

**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="2017"/>		<input type="text" value="38169.44"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="103700.69"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="51162.43"/>	<input type="text" value="153289.23"/>
(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="154863.12"/>	<input type="text" value="191458.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="101707.90"/>	<input type="text" value="138303.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="53155.22"/>	<input type="text" value="53155.22"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Tri-State Maxed-Out Women

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

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).....	50000.00	145118.29
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	50000.00	145118.29
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1162.43	1162.43
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	51162.43	146280.72
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	7008.51
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)).....▶	51162.43	153289.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	51162.43	153289.23

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	24707.90	43803.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	24707.90	43803.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	77000.00	94500.00
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	101707.90	138303.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	101707.90	138303.45

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)	51162.43	146280.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51162.43	146280.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	24707.90	43803.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24707.90	43803.45

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

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

FOR LINE NUMBER: PAGE 6 OF 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 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. Amdur, Shirley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 983 Park Ave
 City New York State NY Zip Code 10028-0808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) No Occupation Occupation (for Individual) No Employer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2017
Transaction ID : 639850
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Atiya, Monica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 E 86Th St
 City New York State NY Zip Code 10028-3007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Partner Occupation (for Individual) Scholar Chips
 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
 11 / 30 / 2017
Transaction ID : 728612
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Becker, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 E 62Nd St
 City New York State NY Zip Code 10065-7627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Business Owner Occupation (for Individual) Self
 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
 10 / 19 / 2017
Transaction ID : 689909
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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 7 OF 53
	<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. Blinder, Madeline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 Cherry Hill Rd
 City Princeton State NJ Zip Code 08540-7624
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) No Occupation Occupation (for Individual) No Employer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 09 / 14 / 2017
Transaction ID : 608027
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Bloom, Harvi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 E 52Nd St # 5E
 City New York State NY Zip Code 10022-6487
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 08 / 17 / 2017
Transaction ID : 411571
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Brenner, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 Neustadt Ln
 City Chappaqua State NY Zip Code 10514-3804
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2000.00

Date of Receipt 12 / 21 / 2017
Transaction ID : 751826
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Chesler, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 W 72Nd St
 City New York State NY Zip Code 10023-3486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Senior Follow Occupation (for Individual) Roosevelt Institute
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 27 / 2017**
Transaction ID : 374420
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Cleveland, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 West 72Nd St Apt 506
 City New York State NY Zip Code 10023-4100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 06 / 2017**
Transaction ID : 683573
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Cotton, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 5Th Ave
 City New York State NY Zip Code 10021-2651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NFP Consultant Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 01 / 2017**
Transaction ID : 375367
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
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 53
	<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. Denlinger, Janet, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1040 Arcadian Way

City Fort Lee	State NJ	Zip Code 07024-6348
------------------	-------------	------------------------

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

Name of Employer (for Individual) Scientist	Occupation (for Individual) Matrix Biology Institute
--	---

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
11	/	29	/	2017

Transaction ID : 727671

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 215 E 68Th St

City New York	State NY	Zip Code 10065-5718
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Communications Consultant
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2017

Transaction ID : 751821

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 44 W 62Nd St
Apt 12C

City New York	State NY	Zip Code 10023-7011
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2017

Transaction ID : 639847

Amount of Each Receipt this Period
1000.00

Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 53
	<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. Gucousky, Marta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E 69Th St
 City New York State NY Zip Code 10021-5748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2017
Transaction ID : 739056
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Heffner, Elaine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 Riverside Dr Apt 9A
 City New York State NY Zip Code 10024-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Psychotherapist Occupation (for Individual) Self 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
 10 / 30 / 2017
Transaction ID : 689907
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Jaffe, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 784 Park Ave # 5A
 City New York State NY Zip Code 10021-3553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Consultant Occupation (for Individual) SDJ Associates
 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
 12 / 14 / 2017
Transaction ID : 739053
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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 11 OF 53
	<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, Freda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 Park Ave
 City New York State NY Zip Code 10028-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 21 / 2017**
Transaction ID : 751828
 Amount of Each Receipt this Period 4000.00
 Memo Item

B. Kane, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 York Ave Apt 3P
 City New York State NY Zip Code 10128-6864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LBK Partners Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 30 / 2017**
Transaction ID : 689908
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Konecky, Isobel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 E 68Th St
 City New York State NY Zip Code 10065-6001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : 728712
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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 53
	<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. Lawner, Marsha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Lincoln Plz
 Apt 35D
 City New York State NY Zip Code 10023-7139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2017
Transaction ID : 726867
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Leibert, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1056 5Th Ave
 City New York State NY Zip Code 10028-0112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 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
 07 / 27 / 2017
Transaction ID : 374421
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Levit, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 5Th Ave
 # 1A
 City New York State NY Zip Code 10028-0130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 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
 10 / 02 / 2017
Transaction ID : 622485
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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 13 OF 53
	<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. Levy, Abigail, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 W End Ave
 Apt 24F
 City New York State NY Zip Code 10023-5748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Office Of Collective Barganing Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2017
Transaction ID : 608025
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Levy, Ellen Grob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 E 57T Hstreet
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N / A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 14 / 2017
Transaction ID : 754501
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Mandle, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 E 88Th St
 City New York State NY Zip Code 10128-0509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Attorney Occupation (for Individual) Self
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2017
Transaction ID : 549470
 Amount of Each Receipt this Period 1000.00
 Memo Item

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 14 OF 53
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Menschel, Joyce, , ,

Mailing Address 1035 5Th Ave
7B

City New York State NY Zip Code 10028-0135

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

Name of Employer (for Individual) Homemaker Occupation (for Individual) No Employer

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
 12 / 12 / 2017
Transaction ID : 751824

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 145 Central Park W
Apt 15C

City New York State NY Zip Code 10023-6296

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

Name of Employer (for Individual) Theater Producer Occupation (for Individual) Rebecca Gold Productions

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
 09 / 13 / 2017
Transaction ID : 607141

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 176 E 71St St
15B

City New York State NY Zip Code 10021-5159

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

Name of Employer (for Individual) Retired Occupation (for Individual) N / A

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
 10 / 18 / 2017
Transaction ID : 689910

Amount of Each Receipt this Period
1000.00

Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Newhouse, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 998 5Th Ave
 City New York State NY Zip Code 10028-0102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Author, Lecturer Occupation (for Individual) Self 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
 12 / 12 / 2017
Transaction ID : 751823
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Patterson, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 Rocky Brook Rd
 City Cold Spring State NY Zip Code 10516-4321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A 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
 08 / 01 / 2017
Transaction ID : 375366
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Pogrebin, Abigail, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 941 Park Ave # 14C
 City New York State NY Zip Code 10028-0318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2017
Transaction ID : 735121
 Amount of Each Receipt this Period
 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Schleifer, Harriet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 Carolyn Pl
 City Chappaqua State NY Zip Code 10514-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 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
 12 / 12 / 2017
Transaction ID : 751819
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Senat, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 W 66Th St Apt 24F
 City New York State NY Zip Code 10023-6212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2017
Transaction ID : 411096
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Shor, Nancy, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 E 48Th St
 City New York State NY Zip Code 10017-1567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 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
 09 / 13 / 2017
Transaction ID : 607124
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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 17 OF 53
	<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	<input type="checkbox"/> 17

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

A. Shufro, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 E 70Th St
 Apt 5C
 City New York State NY Zip Code 10021-5246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2017
Transaction ID : 751817
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Snyder, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 5Th Ave
 Apt 3A
 City New York State NY Zip Code 10128-0102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2017
Transaction ID : 754499
 Amount of Each Receipt this Period
 2000.00
 Memo Item

C. Snyder, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 5Th Ave
 Apt 3A
 City New York State NY Zip Code 10128-0102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2017
Transaction ID : 754500
 Amount of Each Receipt this Period
 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4500.00
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 53
	<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. Telsey, Aimee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 W 103RD St
 City New York State NY Zip Code 10055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Physician Occupation (for Individual) Mt. Sinai/Beth Israel
 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
 10 / 05 / 2017
Transaction ID : 639845
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Telsey, Aimee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 W 103RD St
 City New York State NY Zip Code 10055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Physician Occupation (for Individual) Mt. Sinai/Beth Israel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : 754176
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Thypin, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 E 56Th St Apt 25H
 City New York State NY Zip Code 10022-4339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 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
 11 / 30 / 2017
Transaction ID : 728713
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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 19 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zier, Karen, , ,

Mailing Address 12 W 84Th St

City New York	State NY	Zip Code 10024-4702
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2017

Transaction ID : 685381

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	50000.00

**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 20 OF 53
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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. Feinstein For Senate

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

Mailing Address 918 Pennsylvania Ave SE

City Washington	State DC	Zip Code 20003-2140
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00539890

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1162.43

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2017

Transaction ID : 372603

Amount of Each Receipt this Period
1162.43

Memo Item

* In-Kind: Event Catering

B.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1162.43
TOTAL This Period (last page this line number only).....	1162.43

**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. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2017

FEC Identification Number

C
Transaction ID : 500019696
Amount of Each Disbursement this Period
7.95

Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2017

FEC Identification Number

C
Transaction ID : 500019697
Amount of Each Disbursement this Period
159.85

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2017

FEC Identification Number

C
Transaction ID : 500019698
Amount of Each Disbursement this Period
7.95

Memo Item

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

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

175.75

**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. American Express

Full Name (Last, First, Middle Initial)

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement Credit Card Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 07 / 2017

FEC Identification Number: C

Transaction ID : 500019699

Amount of Each Disbursement this Period: 29.05

Memo Item

B. American Express

Full Name (Last, First, Middle Initial)

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement Credit Card Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 02 / 2017

FEC Identification Number: C

Transaction ID : 500019700

Amount of Each Disbursement this Period: 7.95

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement Credit Card Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 05 / 2017

FEC Identification Number: C

Transaction ID : 500019701

Amount of Each Disbursement this Period: 29.05

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 66.05

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. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2017

FEC Identification Number

C
Transaction ID : 500019702
Amount of Each Disbursement this Period
7.95

Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2017

FEC Identification Number

C
Transaction ID : 500019703
Amount of Each Disbursement this Period
58.10

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2017

FEC Identification Number

C
Transaction ID : 500019704
Amount of Each Disbursement this Period
7.95

Memo Item

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

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

74.00

**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. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 05 / 2017

FEC Identification Number

C
Transaction ID : 500019705
Amount of Each Disbursement this Period
29.05

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Bank

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement
Bank Fee

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 03 / 2017

FEC Identification Number

C
Transaction ID : 500019707
Amount of Each Disbursement this Period
27.00

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
Bank Fee

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 01 / 2017

FEC Identification Number

C
Transaction ID : 500019708
Amount of Each Disbursement this Period
27.00

Memo Item

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

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

83.05

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2017

FEC Identification Number: C

Transaction ID : 500019709

Amount of Each Disbursement this Period: 2.00

Memo Item

B. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2017

FEC Identification Number: C

Transaction ID : 500019710

Amount of Each Disbursement this Period: 2.00

Memo Item

C. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 11 / 2017

FEC Identification Number: C

Transaction ID : 500019711

Amount of Each Disbursement this Period: 2.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Chase Bank

Mailing Address 270 Park Ave

City
New York

State
NY

Zip Code
10017-2014

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	1	7		

FEC Identification Number

C []

Transaction ID : 500019712

Amount of Each Disbursement this Period

[] 2.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Bank

Mailing Address 270 Park Ave

City
New York

State
NY

Zip Code
10017-2014

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
	1	0		1	6			2	0	1	7		

FEC Identification Number

C []

Transaction ID : 500019713

Amount of Each Disbursement this Period

[] 2.00

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
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500019714

Amount of Each Disbursement this Period

[] 25.00

Memo Item

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

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

[] 29.00

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2017

FEC Identification Number: C

Transaction ID : 500019715

Amount of Each Disbursement this Period: 2.00

Memo Item

B. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : 500019716

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 21 / 2017

FEC Identification Number: C

Transaction ID : 500019717

Amount of Each Disbursement this Period: 2.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 29.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2017

FEC Identification Number

C
Transaction ID : 500019718
Amount of Each Disbursement this Period
318.80

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 02 / 2017

FEC Identification Number

C
Transaction ID : 500019719
Amount of Each Disbursement this Period
53.37

Memo Item

Full Name (Last, First, Middle Initial)

C. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2017

FEC Identification Number

C
Transaction ID : 500019720
Amount of Each Disbursement this Period
126.28

Memo Item

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

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

498.45

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2017

FEC Identification Number

C
Transaction ID : 500019721
Amount of Each Disbursement this Period
72.39

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2017

FEC Identification Number

C
Transaction ID : 500019722
Amount of Each Disbursement this Period
133.66

Memo Item

Full Name (Last, First, Middle Initial)

C. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2017

FEC Identification Number

C
Transaction ID : 500019723
Amount of Each Disbursement this Period
71.69

Memo Item

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

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

277.74

**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. Corner Bakery

Mailing Address 1645 3Rd Ave

City
New York

State
NY

Zip Code
10128-3626

Purpose of Disbursement
PAC Event Catering

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	9		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : 500019917

Amount of Each Disbursement this Period

[REDACTED] 256.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Feinstein For Senate

Mailing Address 918 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-2140

Purpose of Disbursement
Event Catering

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: CA District: 00

Date of Disbursement

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

FEC Identification Number

C C00539890

Transaction ID : 372603I

Amount of Each Disbursement this Period

[REDACTED] 1162.43

* In-Kind Received

Memo Item

Full Name (Last, First, Middle Initial)

C. Gibson Dunn

Mailing Address 200 Park Ave

City
New York

State
NY

Zip Code
10166-0005

Purpose of Disbursement
PAC Event Catering

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
1	1		3	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : 50001967I

Amount of Each Disbursement this Period

[REDACTED] 1018.18

Memo Item

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

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

[REDACTED] 2180.61

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Parlor Steak & Fish

Full Name (Last, First, Middle Initial)

Mailing Address 1600 3Rd Ave

City New York State NY Zip Code 10128-3477

Purpose of Disbursement PAC Event Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2017

FEC Identification Number: C

Transaction ID : 500015662

Amount of Each Disbursement this Period: 1491.98

Memo Item

B. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 910 17Th St NW Ste 925

City Washington State DC Zip Code 20006-2601

Purpose of Disbursement Petty Cash

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : 500019706

Amount of Each Disbursement this Period: 120.00

Memo Item

C. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 910 17Th St NW Ste 925

City Washington State DC Zip Code 20006-2601

Purpose of Disbursement Petty Cash

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2017

FEC Identification Number: C

Transaction ID : 500019554

Amount of Each Disbursement this Period: 125.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1736.98

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. Petty Cash

Mailing Address 910 17Th St NW
Ste 925

City
Washington

State
DC

Zip Code
20006-2601

Purpose of Disbursement
Petty Cash

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2017

FEC Identification Number

C []

Transaction ID : 500019553

Amount of Each Disbursement this Period

[] 70.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Political Compliance Management Services, LLC

Mailing Address 1050 17Th St NW
Ste 590

City
Washington

State
DC

Zip Code
20036-5592

Purpose of Disbursement
PAC Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	24	/	2017

FEC Identification Number

C []

Transaction ID : 500003265

Amount of Each Disbursement this Period

[] 600.98

Memo Item

Full Name (Last, First, Middle Initial)

C. Political Compliance Management Services, LLC

Mailing Address 1050 17Th St NW
Ste 590

City
Washington

State
DC

Zip Code
20036-5592

Purpose of Disbursement
PAC Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2017

FEC Identification Number

C []

Transaction ID : 500019597

Amount of Each Disbursement this Period

[] 1201.96

Memo Item

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

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

[] 1872.94

[]

**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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2017

Mailing Address 1050 17Th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
PAC Accounting Services

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : 500019564

Amount of Each Disbursement this Period

605.88

Memo Item

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

Full Name (Last, First, Middle Initial)

B. Political Compliance Management Services, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2017

Mailing Address 1050 17Th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
PAC Accounting Services

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : 500019565

Amount of Each Disbursement this Period

601.47

Memo Item

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

Full Name (Last, First, Middle Initial)

C. Political Compliance Management Services, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		13		2017

Mailing Address 1050 17Th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
PAC Accounting Services

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : 500019596

Amount of Each Disbursement this Period

600.00

Memo Item

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

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

1807.35

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. Rampersaud, Envira, , ,			Date of Disbursement MM / DD / YYYY 07 / 06 / 2017	
Mailing Address 201 E 87Th St				
City New York	State NY	Zip Code 10128-3203	FEC Identification Number C [] Transaction ID : 500003296 Amount of Each Disbursement this Period [] 129.00 <input type="checkbox"/> Memo Item	
Purpose of Disbursement PAC Administrative Staffing		Category/ Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. Rampersaud, Envira, , ,			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017	
Mailing Address 201 E 87Th St				
City New York	State NY	Zip Code 10128-3203	FEC Identification Number C [] Transaction ID : 500019409 Amount of Each Disbursement this Period [] 100.00 <input type="checkbox"/> Memo Item	
Purpose of Disbursement PAC Administrative Staffing		Category/ Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. Rampersaud, Envira, , ,			Date of Disbursement MM / DD / YYYY 10 / 05 / 2017	
Mailing Address 201 E 87Th St				
City New York	State NY	Zip Code 10128-3203	FEC Identification Number C [] Transaction ID : 500019545 Amount of Each Disbursement this Period [] 100.00 <input type="checkbox"/> Memo Item	
Purpose of Disbursement PAC Administrative Staffing		Category/ Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 329.00	
TOTAL This Period (last page this line number only)..... ▶			[]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Stanton, James, , ,

Mailing Address 235 E 22Nd St
15HI

City
New York

State
NY

Zip Code
10010-4616

Purpose of Disbursement
PAC Graphic Design

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500003264

Amount of Each Disbursement this Period

[] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Stanton, James, , ,

Mailing Address 235 E 22Nd St
15HI

City
New York

State
NY

Zip Code
10010-4616

Purpose of Disbursement
PAC Graphic Design

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	1	7

FEC Identification Number

C []

Transaction ID : 500019547

Amount of Each Disbursement this Period

[] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Stanton, James, , ,

Mailing Address 235 E 22Nd St
15HI

City
New York

State
NY

Zip Code
10010-4616

Purpose of Disbursement
PAC Graphic Design

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500019548

Amount of Each Disbursement this Period

[] 500.00

Memo Item

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

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

[] 1250.00

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Stanton, James, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 235 E 22Nd St # 15HI

City New York State NY Zip Code 10010-4616

Purpose of Disbursement PAC Graphic Design

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 21 / 2017

FEC Identification Number: C

Transaction ID : 500019546

Amount of Each Disbursement this Period: 250.00

Memo Item

B. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement PAC Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2017

FEC Identification Number: C

Transaction ID : 500003278

Amount of Each Disbursement this Period: 1250.00

Memo Item

C. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement PAC Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2017

FEC Identification Number: C

Transaction ID : 500003270

Amount of Each Disbursement this Period: 1250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Sudolsky, Marcia D., , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
PAC Event Staffing

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	8		0	1		2	0	1	7

FEC Identification Number

C []

Transaction ID : 500019410

Amount of Each Disbursement this Period

[] 850.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sudolsky, Marcia D., , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
PAC Event Staffing

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	8		0	4		2	0	1	7

FEC Identification Number

C []

Transaction ID : 500019411

Amount of Each Disbursement this Period

[] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sudolsky, Marcia D., , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
PAC Administrative Services

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	7

FEC Identification Number

C []

Transaction ID : 500019412

Amount of Each Disbursement this Period

[] 1250.00

Memo Item

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

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

[] 2600.00

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 31 / 2017

FEC Identification Number: C
Transaction ID : 500019413
Amount of Each Disbursement this Period: 600.00

Memo Item

B. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 11 / 2017

FEC Identification Number: C
Transaction ID : 500019563
Amount of Each Disbursement this Period: 300.00

Memo Item

C. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement Reimbursement - See below if itemized

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 15 / 2017

FEC Identification Number: C
Transaction ID : 500019561
Amount of Each Disbursement this Period: 256.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1156.60

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

A. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement PAC Administrative Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 27 / 2017

FEC Identification Number: C

Transaction ID : 500019562

Amount of Each Disbursement this Period: 1250.00

Memo Item

B. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 15 / 2017

FEC Identification Number: C

Transaction ID : 500019555

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 20 / 2017

FEC Identification Number: C

Transaction ID : 500019552

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1950.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 10 / 30 / 2017
Mailing Address 445 Park Ave FI 9		FEC Identification Number C Transaction ID : 500019551 Amount of Each Disbursement this Period 1250.00
City New York	State NY	
Purpose of Disbursement PAC Administrative Services		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) B. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 11 / 07 / 2017
Mailing Address 445 Park Ave FI 9		FEC Identification Number C Transaction ID : 500019549 Amount of Each Disbursement this Period 100.00
City New York	State NY	
Purpose of Disbursement PAC Event Staffing		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) C. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2017
Mailing Address 445 Park Ave FI 9		FEC Identification Number C Transaction ID : 500019724 Amount of Each Disbursement this Period 500.00
City New York	State NY	
Purpose of Disbursement PAC Event Staffing & Reimbursement - See below if itemized		Memo Item <input type="checkbox"/>
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:		

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

1850.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Sudolsky, Marcia D., , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
PAC Event Staffing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500019692

Amount of Each Disbursement this Period

[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sudolsky, Marcia D., , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
Reimbursement - See below if itemized

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500019725

Amount of Each Disbursement this Period

[] 226.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Corner Bakery

Mailing Address 1645 3Rd Ave

City
New York

State
NY

Zip Code
10128-3626

Purpose of Disbursement
PAC Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500019728

Amount of Each Disbursement this Period

[] 9.40

Memo Item

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

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

[] 1226.00

[]

**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. Staples

Mailing Address 1280 Lexington Ave

City New York State NY Zip Code 10028-2105

Purpose of Disbursement Office Supplies

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2017

FEC Identification Number

C
Transaction ID : 500019733
 Amount of Each Disbursement this Period
 91.19

Memo Item

Full Name (Last, First, Middle Initial)

B. UPS Store

Mailing Address 2Nd Ave

City New York State NY Zip Code 10065-8293

Purpose of Disbursement Shipping

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2017

FEC Identification Number

C
Transaction ID : 500019730
 Amount of Each Disbursement this Period
 4.34

Memo Item

Full Name (Last, First, Middle Initial)

C. Wachtell Lipton Rosen And Katz, LLC

Mailing Address 51 W 52Nd St

City New York State NY Zip Code 10019-6119

Purpose of Disbursement PAC Event Catering

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2017

FEC Identification Number

C
Transaction ID : 500003262
 Amount of Each Disbursement this Period
 1396.95

Memo Item

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

1396.95

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Wachtell Lipton Rosen And Katz, LLC

Mailing Address 51 W 52Nd St

City
New York

State
NY

Zip Code
10019-6119

Purpose of Disbursement
PAC Event Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500019726

Amount of Each Disbursement this Period

1162.43

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

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

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

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)..... ▶

1162.43

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

24507.90

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. CHRISSY HOULAHAN FOR CONGRESS

Mailing Address PO Box 222

City
Devon

State
PA

Zip Code
19333-0222

Purpose of Disbursement
Contribution

Candidate Name

HOULAHAN, CHRISSY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

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

FEC Identification Number

C C00637371

Transaction ID : 500019607

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DEBBIE FOR CONGRESS

Mailing Address PO Box 566442

City
Miami

State
FL

Zip Code
33256-6442

Purpose of Disbursement
Contribution

Candidate Name

MUCARSEL-POWELL, DEBBIE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: FL District: 26

Date of Disbursement

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

FEC Identification Number

C C00652065

Transaction ID : 500019610

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ELISSA SLOTKIN FOR CONGRESS

Mailing Address PO Box 244

City
Holly

State
MI

Zip Code
48442-0244

Purpose of Disbursement
Contribution

Candidate Name

SLOTKIN, ELISSA, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

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

FEC Identification Number

C C00650150

Transaction ID : 500019609

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. Feinstein For Senate

Mailing Address 918 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-2140

Purpose of Disbursement
Contribution

Candidate Name

Feinstein, Dianne, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2017			

FEC Identification Number

C C00539890

Transaction ID : 500019673

Amount of Each Disbursement this Period

1337.57

Memo Item

Full Name (Last, First, Middle Initial)

B. Feinstein For Senate

Mailing Address 918 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-2140

Purpose of Disbursement
Contribution

Candidate Name

Feinstein, Dianne, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2017			

FEC Identification Number

C C00539890

Transaction ID : 500019674

Amount of Each Disbursement this Period

1162.43

Memo Item

Full Name (Last, First, Middle Initial)

C. FINKENAUER FOR CONGRESS

Mailing Address PO Box 598

City
Dubuque

State
IA

Zip Code
52004-0598

Purpose of Disbursement
Contribution

Candidate Name

FINKENAUER, ABBY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			27			2017			

FEC Identification Number

C C00637074

Transaction ID : 500019586

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)..... ▶

5000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. FRIENDS OF CHERI BUSTOS

Full Name (Last, First, Middle Initial)
Mailing Address 77 PO Box

City East Moline State IL Zip Code 61244-0077

Purpose of Disbursement Contribution

Candidate Name **BUSTOS, CHERI, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IL District: 17

Date of Disbursement: 12 / 27 / 2017

FEC Identification Number: **C00498568**
Transaction ID : 500019615
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. FRIENDS OF MAZIE HIRONO

Full Name (Last, First, Middle Initial)
Mailing Address 303 Massachusetts Ave NE

City Washington State DC Zip Code 20002-5701

Purpose of Disbursement Contribution

Candidate Name **HIRONO, MAZIE, K, ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: HI District: 00

Date of Disbursement: 09 / 27 / 2017

FEC Identification Number: **C00420760**
Transaction ID : 500019593
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. GRACE FOR NEW YORK

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 656555

City Fresh Meadows State NY Zip Code 11365-6555

Purpose of Disbursement Contribution

Candidate Name **MENG, GRACE, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NY District: 06

Date of Disbursement: 09 / 27 / 2017

FEC Identification Number: **C00516666**
Transaction ID : 500019575
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. GRETCHEN DRISKELL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2017

Mailing Address 464 PO Box

FEC Identification Number

C	C00572859
---	-----------

Transaction ID : 500019611

Amount of Each Disbursement this Period

1000.00

Memo Item

City Saline State MI Zip Code 48176-0464

Purpose of Disbursement Contribution

Category/Type

Candidate Name

DRISKELL, GRETCHEN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MI District: 07

Full Name (Last, First, Middle Initial)

B. Heidi For Senate

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2017

Mailing Address PO Box 1577

FEC Identification Number

C	C00505552
---	-----------

Transaction ID : 500019603

Amount of Each Disbursement this Period

2500.00

Memo Item

City Bismarck State ND Zip Code 58502-1577

Purpose of Disbursement Contribution

Category/Type

Candidate Name

Heitkamp, Heidi, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: ND District: 00

Full Name (Last, First, Middle Initial)

C. JULIA BROWNLEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	27	/	2017

Mailing Address 2018 PO Box

FEC Identification Number

C	C00513077
---	-----------

Transaction ID : 500019613

Amount of Each Disbursement this Period

2500.00

Memo Item

City Thousand Oaks State CA Zip Code 91358-2018

Purpose of Disbursement Contribution

Category/Type

Candidate Name

BROWNLEY, JULIA, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 26

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. KIRKPATRICK FOR CONGRESS

Date of Disbursement: / /

Mailing Address: PO Box 3015

City: Tucson State: AZ Zip Code: 85702-3015

Purpose of Disbursement: Contribution

Candidate Name: **KIRKPATRICK, ANN, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 02

FEC Identification Number: **C00651042**
Transaction ID : 500019608
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. KLOBUCHAR FOR MINNESOTA

Date of Disbursement: / /

Mailing Address: PO Box 4146

City: Saint Paul State: MN Zip Code: 55104-0146

Purpose of Disbursement: Contribution

Candidate Name: **KLOBUCHAR, AMY, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District: 00

FEC Identification Number: **C00410191**
Transaction ID : 500019577
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. KLOBUCHAR FOR MINNESOTA

Date of Disbursement: / /

Mailing Address: PO Box 4146

City: Saint Paul State: MN Zip Code: 55104-0146

Purpose of Disbursement: Contribution

Candidate Name: **KLOBUCHAR, AMY, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District: 00

FEC Identification Number: **C00410191**
Transaction ID : 500019589
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 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. KUSTER FOR CONGRESS, INC		Date of Disbursement MM / DD / YYYY 10 / 19 / 2017
Mailing Address 1498 PO Box		FEC Identification Number C 000462861 Transaction ID : 500019573
City Concord	State NH	Zip Code 03302-1498
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name KUSTER, ANN, MCLANE, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NH	District: 02	

Full Name (Last, First, Middle Initial) B. LOUISE SLAUGHTER RE-ELECTION COMMITTEE		Date of Disbursement MM / DD / YYYY 09 / 27 / 2017
Mailing Address 1150 University Ave Ste 5		FEC Identification Number C 000213611 Transaction ID : 500019578
City Rochester	State NY	Zip Code 14607-1647
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name Slaughter, Louise, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 25	

Full Name (Last, First, Middle Initial) C. Maloney For Congress		Date of Disbursement MM / DD / YYYY 12 / 27 / 2017
Mailing Address 49 E 92Nd St		FEC Identification Number C 000273169 Transaction ID : 500019614
City New York	State NY	Zip Code 10128-1326
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name Maloney, Carolyn, B., ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 12	

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

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

6000.00

**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. McCaskill For Missouri		Date of Disbursement MM / DD / YYYY 09 / 27 / 2017
Mailing Address PO Box 300077		FEC Identification Number C C00431304 Transaction ID : 500019591 Amount of Each Disbursement this Period 2500.00
City Saint Louis	State MO	Zip Code 63130-0338
Purpose of Disbursement Contribution		Category/ Type
Candidate Name McCaskill, Claire, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. NADLER VICTORY FUND		Date of Disbursement MM / DD / YYYY 09 / 27 / 2017
Mailing Address 200 W 79Th St Apt 8N		FEC Identification Number C C00657205 Transaction ID : 500019675 Amount of Each Disbursement this Period 7500.00
City New York	State NY	Zip Code 10024-6215
Purpose of Disbursement Contribution		Category/ Type
Candidate Name NADLER VICTORY FUND		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. ROSEN FOR NEVADA		Date of Disbursement MM / DD / YYYY 09 / 27 / 2017
Mailing Address 1000 N Green Valley Pkwy # 440-177		FEC Identification Number C C00606939 Transaction ID : 500019588 Amount of Each Disbursement this Period 2500.00
City Henderson	State NV	Zip Code 89074-6170
Purpose of Disbursement Contribution		Category/ Type
Candidate Name ROSEN, JACKY, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 03	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. 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: 2018
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

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

FEC Identification Number

C C00606939

Transaction ID : 500019612

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. SINEMA FOR ARIZONA

Mailing Address PO Box 7586

City
Phoenix

State
AZ

Zip Code
85011-7586

Purpose of Disbursement
Contribution

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: AZ District: 09

Date of Disbursement

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

FEC Identification Number

C C00508804

Transaction ID : 500019695

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Stabenow For US Senate

Mailing Address PO Box 4945

City
East Lansing

State
MI

Zip Code
48826-4945

Purpose of Disbursement
Contribution

Candidate Name

Stabenow, Debbie, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	7

FEC Identification Number

C C00344473

Transaction ID : 500019592

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0
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Memo Item

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

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

1	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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. STEPHANIE MURPHY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		27		2017

Mailing Address 205 PO Box

FEC Identification Number

C	C00620443
---	-----------

City Winter Park State FL Zip Code 32790-0205

Transaction ID : 500019616

Purpose of Disbursement Contribution

Amount of Each Disbursement this Period

Candidate Name

MURPHY, STEPHANIE, , ,

Category/Type

5000.00

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

Memo Item

State: FL District: 07

Full Name (Last, First, Middle Initial)

B. SUSIE LEE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2017

Mailing Address 5130 S Fort Apache Rd Ste 215-382

FEC Identification Number

C	C00655613
---	-----------

City Las Vegas State NV Zip Code 89148-1719

Transaction ID : 500019600

Purpose of Disbursement Contribution

Amount of Each Disbursement this Period

Candidate Name

LEE, SUSIE, , ,

Category/Type

2500.00

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

Memo Item

State: NV District: 03

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin For Senate

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2017

Mailing Address PO Box 696

FEC Identification Number

C	C00326801
---	-----------

City Madison State WI Zip Code 53701-0696

Transaction ID : 500019590

Purpose of Disbursement Contribution

Amount of Each Disbursement this Period

Candidate Name

Baldwin, Tammy, , ,

Category/Type

2500.00

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

Memo Item

State: WI District: 00

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

10000.00

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

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

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

FOR LINE NUMBER:
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<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. VAL DEMINGS FOR CONGRESS

Mailing Address PO Box 536926

City
Orlando

State
FL

Zip Code
32853-6926

Purpose of Disbursement
Contribution

Candidate Name

DEMINGS, VALDEZ, VAL, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			08			2017					

FEC Identification Number

C C00498980

Transaction ID : 500019606

Amount of Each Disbursement this Period

2500.00

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

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Memo Item

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

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

2500.00

77000.00
