

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Tri-State Maxed-Out Women

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="38938.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="38938.65"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="30001.35"/>	<input type="text" value="30001.35"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="68940.00"/>	<input type="text" value="68940.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1403.17"/>	<input type="text" value="1403.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="67536.83"/>	<input type="text" value="67536.83"/>
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="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: 01 / 01 / 2016 To: 01 / 31 / 2016

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30000.00	30000.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	30000.00	30000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶	30000.00	30000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1.35	1.35
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	30001.35	30001.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	30001.35	30001.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1403.17	1403.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1403.17	1403.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1403.17	1403.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1403.17	1403.17

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	30000.00	30000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30000.00	30000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1403.17	1403.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1403.17	1403.17

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Tri-State Maxed-Out Women

A. Karen Adler
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 Park Ave
 Apt 8C
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2016
Transaction ID : SA11AI.5617
 Amount of Each Receipt this Period
1000.00
 Contribution

B. Madeline Blinder
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 Cherry Hill Road
 City Princeton State NJ Zip Code 08540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer No Employer Occupation No Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2016
Transaction ID : SA11AI.5613
 Amount of Each Receipt this Period
5000.00
 Contribution

C. Polly 'Polly' Cleveland
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 W 72nd Street, Apt. 506
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Columbia University Occupation Adjunct Prof Economics
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 21 / 2016
Transaction ID : SA11AI.5574
 Amount of Each Receipt this Period
1000.00
 Contribution

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

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

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

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NAME OF COMMITTEE (In Full)
Tri-State Maxed-Out Women

A. Betsy Cohn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 Park Avenue
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2016
Transaction ID : SA11AI.5626
 Amount of Each Receipt this Period
5000.00
 Contribution

B. Celia Felsher
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 Eagle Knolls Rd
 City Larchmont State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Reservoir Capital Group, L.L.C Occupation Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016
Transaction ID : SA11AI.5618
 Amount of Each Receipt this Period
1000.00
 Contribution

C. Judith Gibbons
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2247
 City Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2016
Transaction ID : SA11AI.5576
 Amount of Each Receipt this Period
5000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Tri-State Maxed-Out Women

A. Jane Harmon
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 Kettle Creek Road
 City Weston State CT Zip Code 06883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jane Harmon Associates Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 01 / 29 / 2016
Transaction ID : SA11AI.5616
 Amount of Each Receipt this Period
 1000.00
 Contribution

B. Fern Hurst
 Full Name (Last, First, Middle Initial)
 Mailing Address 1060 5th Ave
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 01 / 11 / 2016
Transaction ID : SA11AI.5533
 Amount of Each Receipt this Period
 2500.00
 Contribution

C. Sarah Kagan
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Brewster Road
 City Scarsdale State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer No Employer Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 01 / 29 / 2016
Transaction ID : SA11AI.5612
 Amount of Each Receipt this Period
 2500.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Tri-State Maxed-Out Women

A. Jill Lafer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1060 Fifth Avenue
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 29 / 2016**
Transaction ID : SA11AI.5619
 Amount of Each Receipt this Period **1000.00**
 Contribution

B. Wendy MacKenzie
 Full Name (Last, First, Middle Initial)
 Mailing Address 829 Park Ave
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Public Affairs Consulting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 14 / 2016**
Transaction ID : SA11AI.5534
 Amount of Each Receipt this Period **1000.00**
 Contribution

C. Patricia Martone
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 Central Park West
 City New York State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Law Office of Patricia Martone Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 29 / 2016**
Transaction ID : SA11AI.5610
 Amount of Each Receipt this Period **1000.00**
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 11
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Tri-State Maxed-Out Women

A. Marcia Riklis
Full Name (Last, First, Middle Initial)

Mailing Address 700 Meadow Ln

City Southampton State NY Zip Code 11968

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

Name of Employer Self-Employed Occupation Private Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 29 / 2016
Transaction ID : SA11AI.5620

Amount of Each Receipt this Period 1000.00

Contribution

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

Mailing Address 320 Central Park West Apt 3C

City New York State NY Zip Code 10025

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 29 / 2016
Transaction ID : SA11AI.5614

Amount of Each Receipt this Period 1000.00

Contribution

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

Mailing Address 10 East 70th St Apt 5C

City New York State NY Zip Code 10021

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 29 / 2016
Transaction ID : SA11AI.5608

Amount of Each Receipt this Period 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	30000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Marcia D. Sudolsky

Mailing Address 131 East 93rd Street Apt 10D

City New York State NY Zip Code 10128

Purpose of Disbursement
PAC Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 07 / 2016

Transaction ID : SB21B.5630

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Marcia D. Sudolsky

Mailing Address 131 East 93rd Street Apt 10D

City New York State NY Zip Code 10128

Purpose of Disbursement
PAC Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 20 / 2016

Transaction ID : SB21B.5628

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

1250.00

1250.00