

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 Washington DC 20006 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00488387 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 06 / 01 / 2023 through 06 / 30 / 2023

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 07 / 20 / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Tri-State Maxed-Out Women

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		<input type="text" value="66618.56"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="150360.80"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="41815.20"/>	<input type="text" value="312951.89"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="192176.00"/>	<input type="text" value="379570.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="62828.64"/>	<input type="text" value="250223.09"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="129347.36"/>	<input type="text" value="129347.36"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: 06 / 01 / 2023 To: 06 / 30 / 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).....	19950.00	252990.60
(ii) Unitemized	115.00	560.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20065.00	253550.60
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1200.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	20065.00	254750.60
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	75.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	21750.20	57126.29
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)).....▶	41815.20	312951.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	41815.20	312951.89

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	11389.48	79838.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11389.48	79838.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42750.00	110750.00
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	11200.00
(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	11200.00
29. Other Disbursements (Including Non-Federal Donations).....	8689.16	48435.09
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)) ..	62828.64	250223.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62828.64	250223.09

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)	20065.00	254750.60
34. Total Contribution Refunds (from Line 28(d))	0.00	11200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20065.00	243550.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11389.48	79838.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	75.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11389.48	79763.00

**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 6 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Agress, Ronnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3300 S Ocean Blvd
 Apt 403S
 City Palm Beach State FL Zip Code 33480-5663
 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
 06 / 11 / 2023
Transaction ID : 4689969
 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 ▼ 39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2023
Transaction ID : 4689969E
 Amount of Each Receipt this Period
 1200.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Belzer Reid, Frances, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Bluff Point Rd
 City Northport State NY Zip Code 11768-1515
 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
 06 / 27 / 2023
Transaction ID : 4693290
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 * Earmarked Contribution: See Below

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 7 OF 44
	<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 ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : 4693290E

Amount of Each Receipt this Period
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Name of Employer (for Individual) Schulte Roth & Zabel	Occupation (for Individual) Attorney
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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
06		05		2023

Transaction ID : 4689974

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 ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2023

Transaction ID : 4689974E

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 8 OF 44
	<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. Coller, Bobbi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1160 Park Ave
 City New York State NY Zip Code 10128-1212
 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 **06 / 18 / 2023**
Transaction ID : 4689976
 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 ▼ 39415.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : 4689976E
 Amount of Each Receipt this Period 1500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Hess, Anne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 E 18Th St
 City New York State NY Zip Code 10003-3605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 18 / 2023**
Transaction ID : 4689977
 Amount of Each Receipt this Period 1500.00
 Memo Item
 * Earmarked Contribution: See Below

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
	<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 ▼
39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : 4689977E

Amount of Each Receipt this Period
1500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Hochkammer, Anna, , ,

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

Mailing Address 6730 SW 88Th Ter

City Pinecrest	State FL	Zip Code 33156-1728
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Public Administrator
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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
 06 / 28 / 2023

Transaction ID : 4693293

Amount of Each Receipt this Period
2500.00

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 ▼
39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2023

Transaction ID : 4693293E

Amount of Each Receipt this Period
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	2500.00
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 44
	<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. Johnson, Joyce, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 W 96Th St
 Apt 16G
 City New York State NY Zip Code 10025-6537
 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 ▼ 300.00

Date of Receipt 06 / 03 / 2023
Transaction ID : 4689968
 Amount of Each Receipt this Period 50.00
 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 ▼ 39415.00

Date of Receipt 06 / 05 / 2023
Transaction ID : 4689968E
 Amount of Each Receipt this Period 50.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Kubie, Audrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 E 72Nd St
 City New York State NY Zip Code 10021-4555
 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 06 / 16 / 2023
Transaction ID : 4693303
 Amount of Each Receipt this Period 1200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 44
	<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. Locker, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 983 Park Ave # 9C
 City New York State NY Zip Code 10028-0808
 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 06 / 08 / 2023
Transaction ID : 4689972
 Amount of Each Receipt this Period 3000.00
 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 ▼ 39415.00

Date of Receipt 06 / 12 / 2023
Transaction ID : 4689972E
 Amount of Each Receipt this Period 3000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Mann, Meryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 E Shore Rd
 City Great Neck State NY Zip Code 11024-1543
 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 06 / 27 / 2023
Transaction ID : 4693283
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

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: (check only one)	PAGE 12 OF 44
	<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 ▼
 39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2023

Transaction ID : 4693283E

Amount of Each Receipt this Period
 500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Rubinson, Karen, , ,

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

Mailing Address 800 W End Ave # 9B

City New York	State NY	Zip Code 10025-5467
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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
 06 / 18 / 2023

Transaction ID : 4689975

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 ▼
 39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : 4689975E

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 13 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Sachs, Sheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Simmons Ln
 City Greenwich State CT Zip Code 06830-3336
 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
 06 / 05 / 2023
Transaction ID : 4689973
 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 ▼ 39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2023
Transaction ID : 4689973E
 Amount of Each Receipt this Period
 1200.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Schimel, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 Park Ave
 City Port Washington State NY Zip Code 11050-4035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS Homes And Community Renewal Occupation (for Individual) Director
 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
 06 / 27 / 2023
Transaction ID : 4693287
 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 44
	<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
-------------------------	-------------	------------------------

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 ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2023

Transaction ID : 4693287E

Amount of Each Receipt this Period
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Sherman, Joan, , ,

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

Mailing Address 135 Greene St

City New York	State NY	Zip Code 10012-3285
------------------	-------------	------------------------

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

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

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
06		19		2023

Transaction ID : 4689978

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
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2023

Transaction ID : 4689978E

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).....	19950.00

**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 15 OF 44
<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 ▼ 10000.00

Date of Receipt **06 / 18 / 2023**
Transaction ID : 4689985
 Amount of Each Receipt this Period 5000.00
 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 ▼ 39415.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : 4689985E
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Berenson, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 E 48Th St
 City New York State NY Zip Code 10017-1538
 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 ▼ 2000.00

Date of Receipt **06 / 14 / 2023**
Transaction ID : 4689981
 Amount of Each Receipt this Period 1000.00
 Memo Item
 * Earmarked Contribution: See Below

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 44
<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
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : 4689981E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Brennan-Galvin, Ellen, , ,

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

Mailing Address 136 Maple Ave

City Greenwich	State CT	Zip Code 06830-5623
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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
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2023

Transaction ID : 4689979

Amount of Each Receipt this Period
1000.00

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 ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2023

Transaction ID : 4689979E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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 17 OF 44
<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. Hochkammer, Anna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6730 SW 88Th Ter
 City Pinecrest State FL Zip Code 33156-1728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Public Administrator
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt **06 / 28 / 2023**
Transaction ID : 4693300
 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 39415.00

Date of Receipt **06 / 30 / 2023**
Transaction ID : 4693300E
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Hurst, Fern, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 5Th Ave
 City New York State NY Zip Code 10128-0104
 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 1000.00

Date of Receipt **06 / 14 / 2023**
Transaction ID : 4689982
 Amount of Each Receipt this Period 1000.00
 Memo Item
 * Earmarked Contribution: See Below

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: (check only one)	PAGE 18 OF 44
<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
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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 ▼
39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2023

Transaction ID : 4689982E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Kasner, Karen, , ,

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

Mailing Address 784 Park Ave

City New York	State NY	Zip Code 10021-3553
------------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2023

Transaction ID : 4693299

Amount of Each Receipt this Period
1000.00

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 ▼
39415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2023

Transaction ID : 4693299E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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 19 OF 44
<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. Koenig, Karel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 Chapel St
 City New Haven State CT Zip Code 06515-2240
 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 ▼ 550.00

Date of Receipt **06 / 15 / 2023**
Transaction ID : 4689984
 Amount of Each Receipt this Period 550.00
 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 ▼ 39415.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : 4689984E
 Amount of Each Receipt this Period 550.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Levkoff, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 N Moore St
 City New York State NY Zip Code 10013-5721
 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 ▼ 6250.00

Date of Receipt **06 / 18 / 2023**
Transaction ID : 4689986
 Amount of Each Receipt this Period 3500.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	4050.00
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 20 OF 44
<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 ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2023

Transaction ID : 4689986E

Amount of Each Receipt this Period
3500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Lipsky, Carol, , ,

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

Mailing Address 1385 York Ave Apt 21A

City New York	State NY	Zip Code 10021-3908
------------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2023

Transaction ID : 4689989

Amount of Each Receipt this Period
1000.00

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
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2023

Transaction ID : 4689989E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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 21 OF 44
<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. Lubetkin Lipton, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W End Ave
 City New York State NY Zip Code 10024-5750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 14 / 2023**
Transaction ID : 4699634
 Amount of Each Receipt this Period 1200.00
 Memo Item

B. Rosensweig, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 Carthage Rd
 City Scarsdale State NY Zip Code 10583-7202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Tennis Player
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : 4689988
 Amount of Each Receipt this Period 1000.00
 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 ▼ 39415.00

Date of Receipt **06 / 26 / 2023**
Transaction ID : 4689988E
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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 22 OF 44
<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. 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 ▼ 1000.00

Date of Receipt **06 / 14 / 2023**
Transaction ID : 4689980
 Amount of Each Receipt this Period 1000.00
 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 ▼ 39415.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : 4689980E
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Telsey, Aimee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Central Park W
 City New York State NY Zip Code 10024-1513
 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 ▼ 1000.00

Date of Receipt **06 / 20 / 2023**
Transaction ID : 4689987
 Amount of Each Receipt this Period 1000.00
 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 23 OF 44
<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 ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2023

Transaction ID : 4689987E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Ubelhart, Karen, , ,

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

Mailing Address 800 W End Ave
Apt 7A

City New York	State NY	Zip Code 10025-5467
------------------	-------------	------------------------

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

Name of Employer (for Individual) Bloomberg LP	Occupation (for Individual) Industry Analyst
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2023

Transaction ID : 4689983

Amount of Each Receipt this Period
1000.00

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 ▼
39415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2023

Transaction ID : 4689983E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	21750.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought:

<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	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	3

FEC Identification Number

C C00401224

Transaction ID : 500133805

Amount of Each Disbursement this Period

1	9	8
---	---	---

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:

<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	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	2	3

FEC Identification Number

C C00401224

Transaction ID : 500133806

Amount of Each Disbursement this Period

2	6	4	6	5
---	---	---	---	---

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:

<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	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	3

FEC Identification Number

C C00401224

Transaction ID : 500133807

Amount of Each Disbursement this Period

1	6	5	9	0
---	---	---	---	---

Memo Item

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

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

4	3	2	5	3
---	---	---	---	---

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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 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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2023

FEC Identification Number

C 000401224

Transaction ID : 500133808

Amount of Each Disbursement this Period

48.00

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2023

FEC Identification Number

C 000401224

Transaction ID : 500134708

Amount of Each Disbursement this Period

264.65

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2023

FEC Identification Number

C

Transaction ID : 500134726

Amount of Each Disbursement this Period

15.00

Memo Item

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

327.65

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. 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: 06 / 09 / 2023

FEC Identification Number: C

Transaction ID : 500134728

Amount of Each Disbursement this Period: 16.32

Memo Item

B. 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: 06 / 12 / 2023

FEC Identification Number: C

Transaction ID : 500134729

Amount of Each Disbursement this Period: 26.04

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: 06 / 15 / 2023

FEC Identification Number: C

Transaction ID : 500134730

Amount of Each Disbursement this Period: 30.13

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 72.49

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

MM / DD / YYYY
06 / 20 / 2023

FEC Identification Number

C []

Transaction ID : 500134731

Amount of Each Disbursement this Period

[] 9.24

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
PAC Administrative Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2023

FEC Identification Number

C []

Transaction ID : 500133821

Amount of Each Disbursement this Period

[] 4250.00

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

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2023

FEC Identification Number

C []

Transaction ID : 500134736

Amount of Each Disbursement this Period

[] 3250.00

Memo Item

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

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

[] 7509.24

[]

**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. Political Compliance Management Services, LLC

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: MM / DD / YYYY
06 / 29 / 2023

FEC Identification Number: C

Transaction ID : 500134752

Amount of Each Disbursement this Period: 500.32

Memo Item

Full Name (Last, First, Middle Initial)
B. Seamless.Com

Mailing Address 111 W Washington St Ste 2100

City Chicago State IL Zip Code 60602-2783

Purpose of Disbursement PAC Meeting Expense

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2023

FEC Identification Number: C

Transaction ID : 500134755

Amount of Each Disbursement this Period: 18.84

Memo Item

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

Mailing Address 111 W Washington St Ste 2100

City Chicago State IL Zip Code 60602-2783

Purpose of Disbursement PAC Meeting Expense

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2023

FEC Identification Number: C

Transaction ID : 500134756

Amount of Each Disbursement this Period: 11.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 530.60

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
06		15		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 : 500134757

Amount of Each Disbursement this Period

[REDACTED] 29.79

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. Uber

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2023

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement
PAC Travel Expense

FEC Identification Number

C [REDACTED]

Transaction ID : 500134772

Amount of Each Disbursement this Period

[REDACTED] 62.11

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. Uber

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2023

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement
PAC Travel Expense

FEC Identification Number

C [REDACTED]

Transaction ID : 500134771

Amount of Each Disbursement this Period

[REDACTED] 130.65

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] 222.55

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. Uber

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500134770

Amount of Each Disbursement this Period

[REDACTED] 17.93

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500134769

Amount of Each Disbursement this Period

[REDACTED] 17.07

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500134768

Amount of Each Disbursement this Period

[REDACTED] 69.92

Memo Item

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

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

[REDACTED] 104.92

[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. Uber

Mailing Address 455 Market St

City
San Francisco

State
CA

Zip Code
94105-2420

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500134767

Amount of Each Disbursement this Period

[REDACTED] 18.11

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 455 Market St

City
San Francisco

State
CA

Zip Code
94105-2420

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500134766

Amount of Each Disbursement this Period

[REDACTED] 71.81

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 455 Market St

City
San Francisco

State
CA

Zip Code
94105-2420

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500134765

Amount of Each Disbursement this Period

[REDACTED] 38.14

Memo Item

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

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

[REDACTED] 128.06

[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. 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
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2023

FEC Identification Number

C
Transaction ID : 500134762
Amount of Each Disbursement this Period
32.48

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
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2023

FEC Identification Number

C
Transaction ID : 500134764
Amount of Each Disbursement this Period
184.72

Memo Item

Full Name (Last, First, Middle Initial)

C. 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
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2023

FEC Identification Number

C
Transaction ID : 500134763
Amount of Each Disbursement this Period
73.32

Memo Item

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

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

290.52

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. 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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500134761

Amount of Each Disbursement this Period

[REDACTED] 289.90

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500134760

Amount of Each Disbursement this Period

[REDACTED] 35.16

Memo Item

Full Name (Last, First, Middle Initial)

C. Westside Market

Mailing Address 1407 Lexington Ave

City
New York

State
NY

Zip Code
10128-1613

Purpose of Disbursement
PAC Fundraising Event 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	6		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500134773

Amount of Each Disbursement this Period

[REDACTED] 85.25

Memo Item

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

[REDACTED] 410.31

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

[REDACTED] 11106.68

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. BIDEN VICTORY FUND

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Contribution

Candidate Name
BIDEN VICTORY FUND

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

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2023

FEC Identification Number

C C00744946

Transaction ID : 500133813

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CARAVEO FOR CONGRESS

Mailing Address PO Box 953

City Eastlake State CO Zip Code 80614-0953

Purpose of Disbursement Contribution

Candidate Name
CARAVEO, YADIRA, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify)

State: CO District: 08

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2023

FEC Identification Number

C C00787788

Transaction ID : 500133814

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

MM / DD / YYYY
06 / 06 / 2023

FEC Identification Number

C C00652628

Transaction ID : 500134732

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)..... ▶

10000.00

**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. DR KIM SCHRIER FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 06 / 2023

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

FEC Identification Number: **C00652628**
Transaction ID : **500134733**
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. EMILY'S LIST

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2023

Mailing Address 1800 M St NW Ste 375N

City Washington State DC Zip Code 20036-5862

Purpose of Disbursement Contribution

Candidate Name **EMILY'S LIST**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: **C00193433**
Transaction ID : **500134734**
Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. FRIENDS OF LUCY MCBATH INC.

Date of Disbursement: MM / DD / YYYY
06 / 28 / 2023

Mailing Address 1860 Sandy Plains Rd Ste Pm 204

City Marietta State GA Zip Code 30066-7839

Purpose of Disbursement Contribution

Candidate Name **MCBATH, LUCIA, MS., ,**

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: GA District: 06

FEC Identification Number: **C00672295**
Transaction ID : **500133817**
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5250.00

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. GILLIBRAND FOR SENATE

Mailing Address PO Box 150516

City Brooklyn State NY Zip Code 11215-0516

Purpose of Disbursement
Contribution

Candidate Name
GILLIBRAND, KIRSTEN, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: NY District: 00

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2023

FEC Identification Number

C C00413914

Transaction ID : 500133818

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KAPTUR FOR CONGRESS

Mailing Address PO Box 899

City Toledo State OH Zip Code 43697-0899

Purpose of Disbursement
Contribution

Candidate Name
KAPTUR, MARCY, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: OH District: 09

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2023

FEC Identification Number

C C00154625

Transaction ID : 500133819

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LIZ FOR NY

Mailing Address PO Box 733

City Goldens Bridge State NY Zip Code 10526-0733

Purpose of Disbursement
Contribution

Candidate Name
GEREGHTY, ELIZABETH, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: NY District: 17

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2023

FEC Identification Number

C C00838599

Transaction ID : 500133820

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. MARIE FOR CONGRESS

Mailing Address PO Box 1164

City
Washougal

State
WA

Zip Code
98671-0926

Purpose of Disbursement
Contribution

Candidate Name

GLUESENKAMP PEREZ, MARIE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: WA District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	3

FEC Identification Number

C C00806174

Transaction ID : 500134739

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARIE FOR CONGRESS

Mailing Address PO Box 1164

City
Washougal

State
WA

Zip Code
98671-0926

Purpose of Disbursement
Contribution

Candidate Name

GLUESENKAMP PEREZ, MARIE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: WA District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	3

FEC Identification Number

C C00806174

Transaction ID : 500134740

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Nikki For Congress

Mailing Address PO Box 5171

City
Springfield

State
IL

Zip Code
62705-5171

Purpose of Disbursement
Contribution

Candidate Name

BUDZINSKI, NIKKI, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	3

FEC Identification Number

C C00787812

Transaction ID : 500134745

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. ROSEN FOR NEVADA

Mailing Address 1000 N Green Valley Pkwy
440-177

City
Henderson

State
NV

Zip Code
89074-6170

Purpose of Disbursement
Contribution

Candidate Name

ROSEN, JACKY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: NV District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	3

FEC Identification Number

C C00606939

Transaction ID : 500134753

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCHOLTEN FOR CONGRESS

Mailing Address PO Box 6233

City
Grand Rapids

State
MI

Zip Code
49516-6233

Purpose of Disbursement
Contribution

Candidate Name

SCHOLTEN, HILLARY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify)

State: MI District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	3

FEC Identification Number

C C00711317

Transaction ID : 500134754

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

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	3

FEC Identification Number

C C00658567

Transaction ID : 500134758

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).....▶

10000.00

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

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2023

Mailing Address 5130 S Fort Apache Rd
Ste 215-382

City Las Vegas State NV Zip Code 89148-1719

Purpose of Disbursement
Contribution

FEC Identification Number

C C00655613

Transaction ID : 500134759

Amount of Each Disbursement this Period

2500.00

Candidate Name

LEE, SUSIE, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: NV District: 03

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

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

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

2500.00

42750.00

**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:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500133809

Amount of Each Disbursement this Period

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
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:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500133810

Amount of Each Disbursement this Period

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
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:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500133811

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. 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

MM / DD / YYYY
06 / 30 / 2023

FEC Identification Number

C C00401224

Transaction ID : 500134725

Amount of Each Disbursement this Period

98.75

Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement
Non Contribution Account PAC Bank Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2023

FEC Identification Number

C

Transaction ID : 500133812

Amount of Each Disbursement this Period

55.50

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 Administration Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2023

FEC Identification Number

C

Transaction ID : 500134737

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

1654.25

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. 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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	2	3		

FEC Identification Number

C []

Transaction ID : 500134751

Amount of Each Disbursement this Period

[] 500.31 []

Memo Item

Full Name (Last, First, Middle Initial)

B.

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

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[] []

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[] []

Memo Item

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

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

[] 500.31 []

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