

**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="2023"/>		66618.56
(b) Cash on Hand at Beginning of Reporting Period.....	189780.34	
(c) Total Receipts (from Line 19)	37865.23	228815.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	227645.57	295434.21
7. Total Disbursements (from Line 31).....	67808.85	135597.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	159836.72	159836.72
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: 03 / 01 / 2023 To: 03 / 31 / 2023

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).....	23300.00	196100.00
(ii) Unitemized	65.00	365.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	23365.00	196465.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23365.00	196465.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	14500.23	31350.65
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)).....▶	37865.23	228815.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	37865.23	228815.65

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	11228.55	41142.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11228.55	41142.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	48000.00	60500.00
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	10000.00
(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	10000.00
29. Other Disbursements (Including Non-Federal Donations).....	8580.30	23954.60
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)) ..	67808.85	135597.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	67808.85	135597.49

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)	23365.00	196465.00
34. Total Contribution Refunds (from Line 28(d))	0.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23365.00	186465.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11228.55	41142.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11228.55	41142.89

**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 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Adeslon, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 Walker St
 Apt 4A
 City New York State NY Zip Code 10013-3663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tonal Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2023
Transaction ID : 4453318
 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 ▼ 27965.00

Date of Receipt 03 / 13 / 2023
Transaction ID : 4453318E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Amster, Peggy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Bay Ln
 City Water Mill State NY Zip Code 11976-3102
 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 03 / 01 / 2023
Transaction ID : 4452168
 Amount of Each Receipt this Period 1500.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
	<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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2023

Transaction ID : 4452168E

Amount of Each Receipt this Period
1500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Aronson, Deborah, , ,

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

Mailing Address 282 Grand Ave

City Englewood	State NJ	Zip Code 07631-4370
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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 ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2023

Transaction ID : 4453319

Amount of Each Receipt this Period
1500.00

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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2023

Transaction ID : 4453319E

Amount of Each Receipt this Period
1500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 36
	<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. Braufman, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9111 Collins Ave
 # NPH3
 City Surfside State FL Zip Code 33154-3166
 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 **03 / 01 / 2023**
Transaction ID : 4452167
 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 ▼ 27965.00

Date of Receipt **03 / 06 / 2023**
Transaction ID : 4452167E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Cannata, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24282 Via Aquara Ave
 City Laguna Niguel State CA Zip Code 92677-2134
 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 **03 / 30 / 2023**
Transaction ID : 4672626
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 36
<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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2023

Transaction ID : 4672626E

Amount of Each Receipt this Period
500.00

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2023

Transaction ID : 4452169

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
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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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2023

Transaction ID : 4452169E

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 10 OF 36
	<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. Goldberg, Roz, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1155 N Gulfstream Ave
 Ste 1508
 City Sarasota State FL Zip Code 34236-5599
 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 ▼ 1200.00

Date of Receipt **03 / 12 / 2023**
Transaction ID : 4453322
 Amount of Each Receipt this Period 1200.00
 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 ▼ 27965.00

Date of Receipt **03 / 13 / 2023**
Transaction ID : 4453322E
 Amount of Each Receipt this Period 1200.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Gucovsky, Marta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E 69Th St
 Apt 42A
 City New York State NY Zip Code 10021-5747
 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 ▼ 1200.00

Date of Receipt **03 / 11 / 2023**
Transaction ID : 4453321
 Amount of Each Receipt this Period 1200.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	2400.00
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 36
	<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 ▼
 27965.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2023

Transaction ID : 4453321E

Amount of Each Receipt this Period
 1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Levy, Abigail, , ,

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

Mailing Address 150 W End Ave
Apt 24F

City New York	State NY	Zip Code 10023-5748
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC	Occupation (for Individual) Attorney
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2023

Transaction ID : 4670939

Amount of Each Receipt this Period
 500.00

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 ▼
 27965.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2023

Transaction ID : 4670939E

Amount of Each Receipt this Period
 500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
	<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. Levy, Ellen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 E 57Th St

City New York	State NY	Zip Code 10022-3059
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2023

Transaction ID : 4670863

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
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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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2023

Transaction ID : 4670863E

Amount of Each Receipt this Period
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 838 Mountain Laurel Dr

City Aspen	State CO	Zip Code 81611-2345
---------------	-------------	------------------------

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2023

Transaction ID : 4674458

Amount of Each Receipt this Period
1200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3700.00
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 36
	<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. 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
 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 ▼ 1200.00

Date of Receipt **03 / 11 / 2023**
Transaction ID : 4453320
 Amount of Each Receipt this Period 1200.00
 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 ▼ 27965.00

Date of Receipt **03 / 13 / 2023**
Transaction ID : 4453320E
 Amount of Each Receipt this Period 1200.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Sarnoff, Rosita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 E 69Th St
 City New York State NY Zip Code 10021-5704
 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 ▼ 1200.00

Date of Receipt **03 / 05 / 2023**
Transaction ID : 4452171
 Amount of Each Receipt this Period 1200.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	2400.00
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 36
	<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. 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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2023

Transaction ID : 4452171E

Amount of Each Receipt this Period
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Schechter, Linda, , ,

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

Mailing Address 3012 S Ocean Blvd Apt A

City Highland Beach	State FL	Zip Code 33487-1887
------------------------	-------------	------------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2023

Transaction ID : 4674456

Amount of Each Receipt this Period
500.00

Memo Item

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 ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2023

Transaction ID : 4674453

Amount of Each Receipt this Period
3600.00

Memo Item

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 15 OF 36
	<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. 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 Gilibrand Occupation (for Individual) Consultant Sr Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt **03 / 27 / 2023**
Transaction ID : 4672625
 Amount of Each Receipt this Period 2400.00
 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 ▼ 27965.00

Date of Receipt **03 / 31 / 2023**
Transaction ID : 4672625E
 Amount of Each Receipt this Period 2400.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Vogel, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1150 Park Ave Apt 16F
 City New York State NY Zip Code 10128-1244
 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 **03 / 01 / 2023**
Transaction ID : 4674454
 Amount of Each Receipt this Period 1100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
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 36
(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. Vrancik, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7658 Glendevon Ln

City Delray Beach	State FL	Zip Code 33446-2805
----------------------	-------------	------------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2023

Transaction ID : 4674457

Amount of Each Receipt this Period
500.00

Memo Item

B. Young Giwerc, Marla, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 Googas Rd

City Slingerlands	State NY	Zip Code 12159-9302
----------------------	-------------	------------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2023

Transaction ID : 4674455

Amount of Each Receipt this Period
500.00

Memo Item

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

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	23300.00

**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 36
<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Goldberg, Amy, , ,		Date of Receipt
Mailing Address 215 E 68Th St		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2023"/>
City New York	State NY	Zip Code 10065-5718
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4674460
Name of Employer (for Individual) Self		Amount of Each Receipt this Period <input type="text" value="2000.00"/>
Occupation (for Individual) Communications Consultant		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Levkoff, Susan, , ,		Date of Receipt
Mailing Address 27 N Moore St		<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2023"/>
City New York	State NY	Zip Code 10013-5721
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4674459
Name of Employer (for Individual) Not Employed		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) Not Employed		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2750.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. McHale, Judith, , ,		Date of Receipt
Mailing Address 4657 Devon Path		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2023"/>
City Royal Oak	State MD	Zip Code 21662
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4670942
Name of Employer (for Individual) Cane Investments LLC		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Occupation (for Individual) President And CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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 18 OF 36
<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. 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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2023

Transaction ID : 4670942E

Amount of Each Receipt this Period
10000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Weiner, Shari, , ,

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

Mailing Address 900 Park Ave
Apt 17D

City New York	State NY	Zip Code 10075-0280
------------------	-------------	------------------------

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

Name of Employer (for Individual) Murphy Mckeon PC	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2023

Transaction ID : 4670941

Amount of Each Receipt this Period
2000.00

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 ▼
27965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2023

Transaction ID : 4670941E

Amount of Each Receipt this Period
2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	14500.00

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: 03 / 06 / 2023

FEC Identification Number: C00401224
Transaction ID : 500131684
Amount of Each Disbursement this Period: 175.78

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: 03 / 13 / 2023

FEC Identification Number: C00401224
Transaction ID : 500131806
Amount of Each Disbursement this Period: 221.20

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: 03 / 20 / 2023

FEC Identification Number: C00401224
Transaction ID : 500132023
Amount of Each Disbursement this Period: 98.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 495.73

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) ▼

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2023

FEC Identification Number

C C00401224

Transaction ID : 500132024

Amount of Each Disbursement this Period

20.35

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) ▼

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2023

FEC Identification Number

C C00401224

Transaction ID : 500132145

Amount of Each Disbursement this Period

114.55

Memo Item

Full Name (Last, First, Middle Initial)

C. 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) ▼

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2023

FEC Identification Number

C

Transaction ID : 500132030

Amount of Each Disbursement this Period

65.00

Memo Item

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

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

199.90

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: 03 / 06 / 2023

FEC Identification Number: C

Transaction ID : 500132031

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: 03 / 13 / 2023

FEC Identification Number: C

Transaction ID : 500132032

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: 03 / 20 / 2023

FEC Identification Number: C

Transaction ID : 500132033

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2023

Mailing Address 270 Park Ave

FEC Identification Number

C []

Transaction ID : 500132034

Amount of Each Disbursement this Period

[] 15.00

Memo Item

City New York State NY Zip Code 10017-2014

Purpose of Disbursement
PAC Bank Fees

[]

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Curb Mobility LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	08	/	2023

Mailing Address 1111 34Th Ave

FEC Identification Number

C []

Transaction ID : 500132039

Amount of Each Disbursement this Period

[] 31.92

Memo Item

City Long Island City State NY Zip Code 11106-4923

Purpose of Disbursement
PAC Travel Expense

[]

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Curb Mobility LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	10	/	2023

Mailing Address 1111 34Th Ave

FEC Identification Number

C []

Transaction ID : 500132040

Amount of Each Disbursement this Period

[] 23.62

Memo Item

City Long Island City State NY Zip Code 11106-4923

Purpose of Disbursement
PAC Travel Expense

[]

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

[] 70.54

[]

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:

<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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500132041

Amount of Each Disbursement this Period

[REDACTED] 9.24

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:

<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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500132042

Amount of Each Disbursement this Period

[REDACTED] 57.12

Memo Item

Full Name (Last, First, Middle Initial)

C. Dickstein Sudolsky, Marcia, , ,

Mailing Address 445 Park Ave

City
New York

State
NY

Zip Code
10022-2606

Purpose of Disbursement
PAC Administrative Services

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500132060

Amount of Each Disbursement this Period

[REDACTED] 6250.00

Memo Item

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

[REDACTED] 6316.36

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 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. Howe, Nora, , ,

Mailing Address 113 Mott St
Apt 4R

City New York State NY Zip Code 10013-4634

Purpose of Disbursement
PAC Administrative Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2023

FEC Identification Number

C

Transaction ID : 500132076

Amount of Each Disbursement this Period

495.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Howe, Nora, , ,

Mailing Address 113 Mott St
Apt 4R

City New York State NY Zip Code 10013-4634

Purpose of Disbursement
PAC Administrative Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2023

FEC Identification Number

C

Transaction ID : 500132077

Amount of Each Disbursement this Period

416.25

Memo Item

Full Name (Last, First, Middle Initial)

C. JetBlue

Mailing Address 2701 Queens Plz N

City Long Island City State NY Zip Code 11101-4020

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
03 / 06 / 2023

FEC Identification Number

C

Transaction ID : 500132053

Amount of Each Disbursement this Period

375.65

Memo Item

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

1286.90

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. JetBlue

Full Name (Last, First, Middle Initial)

Mailing Address 2701 Queens Plz N

City Long Island City State NY Zip Code 11101-4020

Purpose of Disbursement PAC Travel Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 16 / 2023

FEC Identification Number C

Transaction ID : 500132054

Amount of Each Disbursement this Period 76.00

Memo Item

B. Opal Grand Oceanfront

Full Name (Last, First, Middle Initial)

Mailing Address 10 N Ocean Blvd

City Delray Beach State FL Zip Code 33483-7011

Purpose of Disbursement PAC Meeting Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 13 / 2023

FEC Identification Number C

Transaction ID : 500132079

Amount of Each Disbursement this Period 38.10

Memo Item

C. 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 03 / 22 / 2023

FEC Identification Number C

Transaction ID : 500132081

Amount of Each Disbursement this Period 549.22

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 663.32

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. Seamless.Com

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2023

Mailing Address 111 W Washington St
Ste 2100

City Chicago State IL Zip Code 60602-2783

Purpose of Disbursement
PAC Meeting Expense

FEC Identification Number

C [REDACTED]

Transaction ID : 500132083

Amount of Each Disbursement this Period

[REDACTED] 45.74

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. The Ray Hotel

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2023

Mailing Address 233 NE 2Nd Ave

City Delray Beach State FL Zip Code 33444-3705

Purpose of Disbursement
PAC Travel Expense

FEC Identification Number

C [REDACTED]

Transaction ID : 500132046

Amount of Each Disbursement this Period

[REDACTED] 457.44

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. The Ray Hotel

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	15	/	2023

Mailing Address 233 NE 2Nd Ave

City Delray Beach State FL Zip Code 33444-3705

Purpose of Disbursement
PAC Travel Expense

FEC Identification Number

C [REDACTED]

Transaction ID : 500132045

Amount of Each Disbursement this Period

[REDACTED] 100.56

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 603.74

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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. The Ray Hotel

Mailing Address 233 NE 2Nd Ave

City Delray Beach State FL Zip Code 33444-3705

Purpose of Disbursement PAC Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 16 / 2023

FEC Identification Number: C

Transaction ID : 500132044

Amount of Each Disbursement this Period: 33.90

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) ▼

Date of Disbursement: 03 / 13 / 2023

FEC Identification Number: C

Transaction ID : 500132091

Amount of Each Disbursement this Period: 349.70

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 383.60

TOTAL This Period (last page this line number only)..... ▶ 10705.21

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. Andrea Salinas For Oregon

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2023

Mailing Address PO Box 230985

FEC Identification Number

C	C00793703
---	-----------

Transaction ID : 500132027

Amount of Each Disbursement this Period

2500.00

Memo Item

City
Tigard

State
OR

Zip Code
97281-0985

Purpose of Disbursement
Contribution

--

Candidate Name

Salinas, Andrea, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: OR District: 06

Full Name (Last, First, Middle Initial)

B. ANGIE CRAIG FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2023

Mailing Address 22116 PO Box

FEC Identification Number

C	C00575209
---	-----------

Transaction ID : 500132028

Amount of Each Disbursement this Period

2500.00

Memo Item

City
Eagan

State
MN

Zip Code
55122-0116

Purpose of Disbursement
Contribution

--

Candidate Name

Craig, Angie, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: MN District: 02

Full Name (Last, First, Middle Initial)

C. CARAVEO FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2023

Mailing Address PO Box 953

FEC Identification Number

C	C00787788
---	-----------

Transaction ID : 500132029

Amount of Each Disbursement this Period

2500.00

Memo Item

City
Eastlake

State
CO

Zip Code
80614-0953

Purpose of Disbursement
Contribution

--

Candidate Name

CARAVEO, YADIRA, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: CO District: 08

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

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

7500.00

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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. CHRISSY HOULAHAN FOR CONGRESS

Mailing Address PO Box 222

City
Devon

State
PA

Zip Code
19333-0222

Purpose of Disbursement
Contribution

Candidate Name

HOULAHAN, CHRISSY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	30	/	2023

FEC Identification Number

C C00637371

Transaction ID : 500132035

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Mailing Address 1071 Twin Branch Ln

City
Weston

State
FL

Zip Code
33326-2828

Purpose of Disbursement
Contribution

Candidate Name

Wasserman Schultz, Debbie, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify)

State: FL District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	30	/	2023

FEC Identification Number

C C00385773

Transaction ID : 500132048

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DR KIM SCHRIER FOR CONGRESS

Mailing Address PO Box 2728

City
Issaquah

State
WA

Zip Code
98027-0125

Purpose of Disbursement
Contribution

Candidate Name

SCHRIER, KIM, DR., ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: WA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	30	/	2023

FEC Identification Number

C C00652628

Transaction ID : 500132049

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

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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. FAIR SHOT PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2023

Mailing Address 600 Pennsylvania Ave SE
Unit 15180

City Washington State DC Zip Code 20003-7508

FEC Identification Number

C C00574970

Transaction ID : 500132051

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement
Contribution

Candidate Name

FAIR SHOT PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. KLOBUCHAR FOR MINNESOTA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2023

Mailing Address PO Box 4146

City Saint Paul State MN Zip Code 55104-0146

FEC Identification Number

C C00410191

Transaction ID : 500132057

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement
Contribution

Candidate Name

KLOBUCHAR, AMY, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024 Primary General
 Other (specify)

State: MN District: 00

Full Name (Last, First, Middle Initial)

C. MARIE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	30	/	2023

Mailing Address PO Box 1164

City Washougal State WA Zip Code 98671-0926

FEC Identification Number

C C00806174

Transaction ID : 500132069

Amount of Each Disbursement this Period

2500.00

Memo Item

Purpose of Disbursement
Contribution

Candidate Name

GLUESENKAMP PEREZ, MARIE, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024 Primary General
 Other (specify) ▼

State: WA District: 03

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

12500.00

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 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. SHARICE FOR CONGRESS

Mailing Address 13851 Num 303

City Shawnee State KS Zip Code 66216

Purpose of Disbursement Contribution

Candidate Name
DAVIDS, SHARICE, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: KS District: 03

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2023

FEC Identification Number

C C00670034

Transaction ID : 500132084

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SPANBERGER FOR CONGRESS

Mailing Address PO Box 3121

City Glen Allen State VA Zip Code 23058-3121

Purpose of Disbursement Contribution

Candidate Name
SPANBERGER, ABIGAIL, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: VA District: 07

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2023

FEC Identification Number

C C00649913

Transaction ID : 500132085

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SUSAN WILD FOR CONGRESS

Mailing Address 1636 N Cedar Crest Blvd # 183

City Allentown State PA Zip Code 18104-2318

Purpose of Disbursement Contribution

Candidate Name
WILD, SUSAN, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: PA District: 15

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2023

FEC Identification Number

C C00658567

Transaction ID : 500132087

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

**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. SUSIE LEE FOR CONGRESS

Date of Disbursement: 03 / 30 / 2023

Mailing Address: 5130 S Fort Apache Rd, Ste 215-382

City: Las Vegas, State: NV, Zip Code: 89148-1719

Purpose of Disbursement: Contribution

Candidate Name: LEE, SUSIE, , ,

Office Sought: House, Senate, President

Disbursement For: 2024, Primary, General, Other (specify) ▼

State: NV, District: 03

FEC Identification Number: C00655613
Transaction ID: 500132088
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Tammy Baldwin For Senate

Date of Disbursement: 03 / 30 / 2023

Mailing Address: PO Box 696

City: Madison, State: WI, Zip Code: 53701-0696

Purpose of Disbursement: Contribution

Candidate Name: Baldwin, Tammy, , ,

Office Sought: House, Senate, President

Disbursement For: 2024, Primary, General, Other (specify) ▼

State: WI, District: 00

FEC Identification Number: C00326801
Transaction ID: 500132089
Amount of Each Disbursement this Period: 5000.00

Memo Item

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

Date of Disbursement: 03 / 30 / 2023

Mailing Address: PO Box 11293

City: Portland, State: OR, Zip Code: 97211-0293

Purpose of Disbursement: Contribution

Candidate Name: VOTEVETS

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify) ▼

State: District:

FEC Identification Number: C00418897
Transaction ID: 500132090
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8500.00

TOTAL This Period (last page this line number only)..... ▶ 48000.00

**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. 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

/ /

FEC Identification Number

Transaction ID : 500132025
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Dickstein Sudolsky, Marcia, , ,

Mailing Address 445 Park Ave

City New York State NY Zip Code 10022-2606

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

/ /

FEC Identification Number

Transaction ID : 500132061
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Dickstein Sudolsky, Marcia, , ,

Mailing Address 445 Park Ave

City New York State NY Zip Code 10022-2606

Purpose of Disbursement
Non Contribution Account PAC Reimbursement - See Below if Itemized

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500132065
Amount of Each Disbursement this Period

Memo Item

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

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. Howe, Nora, , ,

Mailing Address 113 Mott St
Apt 4R

City
New York

State
NY

Zip Code
10013-4634

Purpose of Disbursement
Non Contribution Account PAC Administrative Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500132074

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Howe, Nora, , ,

Mailing Address 113 Mott St
Apt 4R

City
New York

State
NY

Zip Code
10013-4634

Purpose of Disbursement
Non Contribution Account PAC Administrative Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500132075

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Political Compliance Management Services, LLC

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) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500132080

Amount of Each Disbursement this Period

Memo Item

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

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