

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. **12FE4M5**
Tri-State Maxed-Out Women

ADDRESS (number and street) **910 17th St NW Ste 925**
 Check if different than previously reported. (ACC) **Washington DC 20006**

2. **FEC IDENTIFICATION NUMBER** **C00488387** **CITY** **STATE** **ZIP CODE**
3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day **POST-Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2022 through / / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Dickstein Sudolsky, Marcia, , ,
Type or Print Name of Treasurer

Signature of Treasurer Dickstein Sudolsky, Marcia, , , [Electronically Filed] Date / / 2022

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 3X (Rev. 05/2016)

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="2022"/>		60927.14
(b) Cash on Hand at Beginning of Reporting Period.....	138190.53	
(c) Total Receipts (from Line 19)	50250.22	350676.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	188440.75	411603.66
7. Total Disbursements (from Line 31).....	18475.57	241638.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	169965.18	169965.18
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)	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. 05/2016)

Page 3

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2022 To: M M / D D / Y Y Y Y Y Y
07 / 31 / 2022

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).....	15200.00	283269.14
(ii) Unitemized	50.00	592.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15250.00	283861.64
(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)	15250.00	283861.64
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	333.30
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	35000.22	66481.58
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)).....▶	50250.22	350676.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	50250.22	350676.52

DETAILED SUMMARY PAGE
of Disbursements

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	6560.00	66974.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6560.00	66974.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	129008.32
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	6415.57	45656.03
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	18475.57	241638.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18475.57	241638.48

DETAILED SUMMARY PAGE
of Disbursements

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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)	15250.00	283861.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15250.00	283861.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6560.00	66974.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	333.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6560.00	66640.83

**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 22
	<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	

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. Billman, Roberta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 E 77Th St
 City New York State NY Zip Code 10075-2257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rogosin Institute Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 21 / 2022
Transaction ID : 4185939
 Amount of Each Receipt this Period 1100.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10250.00

Date of Receipt 07 / 25 / 2022
Transaction ID : 4185939E
 Amount of Each Receipt this Period 1100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Black, Lori, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7221 Francisco Bend Dr
 City Delray Beach State FL Zip Code 33446-5613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Street Software Technology Occupation (for Individual) President Of Data Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 27 / 2022
Transaction ID : 4185941
 Amount of Each Receipt this Period 1100.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	2200.00
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 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. ACTBLUE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2022

Transaction ID : 4185941E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Daniels, Dale, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 Huntley Rd

City Holmdel	State NJ	Zip Code 07733-1843
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2022

Transaction ID : 4185598

Amount of Each Receipt this Period
1100.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2022

Transaction ID : 4185598E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 22
	<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. Dean, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 Central Park W
 Apt 5H
 City New York State NY Zip Code 10023-7207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 14 / 2022
Transaction ID : 4185938
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10250.00

Date of Receipt 07 / 18 / 2022
Transaction ID : 4185938E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Mallement, Carole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 E 69Th St
 City New York State NY Zip Code 10021-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 07 / 05 / 2022
Transaction ID : 4185582
 Amount of Each Receipt this Period 1200.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	1700.00
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 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. ACTBLUE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2022

Transaction ID : 4185582E

Amount of Each Receipt this Period
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Mallement, Carole, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 E 69Th St

City New York	State NY	Zip Code 10021-4918
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2022

Transaction ID : 4185583

Amount of Each Receipt this Period
3000.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2022

Transaction ID : 4185583E

Amount of Each Receipt this Period
3000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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: (check only one)	PAGE 10 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Pao, Victoria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 Church St
 Unit 4003
 City Nashville State TN Zip Code 37219-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 04 / 2022
Transaction ID : 4185581
 Amount of Each Receipt this Period 1100.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10250.00

Date of Receipt 07 / 11 / 2022
Transaction ID : 4185581E
 Amount of Each Receipt this Period 1100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Ring, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 5Th Ave
 City New York State NY Zip Code 10028-0110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WCS Occupation (for Individual) Director, Corporate Relationships
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 05 / 2022
Transaction ID : 4185944
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6100.00
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 11 OF 22
(check only one)

<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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

A. Rothman, Joan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Mamaroneck Rd

City Scarsdale	State NY	Zip Code 10583-2811
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2022

Transaction ID : 4185940

Amount of Each Receipt this Period
1100.00

Memo Item

* Earmarked Contribution: See Below

B. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10250.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2022

Transaction ID : 4185940E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	15200.00

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 12 OF 22
<input 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 checked="" type="checkbox"/> 17

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

A. Bennett, Georgette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 E 43Rd St
 City New York State NY Zip Code 10017-4609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **07 / 01 / 2022**
Transaction ID : 4185943
 Amount of Each Receipt this Period 10000.00
 Memo Item
 Non Contribution Account

B. Ring, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 5Th Ave
 City New York State NY Zip Code 10028-0110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WCS Occupation (for Individual) Director, Corporate Relationships
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **07 / 05 / 2022**
Transaction ID : 4185945
 Amount of Each Receipt this Period 25000.00
 Memo Item
 Non Contribution Account

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	35000.00
TOTAL This Period (last page this line number only).....▶	35000.00

**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"/> 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. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 05 / 2022

FEC Identification Number

C C00401224

Transaction ID : 500121245

Amount of Each Disbursement this Period

1.98

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 11 / 2022

FEC Identification Number

C C00401224

Transaction ID : 500123248

Amount of Each Disbursement this Period

252.80

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 18 / 2022

FEC Identification Number

C C00401224

Transaction ID : 500123249

Amount of Each Disbursement this Period

19.75

Memo Item

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

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

274.53

**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"/> 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. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 25 / 2022
Mailing Address PO Box 441146		FEC Identification Number C 000401224 Transaction ID : 500123253
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement PAC Credit Card Processing Fee		Amount of Each Disbursement this Period 43.45
Candidate Name		<input type="checkbox"/> Memo Item
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) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 31 / 2022
Mailing Address PO Box 441146		FEC Identification Number C 000401224 Transaction ID : 500123250
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement PAC Credit Card Processing Fee		Amount of Each Disbursement this Period 86.90
Candidate Name		<input type="checkbox"/> Memo Item
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. Bread N Wine NY		Date of Disbursement MM / DD / YYYY 07 / 29 / 2022
Mailing Address 1417 Lexington Ave		FEC Identification Number C Transaction ID : 500123254
City New York	State NY	Zip Code 10128-1613
Purpose of Disbursement PAC Meeting Food and Beverage		Amount of Each Disbursement this Period 44.42
Candidate Name		<input type="checkbox"/> Memo Item
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).....▶	174.77
TOTAL This Period (last page this line number only).....▶	

**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"/> 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

A. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2022

FEC Identification Number: C

Transaction ID : 500123255

Amount of Each Disbursement this Period: 15.00

Memo Item

B. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2022

FEC Identification Number: C

Transaction ID : 500123256

Amount of Each Disbursement this Period: 15.00

Memo Item

C. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2022

FEC Identification Number: C

Transaction ID : 500123257

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45.00

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

**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"/> 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. Chase Bank

Mailing Address 270 Park Ave

City
New York

State
NY

Zip Code
10017-2014

Purpose of Disbursement
PAC Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	2		

FEC Identification Number

C []

Transaction ID : 500123258

Amount of Each Disbursement this Period

[] 15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Bank

Mailing Address 270 Park Ave

City
New York

State
NY

Zip Code
10017-2014

Purpose of Disbursement
PAC Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	2	2		

FEC Identification Number

C []

Transaction ID : 500123259

Amount of Each Disbursement this Period

[] 15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Cook Political Report

Mailing Address 600 New Hampshire Ave NW

City
Washington

State
DC

Zip Code
20037-2403

Purpose of Disbursement
PAC Subscription

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	2	2		

FEC Identification Number

C []

Transaction ID : 500123260

Amount of Each Disbursement this Period

[] 35.00

Memo Item

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

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

[] 65.00

[]

**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"/> 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. Curb Mobility LLC		Date of Disbursement MM / DD / YYYY 07 / 05 / 2022
Mailing Address 1111 34Th Ave		FEC Identification Number C [] Transaction ID : 500123261 Amount of Each Disbursement this Period [] 50.64
City Long Island City	State NY	Zip Code 11106-4923
Purpose of Disbursement PAC Travel Expense		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Curb Mobility LLC		Date of Disbursement MM / DD / YYYY 07 / 25 / 2022
Mailing Address 1111 34Th Ave		FEC Identification Number C [] Transaction ID : 500123262 Amount of Each Disbursement this Period [] 19.50
City Long Island City	State NY	Zip Code 11106-4923
Purpose of Disbursement PAC Travel Expense		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Dickstein Sudolsky, Marcia, , ,		Date of Disbursement MM / DD / YYYY 07 / 01 / 2022
Mailing Address 445 Park Ave FI 9		FEC Identification Number C [] Transaction ID : 500123265 Amount of Each Disbursement this Period [] 5208.50
City New York	State NY	Zip Code 10022-8606
Purpose of Disbursement PAC Administrative Services		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 5278.64
TOTAL This Period (last page this line number only).....▶	[]

**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"/> 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. Dickstein Sudolsky, Marcia, , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
PAC Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500123267

Amount of Each Disbursement this Period

[REDACTED] 75.46

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 455 Market St

City
San Francisco

State
CA

Zip Code
94105-2420

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500123278

Amount of Each Disbursement this Period

[REDACTED] 75.46

Memo Item

Full Name (Last, First, Middle Initial)

C. NYC Taxi

Mailing Address 33 Beaver St

City
New York

State
NY

Zip Code
10004-2736

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	2	2		

FEC Identification Number

C [REDACTED]

Transaction ID : 500123270

Amount of Each Disbursement this Period

[REDACTED] 14.10

Memo Item

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

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

[REDACTED] 89.56

[REDACTED]

**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"/> 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

A. Political Compliance Management Services, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 910 17Th St NW Ste 925

City Washington State DC Zip Code 20006-2641

Purpose of Disbursement PAC Accounting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 14 / 2022

FEC Identification Number C

Transaction ID : 500123272

Amount of Each Disbursement this Period 420.61

Memo Item

B.

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	420.61
TOTAL This Period (last page this line number only).....▶	6348.11

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Maggie Hassan Victory Fund

Mailing Address PO Box 298

City Concord State NH Zip Code 03302-0298

Purpose of Disbursement
Contribution

Candidate Name
Maggie Hassan Victory Fund

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 18 / 2022

FEC Identification Number

C C00762963

Transaction ID : 500123269
Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCHOLTEN FOR CONGRESS

Mailing Address PO Box 6233

City Grand Rapids State MI Zip Code 49516-6233

Purpose of Disbursement
PAC Political contribution

Candidate Name
SCHOLTEN, HILLARY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify)
State: MI District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2022

FEC Identification Number

C C00711317

Transaction ID : 500123273
Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCHOLTEN FOR CONGRESS

Mailing Address PO Box 6233

City Grand Rapids State MI Zip Code 49516-6233

Purpose of Disbursement
PAC Political contribution

Candidate Name
SCHOLTEN, HILLARY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2022

FEC Identification Number

C C00711317

Transaction ID : 500123274
Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

5500.00

5500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. Amalgamated Bank

Mailing Address 1825 K St NW

City
Washington

State
DC

Zip Code
20006-1202

Purpose of Disbursement
Non Contribution Account PAC Bank Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 26 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : 500123251

Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Certain Impact, LLC

Mailing Address PO Box 1460

City
New York

State
NY

Zip Code
10021-0042

Purpose of Disbursement
Non Contribution Account PAC Printing

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : 500094541

Amount of Each Disbursement this Period

[REDACTED] 661.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Dickstein Sudolsky, Marcia, , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
Non Contribution Account PAC Administration Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : 500123264

Amount of Each Disbursement this Period

[REDACTED] 5208.50

Memo Item

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

[REDACTED] 5919.50

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

[REDACTED]

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

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

A. Dickstein Sudolsky, Marcia, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement Non Contribution Account PAC Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 07 / 01 / 2022

FEC Identification Number C

Transaction ID : 500123266

Amount of Each Disbursement this Period 75.45

Memo Item

B. Political Compliance Management Services, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 910 17Th St NW Ste 925

City Washington State DC Zip Code 20006-2641

Purpose of Disbursement Non Contribution Account PAC Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 07 / 14 / 2022

FEC Identification Number C

Transaction ID : 500123271

Amount of Each Disbursement this Period 420.62

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	496.07
TOTAL This Period (last page this line number only).....▶	6415.57