

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 SARA SOOY FOR CONGRESS

ADDRESS (number and street) 39 Division St PO Box 30 Somerville NJ 08876 CITY STATE ZIP CODE

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00928085 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT NJ 07

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2025 through M M / D D / Y Y Y Y 12 / 31 / 2025

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 DeAlessi, Jason, , Signature of Treasurer DeAlessi, Jason, , Date M M / D D / Y Y Y Y 01 / 31 / 2026

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

SARA SOOY FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	<input type="text" value="43709.00"/>	<input type="text" value="43709.00"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	<input type="text" value="43709.00"/>	<input type="text" value="43709.00"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="7638.53"/>	<input type="text" value="7638.53"/>
(b) Total Offsets to Operating Expenditures (from Line 14)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	<input type="text" value="7638.53"/>	<input type="text" value="7638.53"/>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<input type="text" value="36070.47"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1500.00"/>	

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

SARA SOOY FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	38550.00	38550.00
(ii) Unitemized	3659.00	3659.00
(iii) TOTAL of contributions from individuals	42209.00	42209.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	42209.00	42209.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	1500.00	1500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1500.00	1500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	43709.00	43709.00

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.....	7638.53	7638.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	7638.53	7638.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	43709.00
25. SUBTOTAL (add Line 23 and Line 24).....	43709.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7638.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	36070.47

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Desai, Mehul, , ,

Mailing Address 4 Black Ct

City Bridgewater State NJ Zip Code 08807

FEC ID number of contributing federal political committee. C

Name of Employer Bank Of New York Mellon Occupation It

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 26 / 2025

Transaction ID : 159b4f92a677

Amount of Each Receipt this Period
3500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Cappelli, Louis, , , Jr.

Mailing Address 525 Hopkins Rd

City Haddonfield State NJ Zip Code 08033

FEC ID number of contributing federal political committee. C

Name of Employer Florio Perrucci Steinhardt Cappelli & Occupation Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2025

Transaction ID : 1c9e0dd60a9e

Amount of Each Receipt this Period
3500.00

Memo Item

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

Mailing Address Savo Schalk 56 East Main Street Suite 301

City Somerville State NJ Zip Code 08876

FEC ID number of contributing federal political committee. C

Name of Employer Savo Schalk Corsini Occupation Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2025

Transaction ID : 224e4728d0d8

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

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

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

8000.00

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)		PAGE 6 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5610.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 25 / 2025

Transaction ID : 224e4728d0d8E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 18 Flintlick Ct

City Bernardsville	State NJ	Zip Code 07924
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FEC ID number of contributing federal political committee. **C**

Name of Employer Atlantic Health	Occupation Physician
-------------------------------------	-------------------------

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
11 / 26 / 2025

Transaction ID : 31c9e868eb26

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6054.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : 31c9e868eb26E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ahn, Dennis, , ,

Mailing Address 164 Sunset rd

City Belle Mead	State NJ	Zip Code 08502
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FEC ID number of contributing federal political committee. **C**

Name of Employer Kasia Market	Occupation Owner
----------------------------------	---------------------

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
 11 / 25 / 2025

Transaction ID : 345fb0f5909f

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6054.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2026

Transaction ID : 345fb0f5909fE

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 109 Emerald Valley Lane

City Basking Ridge	State NJ	Zip Code 07920
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Self Employed
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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
 11 / 26 / 2025

Transaction ID : 3531a17d9c60

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶	500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6054.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : 3531a17d9c60E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 8 wiltshire drive

City Boonton Township State NJ Zip Code 07005-8914

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

Name of Employer Occupation
Agp Solutions Founder

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
12 / 20 / 2025

Transaction ID : 3554d4cccf2c

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5610.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 25 / 2025

Transaction ID : 3554d4cccf2cE

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Albiez, Mark, , ,

Mailing Address 2 Carriage Way

City: Montclair State: NJ Zip Code: 07042

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

Name of Employer: Fairview Insurance Agency Associates Occupation: Insurance Producer

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 12 / 08 / 2025

Transaction ID : 413a6e6254d5

Amount of Each Receipt this Period: 1000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City: Somerville State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4680.00

Date of Receipt: 12 / 16 / 2025

Transaction ID : 413a6e6254d5E

Amount of Each Receipt this Period: 1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 16 Springfield Avenue

City: Merchantville State: NJ Zip Code: 08109

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

Name of Employer: Remington & Vernick Engineers Occupation: Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 12 / 12 / 2025

Transaction ID : 45cb102b6aa6

Amount of Each Receipt this Period: 1000.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶	2000.00
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: PAGE 10 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4680.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2025

Transaction ID : 45cb102b6aa6E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 99 Winkler Rd

City Sayreville State NJ Zip Code 08872

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

Name of Employer Occupation
Cme Associates Engineer

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2025

Transaction ID : 4a73d60d1904

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 5 Cold Hill Rd S suite 27

City Mendham State NJ Zip Code 07945

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

Name of Employer Occupation
Upnrx Pharmacist

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 25 / 2025

Transaction ID : 5ece342684dd

Amount of Each Receipt this Period
3500.00

Memo Item

* Earmarked Contribution: See Below

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

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

4500.00

**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)		PAGE 11 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6054.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : 5ece342684ddE

Amount of Each Receipt this Period
3500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 57 Upper Rainbow Trl

City Denville State NJ Zip Code 07834

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

Name of Employer Occupation
Saint Clare'S Health Nurse

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2025

Transaction ID : 609c331175ae

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Cappelli, Louis, , , Jr.

Mailing Address 525 Hopkins Rd

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Occupation
Florio Perrucci Steinhardt Cappelli & Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2025

Transaction ID : 71c923342da7

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Beder, Adam, , ,

Mailing Address 80 Wescott Rd

City Hillsborough	State NJ	Zip Code 08844
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FEC ID number of contributing federal political committee. **C**

Name of Employer Hackensack Meridian Health	Occupation Hospital Administration
--	---------------------------------------

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
12 / 08 / 2025

Transaction ID : 754319e699b2

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4680.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2025

Transaction ID : 754319e699b2E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 137 Overbrook Rd.

City Piscataway	State NJ	Zip Code 08854
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FEC ID number of contributing federal political committee. **C**

Name of Employer Somerset County Business Partnership	Occupation Executive
--	-------------------------

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
12 / 06 / 2025

Transaction ID : 79c2815fc147

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶	750.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
980.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 07 / 2025

Transaction ID : 79c2815fc147E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 6 Sutton Ct

City Hamburg State NJ Zip Code 07419

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

Name of Employer Occupation
Fragomen Del Rey Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2025

Transaction ID : 7d9a4fda11a3

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1060.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2025

Transaction ID : 7d9a4fda11a3E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	1000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Graham, Joseph, , ,

Mailing Address 919 Lindale Ave

City Delaware County	State PA	Zip Code 19026
-------------------------	-------------	-------------------

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

Name of Employer Foundation Risk Partners	Occupation Sales
--	---------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2025

Transaction ID : 8c232fdd0701

Amount of Each Receipt this Period
3500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5610.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 25 / 2025

Transaction ID : 8c232fdd0701E

Amount of Each Receipt this Period
3500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 2807 Biddle Ave

City Wyandotte	State MI	Zip Code 48192
-------------------	-------------	-------------------

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

Name of Employer University Of Chicago	Occupation Professor
---	-------------------------

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
12 / 24 / 2025

Transaction ID : 9fd0228648bb

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3750.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stag, Michael, , ,

Mailing Address 1407 1st St

City: New Orleans State: LA Zip Code: 70130

FEC ID number of contributing federal political committee: C

Name of Employer: Stag Liuzza Occupation: Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 30 / 2025

Transaction ID : a3510cbe0d8c

Amount of Each Receipt this Period: 1000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City: Somerville State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: C C00401224

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1475.00

Date of Receipt: 01 / 29 / 2026

Transaction ID : a3510cbe0d8cE

Amount of Each Receipt this Period: 1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 18 Flintlick Ct

City: Bernardsville State: NJ Zip Code: 07924

FEC ID number of contributing federal political committee: C

Name of Employer: Atlantic Health Occupation: Physician

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 550.00

Date of Receipt: 12 / 26 / 2025

Transaction ID : bce18f32c4ae

Amount of Each Receipt this Period: 50.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶	1050.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1060.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2025

Transaction ID : **bce18f32c4aeE**

Amount of Each Receipt this Period
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 46 Ironia Rd

City Mendham State NJ Zip Code 07945

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

Name of Employer Occupation
Clinton H2000 Llc Owner

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2025

Transaction ID : **bd75d4686ddc**

Amount of Each Receipt this Period
3500.00

Memo Item

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

Mailing Address 391 Claremont Rd

City Bernardsville State NJ Zip Code 07924

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

Name of Employer Occupation
Empire Holdings Lrp, Llc Owner

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2025

Transaction ID : **c496276a49a1**

Amount of Each Receipt this Period
3500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kalafer, Kori, , ,

Mailing Address 46 Ironia Rd

City Mendham	State NJ	Zip Code 07945
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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 ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2025

Transaction ID : d4761b9c9fe5

Amount of Each Receipt this Period
3500.00

Memo Item

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

Mailing Address 6 Carnegie Pl S. Fullerton Avenue.

City Basking Ridge	State NJ	Zip Code 07920
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FEC ID number of contributing federal political committee. **C**

Name of Employer Sophia Chadda Dds	Occupation Dentist
---------------------------------------	-----------------------

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
12 / 20 / 2025

Transaction ID : e2762ea06396

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5610.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 25 / 2025

Transaction ID : e2762ea06396E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	3750.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Shah, Faisal, , ,

Mailing Address 1857 N Gate Rd

City Scotch Plains	State NJ	Zip Code 07076-2942
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

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
 12 / 09 / 2025

Transaction ID : e8815095157b

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4680.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2025

Transaction ID : e8815095157bE

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address Savo Schalk 56 East Main Street
Suite 301

City Somerville	State NJ	Zip Code 08876
--------------------	-------------	-------------------

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

Name of Employer Savo Schalk Corsini	Occupation Attorney
---	------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2025

Transaction ID : ecf69fe64c2e

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶	1500.00
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: PAGE 19 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4680.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2025

Transaction ID : **ecf69fe64c2eE**

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 7 Beverly Park

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Occupation
Self Private Equity

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
12 / 09 / 2025

Transaction ID : **f0eb39d6f521**

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4680.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2025

Transaction ID : **f0eb39d6f521E**

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lejniaks, Carlos, , ,

Mailing Address 333 River Street

City Hoboken State NJ Zip Code 07030

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

Name of Employer Bbs Occupation Education

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
11 / 29 / 2025

Transaction ID : **f1c3862325f5**

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6054.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : **f1c3862325f5E**

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 427 Edgewood Place

City Rutherford State NJ Zip Code 07070

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

Name of Employer Millennium Strategies Occupation Consultant

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
12 / 30 / 2025

Transaction ID : **fb9e7bf9056**

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

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

500.00

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)	PAGE 21 OF 26
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : fbd9e7bf9056E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 63 Autumn Lane

City Skillman	State NJ	Zip Code 08558
------------------	-------------	-------------------

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

Name of Employer Integra Lifesciences	Occupation Finance Director
--	--------------------------------

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
12 / 15 / 2025

Transaction ID : fc69759aef5d

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 16 / 2025

Transaction ID : fc69759aef5dE

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	250.00
TOTAL This Period (last page this line number only)..... ▶	38550.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sooy, Sara, , ,

Mailing Address 15 Morgan Ct

City Bedminster State NJ Zip Code 07921

FEC ID number of contributing federal political committee. **C** H6NJ07284

Name of Employer County Of Somerset Occupation Politician

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 21 / 2025

Transaction ID : 1a08f972564e

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Raushi, Melissa, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2025	
Mailing Address 1 Deer Chase Rd			FEC Identification Number C	
City Morristown	State NJ	Zip Code 07960	Amount of Each Disbursement this Period 850.00	
Purpose of Disbursement Operating Support Services		Category/ Type	Transaction ID : 99e024be0eb6	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2025	
Mailing Address 366 Summer Street			FEC Identification Number C C00401224	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 41.88	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : 776c15b225fa	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ActBlue			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2025	
Mailing Address 366 Summer Street			FEC Identification Number C C00401224	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 239.20	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : 9ccb0cfc86a9	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1131.08
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 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)
SARA SOOY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Practical Political Data

Mailing Address 1197 Prescott Drive

City East Lansing State MI Zip Code 48823

Purpose of Disbursement
Voter Data

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District: Voter Data

Category/Type

Date of Disbursement
M M / D D / Y Y Y Y
12 / 30 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
6000.00

Transaction ID : 0a67ab83511d

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District: Voter Data

Category/Type

Date of Disbursement
M M / D D / Y Y Y Y
12 / 30 / 2025

FEC Identification Number
C C00401224

Amount of Each Disbursement this Period
58.27

Transaction ID : 16a994b8302e

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District: Voter Data

Category/Type

Date of Disbursement
M M / D D / Y Y Y Y
12 / 14 / 2025

FEC Identification Number
C C00401224

Amount of Each Disbursement this Period
188.84

Transaction ID : ba92dd424c8f

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	6247.11
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
SARA SOOY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2025		
Mailing Address 366 Summer Street			FEC Identification Number C C00401224		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 221.61		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : 600f1c4d31ee		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	221.61
TOTAL This Period (last page this line number only).....▶	7599.80

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SARA SOOY FOR CONGRESS** Transaction ID : **b6e4bf4a0009**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Sooy, Sara, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
15 Morgan Ct			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Bedminster	NJ	07921	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	11 / 17 / 2025	None	0.00	

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).....▶	1500.00
TOTALS This Period (last page in this line only).....▶	1500.00

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