

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 / / through / /

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 / /

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)

Page 2

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.....	158903.28	
(c) Total Receipts (from Line 19)	21100.24	256866.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	180003.52	317793.21
7. Total Disbursements (from Line 31).....	31128.34	168918.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	148875.18	148875.18
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

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: 05 / 01 / 2022 To: 05 / 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).....	18600.00	232969.14
(ii) Unitemized	0.00	312.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18600.00	233281.64
(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)	18600.00	233281.64
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	83.30
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2500.24	23501.13
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)).....▶	21100.24	256866.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21100.24	256866.07

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	8688.50	45886.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8688.50	45886.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15258.32	90258.32
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).....	7181.52	32773.64
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)) ..	31128.34	168918.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31128.34	168918.03

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	18600.00	233281.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18600.00	233281.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8688.50	45886.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	83.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8688.50	45802.77

**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 33
	<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	

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. Altman, Marlene, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 522 W End Ave
 City New York State NY Zip Code 10024-3228
 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 05 / 11 / 2022
Transaction ID : 4102152
 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 ▼ 20900.00

Date of Receipt 05 / 16 / 2022
Transaction ID : 4102152E
 Amount of Each Receipt this Period 1100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Breslow, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 3Rd Ave
 City New York State NY Zip Code 10022-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Schulte Roth & Zabel Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 09 / 2022
Transaction ID : 4102154
 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 33
	<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 ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2022

Transaction ID : 4102154E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Cameron, Margaret, , ,

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

Mailing Address 5 Martin Butler Ct

City Rye	State NY	Zip Code 10580-3146
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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
05		06		2022

Transaction ID : 4102148

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 ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2022

Transaction ID : 4102148E

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:	PAGE 8 OF 33
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Dickstein Sudolsky, Marcia, , ,

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

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

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

Name of Employer (for Individual) Self Employed Occupation (for Individual) Fundraiser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1568.14

Date of Receipt 05 / 02 / 2022

Transaction ID : 4102143

Amount of Each Receipt this Period 200.00

Memo Item

B. Friedman, Fredrica, , ,

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

Mailing Address 857 5Th Ave
FI 55

City New York State NY Zip Code 10065-5857

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 05 / 27 / 2022

Transaction ID : 4102158

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

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 ▼ 20900.00

Date of Receipt 05 / 31 / 2022

Transaction ID : 4102158E

Amount of Each Receipt this Period 1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 33
	<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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NAME OF COMMITTEE (In Full)
Tri-State Maxed-Out Women

A. Gilbert, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 Pike St
Unit 814

City Cincinnati State OH Zip Code 45202-4236

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

Name of Employer (for Individual) NuVoodoo Media Services Occupation (for Individual) Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 10 / 2022
Transaction ID : 4102153

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 ▼ 20900.00

Date of Receipt 05 / 16 / 2022
Transaction ID : 4102153E

Amount of Each Receipt this Period 1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 6899 Collins Ave

City Miami Beach State FL Zip Code 33141-7400

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

Name of Employer (for Individual) Sunny & Abe Rosenberg Foundation Occupation (for Individual) Philanthropist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 30 / 2022
Transaction ID : 4102181

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 10 OF 33
	<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. 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 ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2022

Transaction ID : 4102181E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Graybill, Laura, , ,

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

Mailing Address 220 E 65Th St

City New York	State NY	Zip Code 10065-6620
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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
05		03		2022

Transaction ID : 4102150

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 ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2022

Transaction ID : 4102150E

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 11 OF 33
	<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. Motland, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Dolphin Cove Quay
 City Stamford State CT Zip Code 06902-7718
 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 ▼ 1500.00

Date of Receipt 05 / 18 / 2022
Transaction ID : 4102157
 Amount of Each Receipt this Period 1500.00
 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 ▼ 20900.00

Date of Receipt 05 / 23 / 2022
Transaction ID : 4102157E
 Amount of Each Receipt this Period 1500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Rebell, Susan, Cohen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1965 Broadway Apt 24
 City New York State NY Zip Code 10023-5928
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 20 / 2022
Transaction ID : 4102155
 Amount of Each Receipt this Period 1100.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	2600.00
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 12 OF 33
	<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. 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 ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2022

Transaction ID : 4102155E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Rubinfeld, Louise, , ,

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

Mailing Address 2538 NW 52Nd St

City Boca Raton	State FL	Zip Code 33496-2202
--------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2022

Transaction ID : 4102147

Amount of Each Receipt this Period
600.00

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
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2022

Transaction ID : 4102147E

Amount of Each Receipt this Period
600.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	600.00
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 13 OF 33
<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. Sarnoff, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Lexington Ave
 City New York State NY Zip Code 10065-5924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Drug Policy Alliance Occupation (for Individual) Non Profit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 26 / 2022
Transaction ID : 4102159
 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 ▼ 20900.00

Date of Receipt 05 / 31 / 2022
Transaction ID : 4102159E
 Amount of Each Receipt this Period 1100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Schleifer, Harriet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 Carolyn Pl
 City Chappaqua State NY Zip Code 10514-2916
 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 ▼ 3000.00

Date of Receipt 05 / 13 / 2022
Transaction ID : 4102151
 Amount of Each Receipt this Period 3000.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	4100.00
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 14 OF 33
	<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. 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 ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2022

Transaction ID : 4102151E

Amount of Each Receipt this Period
3000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Shapiro, Geri, , ,

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

Mailing Address 220 E 65Th St

City New York	State NY	Zip Code 10065-6620
------------------	-------------	------------------------

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

Name of Employer (for Individual) Senator Kirsten Giliibrand	Occupation (for Individual) Consultant Sr Advisor
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2022

Transaction ID : 4102149

Amount of Each Receipt this Period
1200.00

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
-------------------------	-------------	------------------------

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 ▼
20900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2022

Transaction ID : 4102149E

Amount of Each Receipt this Period
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1200.00
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 15 OF 33
	<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. Stein, Marion, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Douglass St
 City Brooklyn State NY Zip Code 11231-4714
 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 05 / 19 / 2022
Transaction ID : 4102156
 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 ▼ 20900.00

Date of Receipt 05 / 23 / 2022
Transaction ID : 4102156E
 Amount of Each Receipt this Period 1100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Suzman, Leesa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Horseguard Ln
 City Scarsdale State NY Zip Code 10583-2311
 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 05 / 24 / 2022
Transaction ID : 4102160
 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: PAGE 16 OF 33
(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"/> 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
-------------------------	-------------	------------------------

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 ▼
20900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		31		2022

Transaction ID : 4102160E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B.

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

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

Amount of Each Receipt this Period

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	18600.00

**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 17 OF 33
<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. Adelson, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 N Moore St
 City New York State NY Zip Code 10013-2460
 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 ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2022
Transaction ID : 4102146
 Amount of Each Receipt this Period 2500.00
 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 ▼ 20900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2022
Transaction ID : 4102146E
 Amount of Each Receipt this Period 2500.00
 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
 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
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

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

**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

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

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) ▼

Date of Disbursement: 05 / 02 / 2022

FEC Identification Number: C00401224
Transaction ID : 500119664
Amount of Each Disbursement this Period: 23.70

Memo Item

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

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) ▼

Date of Disbursement: 05 / 09 / 2022

FEC Identification Number: C00401224
Transaction ID : 500119665
Amount of Each Disbursement this Period: 134.30

Memo Item

C. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

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) ▼

Date of Disbursement: 05 / 16 / 2022

FEC Identification Number: C00401224
Transaction ID : 500119666
Amount of Each Disbursement this Period: 248.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 406.85

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. 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
0	5		2	3		2	0	2	2

FEC Identification Number

C C00401224

Transaction ID : 500119667

Amount of Each Disbursement this Period

146.15

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
0	5		3	0		2	0	2	2

FEC Identification Number

C C00401224

Transaction ID : 500119668

Amount of Each Disbursement this Period

130.35

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
0	5		3	1		2	0	2	2

FEC Identification Number

C C00401224

Transaction ID : 500119669

Amount of Each Disbursement this Period

43.45

Memo Item

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

319.95

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. Bread N Wine NY

Mailing Address 1417 Lexington Ave

City
New York

State
NY

Zip Code
10128-1613

Purpose of Disbursement
PAC Meeting Food and Beverage

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500119675

Amount of Each Disbursement this Period

[] 42.05

Memo Item

Full Name (Last, First, Middle Initial)

B. Bread N Wine NY

Mailing Address 1417 Lexington Ave

City
New York

State
NY

Zip Code
10128-1613

Purpose of Disbursement
PAC Meeting Food and Beverage

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500119676

Amount of Each Disbursement this Period

[] 20.30

Memo Item

Full Name (Last, First, Middle Initial)

C. Bread N Wine NY

Mailing Address 1417 Lexington Ave

City
New York

State
NY

Zip Code
10128-1613

Purpose of Disbursement
PAC Meeting Food and Beverage

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500119677

Amount of Each Disbursement this Period

[] 89.37

Memo Item

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

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

[] 151.72

[]

**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: 05 / 02 / 2022

FEC Identification Number: C

Transaction ID : 500119659

Amount of Each Disbursement this Period: 30.00

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: 05 / 09 / 2022

FEC Identification Number: C

Transaction ID : 500119660

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: 05 / 16 / 2022

FEC Identification Number: C

Transaction ID : 500119661

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

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

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: 05 / 23 / 2022

FEC Identification Number: C

Transaction ID : 500119662

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: 05 / 31 / 2022

FEC Identification Number: C

Transaction ID : 500119663

Amount of Each Disbursement this Period: 15.00

Memo Item

C. Curb Mobility LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

Purpose of Disbursement PAC Travel Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2022

FEC Identification Number: C

Transaction ID : 500119682

Amount of Each Disbursement this Period: 28.56

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 58.56

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. Curb Mobility LLC

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

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

MM / DD / YYYY
05 / 09 / 2022

FEC Identification Number

C

Transaction ID : 500119683

Amount of Each Disbursement this Period

28.88

Memo Item

Full Name (Last, First, Middle Initial)

B. Curb Mobility LLC

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

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

MM / DD / YYYY
05 / 16 / 2022

FEC Identification Number

C

Transaction ID : 500119684

Amount of Each Disbursement this Period

17.88

Memo Item

Full Name (Last, First, Middle Initial)

C. Curb Mobility LLC

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

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

MM / DD / YYYY
05 / 17 / 2022

FEC Identification Number

C

Transaction ID : 500119685

Amount of Each Disbursement this Period

14.75

Memo Item

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

61.51

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. Curb Mobility LLC

Mailing Address 1111 34Th Ave

City
Long Island City

State
NY

Zip Code
11106-4923

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	2

FEC Identification Number

C []

Transaction ID : 500119687

Amount of Each Disbursement this Period

[] 60.92

Memo Item

Full Name (Last, First, Middle Initial)

B. Curb Mobility LLC

Mailing Address 1111 34Th Ave

City
Long Island City

State
NY

Zip Code
11106-4923

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500119686

Amount of Each Disbursement this Period

[] 11.76

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
PAC Administrative Services

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500119700

Amount of Each Disbursement this Period

[] 5208.50

Memo Item

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

[] 5281.18

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

MM / DD / YYYY
05 / 24 / 2022

FEC Identification Number

C []

Transaction ID : 500119701

Amount of Each Disbursement this Period

[] 777.32

Memo Item

Full Name (Last, First, Middle Initial)

B. Spectrum Cable

Mailing Address 43 W 23Rd St

City New York State NY Zip Code 10010-4203

Purpose of Disbursement
PAC Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2022

FEC Identification Number

C []

Transaction ID : 500119702

Amount of Each Disbursement this Period

[] 522.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address 140 West St

City New York State NY Zip Code 10007-2141

Purpose of Disbursement
PAC Phones

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2022

FEC Identification Number

C []

Transaction ID : 500119703

Amount of Each Disbursement this Period

[] 255.32

Memo Item

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

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

[] 777.32

[]

**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. Stanton, James, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 235 E 22Nd St # 15HI

City New York State NY Zip Code 10010-4616

Purpose of Disbursement PAC Graphic Design

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 24 / 2022

FEC Identification Number C

Transaction ID : 500119694

Amount of Each Disbursement this Period 125.00

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 23 / 2022

FEC Identification Number C

Transaction ID : 500119717

Amount of Each Disbursement this Period 98.16

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).....▶	223.16
TOTAL This Period (last page this line number only).....▶	8292.21

**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. CHRISSY HOULAHAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 17 / 2022
Mailing Address PO Box 222		FEC Identification Number C00637371 Transaction ID : 500119678
City Devon	State PA	Zip Code 19333-0222
Purpose of Disbursement PAC Political Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name HOULAHAN, CHRISSY, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 06	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Christina Bohannan For Congress		Date of Disbursement MM / DD / YYYY 05 / 12 / 2022
Mailing Address PO Box 722		FEC Identification Number C00787820 Transaction ID : 500119679
City Iowa City	State IA	Zip Code 52244-0722
Purpose of Disbursement PAC Political Contribution		Amount of Each Disbursement this Period 1500.00
Candidate Name BOHANNAN, CHRISTINA, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Christina Bohannan For Congress		Date of Disbursement MM / DD / YYYY 05 / 19 / 2022
Mailing Address PO Box 722		FEC Identification Number C00787820 Transaction ID : 500119680
City Iowa City	State IA	Zip Code 52244-0722
Purpose of Disbursement PAC Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name BOHANNAN, CHRISTINA, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	<input type="checkbox"/> Memo Item

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

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

5000.00

**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 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. Democratic National Committee

Date of Disbursement

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

Mailing Address 430 S Capitol St SE

FEC Identification Number

C	C00010603
---	-----------

Transaction ID : 500119688

Amount of Each Disbursement this Period

2	5	8	.	3	2
---	---	---	---	---	---

Memo Item

City

Washington

State

DC

Zip Code

20003-4024

Purpose of Disbursement

PAC Event Tickets

Category/
Type

Candidate Name

Democratic National Committee

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Liz Mathis For Congress

Date of Disbursement

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

Mailing Address PO Box 2370

FEC Identification Number

C	C00785675
---	-----------

Transaction ID : 500119696

Amount of Each Disbursement this Period

1	5	0	.	0	0
---	---	---	---	---	---

Memo Item

City

Cedar Rapids

State

IA

Zip Code

52406-2370

Purpose of Disbursement

PAC Political Contribution

Category/
Type

Candidate Name

MATHIS, ELIZABETH, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify)

State: IA

District: 02

Full Name (Last, First, Middle Initial)

C. Liz Mathis For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	2

Mailing Address PO Box 2370

FEC Identification Number

C	C00785675
---	-----------

Transaction ID : 500119697

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Memo Item

City

Cedar Rapids

State

IA

Zip Code

52406-2370

Purpose of Disbursement

PAC Political Contribution

Category/
Type

Candidate Name

MATHIS, ELIZABETH, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: IA

District: 02

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

2	7	5	.	8	3	2
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TOTAL This Period (last page this line number only)..... ▶

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**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. Nikki For Congress

Mailing Address PO Box 5171

City Springfield State IL Zip Code 62705-5171

Purpose of Disbursement
PAC Political Contribution

Candidate Name
BUDZINSKI, NIKKI, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IL District: 13

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2022

FEC Identification Number

C C00787812

Transaction ID : 500119708

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sarah Morgenthau For Congress

Mailing Address PO Box 371

City Saunderstown State RI Zip Code 02874-0371

Purpose of Disbursement
PAC Political Contribution

Candidate Name
MORGENTHAU, SARAH, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: RI District: 02

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2022

FEC Identification Number

C C00806455

Transaction ID : 500119713

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WEXTON FOR CONGRESS

Mailing Address PO Box 650550

City Sterling State VA Zip Code 20165-0550

Purpose of Disbursement
PAC Political Contribution

Candidate Name
WEXTON, JENNIFER, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: VA District: 10

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2022

FEC Identification Number

C C00638023

Transaction ID : 500119718

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).....▶

7500.00

15258.32

**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. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
Non-Contribution Account PAC Credit Card Processing Fee

Candidate Name

ActBlue Technical Services

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	2

FEC Identification Number

C C00401224

Transaction ID : 500119670

Amount of Each Disbursement this Period

98.75

Memo Item

Full Name (Last, First, Middle Initial)

B. 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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500119699

Amount of Each Disbursement this Period

5208.50

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 Reimbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	2	2

FEC Identification Number

C

Transaction ID : 500119705

Amount of Each Disbursement this Period

777.32

Memo Item

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

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

6084.57

**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. Spectrum Cable

Mailing Address 43 W 23Rd St

City New York State NY Zip Code 10010-4203

Purpose of Disbursement PAC Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : 500119706

Amount of Each Disbursement this Period: 522.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address 140 West St

City New York State NY Zip Code 10007-2141

Purpose of Disbursement PAC Phones

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : 500119704

Amount of Each Disbursement this Period: 255.32

Memo Item

Full Name (Last, First, Middle Initial)

C. Drucker, Amanda, , ,

Mailing Address 30 Saint Marks Pl Apt 2D

City New York State NY Zip Code 10003-8031

Purpose of Disbursement Non Contribution Account PAC Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : 500119673

Amount of Each Disbursement this Period: 425.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 425.00

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 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. Luna, Gabriella, , ,		Date of Disbursement MM / DD / YYYY 05 / 03 / 2022
Mailing Address 163 Amsterdam Ave # 1319		FEC Identification Number C [REDACTED] Transaction ID : 500119692 Amount of Each Disbursement this Period 75.00
City New York	State NY	Zip Code 10023-5001
Purpose of Disbursement Non Contribution Account PAC Event Staffing		Category/ Type [REDACTED]
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. Political Compliance Management Services, LLC		Date of Disbursement MM / DD / YYYY 05 / 11 / 2022
Mailing Address 910 17Th St NW Ste 925		FEC Identification Number C [REDACTED] Transaction ID : 500119711 Amount of Each Disbursement this Period 451.95
City Washington	State DC	Zip Code 20006-2641
Purpose of Disbursement Non Contribution Account PAC Accounting Services		Category/ Type [REDACTED]
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. Stanton, James, , ,		Date of Disbursement MM / DD / YYYY 05 / 24 / 2022
Mailing Address 235 E 22Nd St # 15HI		FEC Identification Number C [REDACTED] Transaction ID : 500119693 Amount of Each Disbursement this Period 125.00
City New York	State NY	Zip Code 10010-4616
Purpose of Disbursement Non Contribution Account PAC Graphic Design		Category/ Type [REDACTED]
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).....▶	651.95
TOTAL This Period (last page this line number only).....▶	7161.52