement
PETITIONING

001

Amount of Each Disbursement this Period

3137.50

Transaction ID : SB17.4138

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Full Name (Last, First, Middle Initial)

C. GET OUT THE VOTE

Mailing Address 20 CLOVERLEAF DRIVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	6

City
NEW FAIRFIELDState
CTZip Code
06812

FEC Identification Number

C C00928465

Purpose of Disbursement

001

Amount of Each Disbursement this Period

8855.00

Transaction ID : SB17.4188

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

SUBTOTAL of Disbursements This Page (optional).....▶

17710.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. GRAUBARD, HOWARD, , , Esq.

Mailing Address 462 DEGRAW ST

City
BROOKLYNState
NYZip Code
11217Purpose of Disbursement
LAWYER EXPENSE

001

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

4250.00

Transaction ID : SB17.4122

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GROUND FLOOR POLITICAL

Mailing Address 1312 17TH STREET UNIT #2585

City
DENVERState
COZip Code
80202Purpose of Disbursement
FUNDRAISING

003

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

951.91

Transaction ID : SB17.4119

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GROUND FLOOR POLITICAL

Mailing Address 1312 17TH STREET UNIT #2585

City
DENVERState
COZip Code
80202Purpose of Disbursement
DATA FOR FUNDRAISING

003

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB17.4121

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8701.91

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. GROUND FLOOR POLITICAL

Mailing Address 1312 17TH STREET UNIT #2585

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2026

City
DENVERState
COZip Code
80202Purpose of Disbursement
FUNDRAISING

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

1680.54

Transaction ID : SB17.4163

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GROUND FLOOR POLITICAL

Mailing Address 1312 17TH STREET UNIT #2585

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2026

City
DENVERState
COZip Code
80202Purpose of Disbursement
FUNDRAISING

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

646.24

Transaction ID : SB17.4166

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GROUND FLOOR POLITICAL

Mailing Address 1312 17TH STREET UNIT #2585

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2026

City
DENVERState
COZip Code
80202Purpose of Disbursement
FUNDRAISING

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

5643.97

Transaction ID : SB17.4179

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7970.75

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. INTUIT INC.

Mailing Address 2700 COAST AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2026

City
MOUNTAIN VIEWState
CAZip Code
94043

FEC Identification Number

C C00928465

Purpose of Disbursement
PAYROLL

001

Amount of Each Disbursement this Period

199.00

Transaction ID : SB17.4187

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Full Name (Last, First, Middle Initial)

B. INTUIT INC.

Mailing Address 2700 COAST AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
MOUNTAIN VIEWState
CAZip Code
94043

FEC Identification Number

C C00928465

Purpose of Disbursement
PAYROLL COSTS

001

Amount of Each Disbursement this Period

417.60

Transaction ID : SB17.4249

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Full Name (Last, First, Middle Initial)

C. JORDAN CRAIG MEDIA LLCMailing Address 2591 MAIN ST
SUITE 1623

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
LAKE PLACIDState
NYZip Code
12946

FEC Identification Number

C C00928465

Purpose of Disbursement
PHOTOGRAPHY

007

Amount of Each Disbursement this Period

1400.00

Transaction ID : SB17.4257

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

SUBTOTAL of Disbursements This Page (optional).....▶

2016.60

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. Juniper Enterprises

Mailing Address 2720 Main St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
Lake PlacidState
NYZip Code
12946

FEC Identification Number

C	C00928465
---	-----------

Purpose of Disbursement
Office Rent

001

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.4283

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Full Name (Last, First, Middle Initial)

B. MFStrategies, LLC

Mailing Address PO Box 439

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
HarrisburgState
PAZip Code
17108

FEC Identification Number

C	C00928465
---	-----------

Purpose of Disbursement
Consulting

001

Amount of Each Disbursement this Period

4634.55

Transaction ID : SB17.4280

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Full Name (Last, First, Middle Initial)

C. MOXY NYC LOWER EAST SIDE

Mailing Address 145 BOWERY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
NEW YORKState
NYZip Code
10002

FEC Identification Number

C	C00928465
---	-----------

Purpose of Disbursement
HOTEL

002

Amount of Each Disbursement this Period

926.70

Transaction ID : SB17.4265

☐ Memo Item

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

SUBTOTAL of Disbursements This Page (optional).....▶

9561.25

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. NEW YORK STATE DEMOCRATIC COMMITTEEMailing Address 64 BEAVER ST
#210City
NEW YORKState
NYZip Code
10004Purpose of Disbursement
VOTER DATA

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 21Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

8776.25

Transaction ID : SB17.4244

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NONPROFIT METRICS LLCMailing Address 255 S KING ST
STE 800City
SEATTLEState
WAZip Code
98104Purpose of Disbursement
DATA

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 21Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

1047.00

Transaction ID : SB17.4247

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OOMA INC

Mailing Address 1840 EMBARCADERO RD

City
PALO ALTOState
CAZip Code
94303Purpose of Disbursement
COMMUNICATIONS

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 21Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

210.90

Transaction ID : SB17.4254

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

10034.15

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. PH SOCIAL MEDIA, INCMailing Address 3840 EAST ROBINSON RD
SUITE 220City
AMHERSTState
NYZip Code
14228Purpose of Disbursement
SOCIAL MEDIA

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M / D D / Y Y Y Y
02 / 09 / 2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

899.00

Transaction ID : SB17.4133

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PH SOCIAL MEDIA, INCMailing Address 3840 EAST ROBINSON RD
SUITE 220City
AMHERSTState
NYZip Code
14228Purpose of Disbursement
SOCIAL MEDIA

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

2697.00

Transaction ID : SB17.4256

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PRWEB

Mailing Address 12051 INDIAN CREEK COURT

City
BELTSVILLEState
MDZip Code
20705Purpose of Disbursement
MEDIA

004

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M / D D / Y Y Y Y
02 / 23 / 2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

360.00

Transaction ID : SB17.4164

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3956.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 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)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. ROBOCENT, INCMailing Address 2129 GENERAL BOOTH BLVD
SUITE 103-277City
VIRGINIA BEACHState
VAZip Code
23454Purpose of Disbursement
SMS

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 21Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

5015.61

Transaction ID : SB17.4242

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SUTTON & SMART CAMPAIGNS, LLC

Mailing Address PO BOX 33421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
CONSULTING

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 21Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4110

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SWITCHBOARD PUBLIC BENEFIT CORP

Mailing Address 1752 P STREET NORTHWEST

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
SMS

003

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 21Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

683.60

Transaction ID : SB17.4173

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

8699.21

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. THE UPS STOREMailing Address 1936 SARANAC AVE
#3City
LAKE PLACIDState
NYZip Code
12946Purpose of Disbursement
PRINTING

006

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

161.54

Transaction ID : SB17.4271

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TRADE MEDIA PARTNERS LLCMailing Address 130 W PLEASANT AVENUE
#248City
MAYWOODState
NJZip Code
07607Purpose of Disbursement
PRINTING

006

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

538.93

Transaction ID : SB17.4201

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. USPS LAKE PLACID

Mailing Address 2591 MAIN ST

City
LAKE PLACIDState
NYZip Code
12946Purpose of Disbursement
PO BOX

001

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

210.00

Transaction ID : SB17.4272

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

910.47

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address 1 VERIZON WAY

City
BASKING RIDGEState
NJZip Code
07920

Purpose of Disbursement

001

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	31	/	2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

320.00

Transaction ID : SB17.4274

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VINCY'S PRINTING

Mailing Address 1832 CURRY ROAD

City
SCHNECTADYState
NYZip Code
12306Purpose of Disbursement
PRINTING

006

Candidate Name

THE COMMITTEE TO ELECT STUART AMORIELL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	25	/	2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

1077.92

Transaction ID : SB17.4167

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1397.92

TOTAL This Period (last page this line number only).....▶

88342.28

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

Full Name (Last, First, Middle Initial)

A. AMORIELL, STUART JAMESON, J, ,

Mailing Address 24 RASPBERRY WAY

City
LAKE PLACIDState
NYZip Code
12946Purpose of Disbursement
BANK RETURNED CONTRIBUTION

010

Candidate Name
THE COMMITTEE TO ELECT STUART AMORIELLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M / D D / Y Y Y Y
02 / 12 / 2026

FEC Identification Number

C C00928465

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB20A.4199

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

TOTAL This Period (last page this line number only).....▶

5000.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4105

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

7000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 15 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

7000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 34 OF 58

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4106

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

8000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 01 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

8000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4108

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

400.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 / 24 / 2026

M M / D D / Y Y Y Y

D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

400.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 36 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4109

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

40000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

40000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 17 / 2026

M M / D D / Y Y Y Y

D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

40000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 37 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5345

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

5015.61

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5015.61

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5015.61

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 38 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5347

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

66.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

66.60

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

66.60

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 39 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5348

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

8776.25

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8776.25

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

8776.25

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 40 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5349

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

4634.55

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4634.55

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

4634.55

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 41 OF 58

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5350

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

5941.43

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5941.43

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NONE

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5941.43

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 42 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5351

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

1047.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1047.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NONE

0.00

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1047.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 43 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5352

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

417.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

417.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

417.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 44 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5353

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

183.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

183.60

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

183.60

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 45 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5354

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

41.96

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

41.96

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

41.96

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 46 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5355

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

210.90

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

210.90

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NONE

0.00

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

210.90

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 47 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5356

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

2697.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2697.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 31 / 2026

M M / D D / Y Y Y Y

D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2697.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 48 OF 58

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5357

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

1400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1400.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 31 / 2026

M M / D D / Y Y Y Y

D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1400.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 49 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5358

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

4000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

4000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 50 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5359

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

320.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

320.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

320.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 51 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5360

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

205.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

205.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

205.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 52 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5361

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

926.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

926.70

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

926.70

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 53 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5362

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

340.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

340.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

340.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 54 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5363

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

309.65

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

309.65

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

309.65

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 55 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5364

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

1200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 31 / 2026

M M / D D / Y Y Y Y

NONE

0.00

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 56 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5365

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

161.54

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

161.54

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NONE

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

161.54

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 57 OF 58

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5366

THE COMMITTEE TO ELECT STUART AMORIELL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

AMORIELL, STUART JAMESON, J, ,

Mailing Address

24 RASPBERRY WAY

City

LAKE PLACID

State

NY

ZIP Code

12946

☒ Personal Funds of the Candidate

Original Amount of Loan

210.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

210.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NONE

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

210.00

TOTALS This Period (last page in this line only).....▶

93504.79

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 58 OF 58

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

THE COMMITTEE TO ELECT STUART AMORIELL

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bevilacqua, Emmett, , ,

Nature of Debt (Purpose):

Campaign Manager Salary

Mailing Address 218 Park Ave

City

Saranac Lake

State

NY

Zip Code

12983

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5341

Amount Incurred This Period

9000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MFStrategies, LLC

Nature of Debt (Purpose):

Consulting March

Mailing Address PO Box 439

City

Harrisburg

State

PA

Zip Code

17108

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4282

Amount Incurred This Period

4634.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

4634.55

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

13634.55

2) **TOTALS** This Period (last page this line number only)

13634.55

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

93504.79

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

107139.34