

Board of Elections

SUMMARY OF CAMPAIGN ACTIVITY

Name of Candidate, Political Party, Political Action Committee V SUSAN SOSNOWSKI			Key# 3951
Street Address 680 GLEN ROCK ROAD		City/Town, State and Zip Code WEST KINGSTON, RI 02892	
Mailing Address (if different) PO BOX 722		City/Town, State and Zip Code WEST KINGSTON, RI 02892	
Telephone Number (401) 783-7704	Daytime Telephone Number (401) 783-7704	Fax Number	E-mail vssosnowski@gmail.com
If Candidate Office Sought: State Senator		Party Affiliation if any: Democratic	
Reporting Period (Dates):		Period Beginning: 07/01/2026	Period Ending: 10/05/2026
SUMMARY OF ACTIVITY FOR PERIOD			
1. Beginning Cash Balance	\$ 63,996.88	4. Cash Disbursements, continued	
2. Cash Receipts		f. Other Disbursements	0
a. Contributions From:			0
1. Aggregate	100.00		0
a. (Individuals)	100.00		0
b. (Political Parties)	0	5. Ending Cash Balance	\$ 64,337.40
c. (Political Action Committees)	0		
2. Individuals	0	CAMPAIGN FUND STATUS	
3. Political Parties	0	6. Report of In-Kind Contributions	0
4. Political Action Committees	500.00		
5. Loan Proceeds	0	7. Cash	\$ 64,337.40
6. Payroll Check off	0	8. Other Assets	0
7. Interest Received	4.52		0
8. State Check Off	0	9. Total Assets	\$ 64,337.40
9. Refund/Rebate	0		
10. Party Building	0	LIABILITIES AND FUND BALANCE	
11. Matching Public Funds	0	10. Liabilities	
12. Other	0	a. Accounts Payable	\$ 0
13. Returned Contributions	0	b. Loans Payable	0
14. Returned Checks	0	c. Other Liabilites	0
b. Other:	0		0
	0		0
	0		0
3. Total Cash	64,601.40	11. Total Liabilities	0
4. Cash Disbursements		12. Total Fund Balance	\$ 64,337.40
a. Aggregate Expenses	264.00	13. Total Liability / Fund Balance	64,337.40
b. Campaign Expenses	0		
c. Repayment of Loans	0		
d. Account Payable Repayments	0		
e. Other	0		

Name of Person Filing Report

I HEREBY CERTIFY THAT THIS REPORT OF CAMPAIGN
CONTRIBUTIONS AND EXPENDITURES AND THE SUPPORTING
DOCUMENTS ARE TRUE AND CORRECT.

Title of Person Filing Report

X _____
Signature of Person Date

Address of Person Filing This Report

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____

Day of _____ 20 _____

X _____
Notary Public

SCHEDULE OF CONTRIBUTIONS RECEIVED

Key #	Full Name of Candidate or Committee	Reporting Period
3,951	V SUSAN SOSNOWSKI	From: 07/01/2026 To: 10/05/2026

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Aggregate - Individual	09/16/2026	09/16/2026	100.00

In Kind/Other Receipts Description

Campaign contribution.

Contributor Information					Employer Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name
Street Address					Street Address
City			State	Zip	City State Zip

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	07/31/2026	07/31/2026	2.26

In Kind/Other Receipts Description

Bank interest.

Contributor Information					Employer Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name
			WASHINGTON TRUST COMPANY		
Street Address					Street Address
City			State	Zip	City State Zip

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Other	Interest Received	08/31/2026	08/31/2026	2.26

In Kind/Other Receipts Description

Bank interest.

Contributor Information					Employer Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name
			WASHINGTON TRUST COMPANY		
Street Address					Street Address
City			State	Zip	City State Zip

Item	Transaction Type	Contribution Type	Receipt Date	Deposit Date	Contribution Amount
	Check	PAC	09/16/2026	09/16/2026	500.00

In Kind/Other Receipts Description

Campaign contribution.

Contributor Information					Employer Data
Prefix	First Name	MI	Last Name or PAC/Party Committee Name	Suffix	Employer Name
			RHODE ISLAND ENERGY PAC (RIE PAC)		
Street Address					Street Address
City			State	Zip	City State Zip
			RI	02907	

SCHEDULE OF EXPENDITURES

Key #	Full Name of Candidate or Committee	Reporting Period		
3,951	V SUSAN SOSNOWSKI	From:	07/01/2026	To: 10/05/2026

Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	07/27/2026		Aggregate Expenditure	Office Equipment & Supplies	\$164.00

Purpose of Expenditure

Postage stamps.

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
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Street Address	City	State	Zip
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Check #	Expenditure Date	Payment Date	Disbursement Type	Expenditure Type	Expenditure Amount
	08/10/2026		Aggregate Expenditure	Donations (All Others)	\$100.00

Purpose of Expenditure

Donation to South Kingstown Veteran Firefighters Association.

Payee Information

Prefix	First Name	MI	LastName or Vendor Name	Suffix
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Street Address	City	State	Zip
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