FEC FORM 3X

03/16/2022 12 : 17

PAGE 1 / 48

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

							Office Us	se Only	
1. NAME OF COMMITTEE (in full)	TYPE OR	PRINT ▼		mple: If typir r the lines.	ng, type	12FE4	M5		
Tri-State Maxed-C	Out Women								1
ADDRESS (number and street		n St NW Ste 925)						
Check if different than previously reported. (ACC)	t Washin	gton				DC	20006		
2. FEC IDENTIFICATIO		, 	CITY 🔺		S	STATE 🔺		ZIP COD	E 🔺
C C00488387		3	8. IS THIS REPORT		NEW N) OR	×	AMENDED (A)		
4. TYPE OF REPOR (Choose One)	Re	port	Feb 20 (M2)		May 20 (M5)	A	Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports		e On:	Mar 20 (M3)		Jun 20 (M6)	S	Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
April 15			Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
Quarterly Re July 15	port (Q1) (c)	12-Day		Primary (12P	?)	Gene	ral (12G)	F F	Runoff (12R)
Quarterly Re	port (Q2)	PRE-Election Report for the		Convention (12C)	Speci	ial (12S)		
October 15 Quarterly Re	port (Q3)			M M /	D D /	YYYY	Y	in the	
January 31 Year-End Re	port (YE)	El	ection on					State of	
July 31 Mid- Report (Non- Year Only) (I	-election	30-Day POST -Electio Report for the		General (300	à)	Runo	ff (30R)	5	Special (30S)
Termination F (TER)	Report	Report for the	e.	M M /	D D /	Y Y Y	Y	in the	
		El	ection on					State of	
5. Covering Period	M M / D 01 0		22 22	through	01	/ D D 31	/ Y Y 202	22	
I certify that I have exami		and to the bes in Sudolsky, Ma		wledge and b	oelief it is true	e, correct	and complet	te.	
Type or Print Name of Tre									
Signature of Treasurer	Dickstein Sudolsk	y, Marcia, , ,		[Electronically	v Filed]	ate 03	3 [/] 16	D / Y	2022
NOTE: Submission of false,	, erroneous, or inc	complete inform	nation may su	bject the pers	son signing th	is Report t	to the penaltie	es of 52 l	J.S.C. § 30109
Office Use Only								FORN ev. 05/20	
						1			

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)	Page 2	
Write or Type Committee Name		
Tri-State Maxed-Out Women		
Report Covering the Period: From: 01 / 01 / 2022		
COLUMN This Period		
6. (a) Cash on Hand January 1, 2022	60927.14	
(b) Cash on Hand at Beginning of Reporting Period	60927.14	
(c) Total Receipts (from Line 19)	138589.17 138589.17	
 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	199516.31	
7. Total Disbursements (from Line 31)	19678.73 19678.73	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	179837.58 179837.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From:	/ D D / Y Y Y Y 01 / 2022 To	b: 01 / 01 / 2022
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 		
(i) Itemized (use Schedule A)	124468.14	124468.14
(ii) Unitemized (iii) TOTAL (add	37.50	37.50
Lines 11(a)(i) and (ii)	124505.64	124505.64
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	124505.64	124505.64
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures (Befords Relationstation) 	0.00	0.00
 (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 8. Refunds of Contributions Made to Endevel Conditions and Other 	83.30	83.30
to Federal Candidates and Other Political Committees	0.00	0.00
(Dividends, Interest, etc.)	14000.23	14000.23
(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
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	138589.17	138589.17

20. Total Federal Receipts (subtract Line 18(c) from Line 19)......▶ 138589.17

		13	3858	39.17	
	 100				



DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 10648.07 Expenditures 10648.07 (c) Total Operating Expenditures 10648.07 (add 21(a)(i), (a)(ii), and (b)) 10648.07 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 2500.00 and Other Political Committees... 2500.00 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (c) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 29. Other Disbursements (Including Non-Federal Donations)..... 6530.66 6530.66 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 Total Federal Election Activity (add (C) 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)).. 19678.73 19678.73 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 19678.73 19678.73

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form 3X (Rev. 05/2016)

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

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						0.00
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						10648.07
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83.30	-		_	1	
10564.77					
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COLUMN B

Calendar Year-to-Date

Page 5

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: F3XA Transaction ID :

We are filing this amendment to correct an omission of a disbursement to Amanda Drucker for \$100. This amendment shows the correct amount but it does not itemize.

Form/Schedule: Transaction ID:

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

PAGE 7

OF

			Detailed Summary Page		11a	a		11b 14	11	- H	12 16	17				
	y information copied from such Reports and State for commercial purposes, other than using the na				for t			pose o	of solici	iting c	contribu	tions				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women															
A.	Full Name of Individual (Last, First, Middle Initial) Adelson, Andrew, , ,	or Full Or	ganization Name		Date	of	Re	eceipt								
	Mailing Address 25 N Moore St Apt 14 City	State	Zip Code		01 04 2022 Transaction ID : 3814159											
	New York	NY	10013-2460		Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		10.00												
	Name of Employer (for Individual) Not Employed		pation (for Individual) Employed		Memo Item											
	Receipt For: A Primary General Other (specify) ▼	Year-to-Date ▼ 5000.00	*	Earr	narl	ked	l Contri	ibution	See	Below						
B.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	ganization Name		Date	of	Re	eceipt								
	Mailing Address PO Box 441146		[™] 0		/	D 10			y y 2022	Y						
	City West Somerville	State MA	Zip Code 02144-0031					i on ID Each I			Period					
	FEC ID number of contributing federal political committee.	C C004	401224		10.00											
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C.	Full Name of Individual (Last, First, Middle Initial) Adelson, Andrew, , ,	or Full Or	ganization Name		Date	of	Re	eceipt								
	Mailing Address 25 N Moore St Apt 14 City	State	Zip Code		[™] 0	1	/	04	4		y y 2022	Ŷ				
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		f	Jse separate schedule(s) or each category of the Detailed Summary Page	(che	R LINE eck only 11a 13	NUMBEF v one) 11b 14		PAGE 11c	8 O		48 17					
	ny information copied from such Reports and S for commercial purposes, other than using the																
	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women																
Α.	Full Name of Individual (Last, First, Middle Ini ACTBLUE	nization Name		Date of	Receipt]							
	Mailing Address PO Box 441146					01 / D / Y Y Y Y 01 2022											
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в.	Full Name of Individual (Last, First, Middle Ini Adelson, Nancy, , , Mailing Address 25 N Moore St	tial) or Full C	Drgar	nization Name		Date of Receipt											
	City	State		Zip Code	_					2022							
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SCHEDULE A (FEC Form 3X)	
ITEMIZED RECEIPTS	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

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IT.	EMIZED RECEIPTS	-	Use separate schedule(s) for each category of the Detailed Summary Page				(check only one)								
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Ar or	ny information copied from such Reports and for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any Iddress of any political commiti	person	13 for the solicit co	purpo	se of s	oliciting	contribu	utions					
	NAME OF COMMITTEE (In Full)														
\backslash	Tri-State Maxed-Out Women														
Α.		Initial) or Full O	Prganization Name		Date of	Rece	eipt								
	Mailing Address 45 E End Aveneue Apt 9J				01 / D D / Y Y Y Y 01 16 2022										
	City New York	State NY	Zip Code 10028		Transaction ID : 3814125 Amount of Each Receipt this Period										
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<u>с</u> .	Full Name of Individual (Last, First, Middle Amdur, Shirley, , ,	Initial) or Full O	organization Name		Date of	Rece	əipt								
	Mailing Address 983 Park Ave				01	1	D D D 11	/ Y	ү ү 2022	Y					
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women Full Name of Individual (Last, First, Middle	d Statements ma the name and a	ddress of any political committe	FOR LINE NUMBER: PAGE 10 OF 48 (check only one) Image: state
A. ACTBLUE Mailing Address PO Box 441146			Date of Receipt
City West Somerville FEC ID number of contributing	State MA	Zip Code 02144-0031	Transaction ID : 3814115E Amount of Each Receipt this Period
receipt For:	Occi	0401224 upation (for Individual) duit total listed in Agg. field Year-to-Date ▼ 123005.64	Memo Item Note: Above Contribution earmarked through this organization.
Full Name of Individual (Last, First, Middle B. Aronson, Donald, , , Mailing Address 100 Sunrise Ave City Palm Beach FEC ID number of contributing federal political committee.	State FL	Zip Code 33480-3963	Date of Receipt 01 Transaction ID : 3814149 Amount of Each Receipt this Period 1100.00
Name of Employer (for Individual) Donald Aronson Consulting Receipt For: Primary General Other (specify) ▼	Exe	upation (for Individual) cutive Year-to-Date ▼ 1100.00	Memo Item * Earmarked Contribution: See Below
Full Name of Individual (Last, First, Middle ACTBLUE Mailing Address PO Box 441146 City West Somerville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State MA C COO Occu	rganization Name Zip Code 02144-0031 0401224 upation (for Individual) duit total listed in Agg. field Year-to-Date ▼ 123005.64	Date of Receipt 01 1 2022 Transaction ID : 3814149E Amount of Each Receipt this Period 1100.00 Memo Item Note: Above Contribution earmarked through this organization.

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 11 OF

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	y information copied from such Reports and Stater for commercial purposes, other than using the name														
	NAME OF COMMITTEE (In Full)														
\rangle	Tri-State Maxed-Out Women														
Α.	Full Name of Individual (Last, First, Middle Initial) Berenson, Ellen, , ,	or Full Orç	ganization Name		Date of	Re	eceipt								
	Mailing Address 233 E 48Th St				м м 01	/	D D D 17	/ Y	ү ү 2022	Y					
	3	State	Zip Code												
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	FEC ID number of contributing federal political committee.	C					-y		5000.	00					
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B.	Full Name of Individual (Last, First, Middle Initial)	or Full Orç	ganization Name		Date of	Re	eceipt								
	Mailing Address PO Box 441146				01	1	D D D 24	/ Y	y y 2022	Y					
	,	State	Zip Code					3814129							
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с.	Full Name of Individual (Last, First, Middle Initial) Bucci, Erika, , ,	or Full Orç	ganization Name		Date of	Re	eceipt								
	Mailing Address 78 Willow Ave				01	/	D D 14		y y 2022	Y					
	,	State	Zip Code					3814123							
	Larchmont	NY	10538-3520		Amount	of	Each R	eceipt th	is Period						
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the		OR LINE neck onl	12 OF	48								
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	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women														
Α.	Full Name of Individual (Last, First, Middle Init ACTBLUE	tial) or Full C	Organization Name		Date o	f Re	ceipt								
	Mailing Address PO Box 441146			01 17 2022											
	City	State	Zip Code		Transaction ID : 3814123E										
	West Somerville	MA	02144-0031	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C CO	0401224				7		5000.00)					
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	Other (specify) ▼		123005.64		Note: Above Contribution earmarked through thi organization.										
в.	Full Name of Individual (Last, First, Middle Init Cohn, Betsy, , ,	tial) or Full C	Organization Name		Date o	f Re	ceipt								
	Mailing Address 1111 Park Ave						01 04 2022								
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	New York	NY	10128-1234		Amoun	t of	Each F	Receipt this	Period						
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-	Mailing Address PO Box 441146				01	/	10		y y y 2022						
	City	State	Zip Code		Trans	sacti	on ID :	: 3814155E							
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

PAGE 13 OF

New York NY 10128-1212 Amount FEC ID number of contributing federal political committee. C Image: Committee committe	tributions from such committee.												
Tri-State Maxed-Out Women Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coller, Bobbi, , , Mailing Address 1160 Park Ave City State New York FEC ID number of contributing federal political committee.	action ID : 3814131 of Each Receipt this Period												
A. Coller, Bobbi, , , Date of Mailing Address 1160 Park Ave 01 City State Zip Code New York NY 10128-1212 FEC ID number of contributing federal political committee. C	action ID : 3814131 of Each Receipt this Period												
City State Zip Code Transa New York NY 10128-1212 Amount FEC ID number of contributing federal political committee. C Image: Contributing federal political committee	17 2022 action ID : 3814131 of Each Receipt this Period 1100.00 mo Item												
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Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1100.00													
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ACTBLUE	Date of Receipt												
Mailing Address PO Box 441146	01 24 2022												
	of Each Receipt this Period												
FEC ID number of contributing federal political committee.	1100.00												
Name of Employer (for Individual) Occupation (for Individual) Me Conduit total listed in Agg. field	mo Item												
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 123005.64	ove Contribution earmarked through this ion.												
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cotton, Betty, , ,	Receipt												
Mailing Address 10 The Xing	/ D D / Y Y Y Y 13 2022												
NV 40577	of Each Receipt this Period												
FEC ID number of contributing federal political committee.	5000.00												
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Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 5000.00													
SUBTOTAL of Receipts This Page (optional)	6100.00												

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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PAGE 14 OF

	EIVIIZED RECEIPIS		Detailed Summary Page	X	11a		11b		11c		12					
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	y information copied from such Reports and S for commercial purposes, other than using the															
\rangle	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women															
A.	Full Name of Individual (Last, First, Middle Init Denlinger, Janet, , ,	tial) or Full O	rganization Name		Date of Receipt											
	Mailing Address 9 Shore Rd			01 19 2022 Transaction ID : 3814137												
	City Edgewater	State NJ	Zip Code 07020-1519								oriod					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period												
	Name of Employer (for Individual) Matrix Biology Institute	Occi CEC	upation (for Individual))		Me	emc	o Itei	m								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	* Earmarked Contribution: See Below												
В.	Full Name of Individual (Last, First, Middle Init ACTBLUE	tial) or Full O	rganization Name		Date of	Re	eceip	ot								
	Mailing Address PO Box 441146				™ 01	1	D	24	/ Y	ү 20	22 [°]	Ŷ				
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	Name of Employer (for Individual)		upation (for Individual) duit total listed in Agg. field	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 123005.64		ote: Ab ganizat			ntribut	tion ear	mark	ked th	rough thi				
с.	Full Name of Individual (Last, First, Middle Init Dickstein Sudolsky, Marcia, , ,	tial) or Full O	rganization Name		Date of	Re	eceip	ot								
	Mailing Address 445 Park Ave FI 9				01	1		07		20	22 [°]	Y				
	City New York	State NY	Zip Code 10022-8606	A					814164 ceipt th		eriod					
	FEC ID number of contributing federal political committee.	С		Amount of Each Recei							193.5	54				
	Name of Employer (for Individual) Self		upation (for Individual) sultant		M	emo	o Ite	m								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 368.14	* Earmarked Contribution: See Below												
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SCHEDULE A	(FEC Form 3X)	
ITEMIZED REC	EIPTS	

Use separate schedule(s) (check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Wome	n								
A. ACTBLUE									
Mailing Address PO Box 441146			01 / D D / Y Y Y Y 01 2022						
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814164E						
FEC ID number of contributing federal political committee.	C co	0401224	Amount of Each Receipt this Period						
Name of Employer (for Individual)		upation (for Individual) iduit total listed in Agg. field	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 123005.64	Note: Above Contribution earmarked through thi organization.						
Full Name of Individual (Last, First, Midd B. Dickstein Sudolsky, Marcia, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 445 Park Ave FI 9			01 / D D / Y Y Y Y 01 07 2022						
City New York	State NY	Zip Code 10022-8606	Transaction ID : 3814165 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		174.60						
Name of Employer (for Individual) Self		upation (for Individual) nsultant	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 368.14	* Earmarked Contribution: See Below						
Full Name of Individual (Last, First, Midd C. ACTBLUE	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address PO Box 441146			01 / D D / Y Y Y Y Y 2022						
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814165E Amount of Each Receipt this Period						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separ for each c Detailed S
Any information copied from such Reports and Statements m	ay not be solo
or for commercial purposes, other than using the name and a	address of any

FOR LINE NUMBER: ate schedule(s)

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)						
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	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women									
<u>د</u>	Full Name of Individual (Last, First, Middle Ini Easton, Joan, , ,	tial) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 525 E 80Th St Apt 9C			01 / Y Y Y Y 01 17 2022						
	City New York	State NY	Zip Code 10075-0789	Transaction ID : 3814128 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		1100.00						
	Name of Employer (for Individual) Not Employed		pation (for Individual) Employed	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 1100.00	* Earmarked Contribution: See Below						
В.	Full Name of Individual (Last, First, Middle Ini ACTBLUE	tial) or Full Or	ganization Name	Date of Receipt						
	Mailing Address PO Box 441146			01 / Y Y Y Y 2022						
	City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814128E Amount of Each Receipt this Period						
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	Name of Employer (for Individual)		ipation (for Individual) duit total listed in Agg. field	Memo Item						
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С.	Full Name of Individual (Last, First, Middle Ini Elman, Sylvia, , ,	tial) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 655 Park Ave Apt 3A	State	Zip Code	01 / 19 / 2022 Transaction ID : 3814134						
	New York	NY	10065-5985	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		1100.00						
	Name of Employer (for Individual) Not Employed Receipt For:	Not E	pation (for Individual) Employed	Memo Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1100.00	* Earmarked Contribution: See Below						
	UBTOTAL of Receipts This Page (optional)			2200.00						

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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48

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than usi			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Wome	en								
Full Name of Individual (Last, First, Mid A. ACTBLUE	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address PO Box 441146			M M / D D / Y Y Y Y Y 01 24 2022						
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814134E Amount of Each Receipt this Period						
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Name of Employer (for Individual)		upation (for Individual) Iduit total listed in Agg. field	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 123005.64	Note: Above Contribution earmarked through th organization.						
Full Name of Individual (Last, First, Mid B. Falk, Bobbie, , ,	Date of Receipt								
Mailing Address 9745 E Honey Mesquite	e Dr		M M / D D / Y Y Y Y 01 04 2022						
City Scottsdale	State AZ	Zip Code 85262-2872	Transaction ID : 3814157 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		5000.00						
Name of Employer (for Individual) Not Employed		upation (for Individual) Employed	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	* Earmarked Contribution: See Below						
Full Name of Individual (Last, First, Mid ACTBLUE	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address PO Box 441146			01 / D D / Y Y Y Y Y 01 2022						
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SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 OF 48 (check only one)
			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women			
Full Name of Individual (Last, First, Middle A. Felsher, Celia, , ,	e Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 521 Eagle Knolls Rd			01 28 2022
City	State	Zip Code	Transaction ID : 3814150
Larchmont	NY	10538-3908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1500.00
Name of Employer (for Individual) NA	Occu Retir	pation (for Individual) ed	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	* Earmarked Contribution: See Below
Full Name of Individual (Last, First, Middle . ACTBLUE	e Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address PO Box 441146			01 31 2022
City	State	Zip Code	Transaction ID : 3814150E
West Somerville	MA	02144-0031	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C coo	401224	1500.00
Name of Employer (for Individual)		ipation (for Individual) duit total listed in Agg. field	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 123005.64	Note: Above Contribution earmarked through this organization.
Full Name of Individual (Last, First, Middle Friedman, Nancy, , ,	e Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 300 E 77Th St Apt 21B			01 13 2022
City New York	State NY	Zip Code 10075-2490	Transaction ID : 3814121 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1100.00

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TOTAL This Period (last page this line number	only)	►		-7-		-		-	

Occupation (for Individual)

1100.00

Not Employed

Aggregate Year-to-Date ▼

Name of Employer (for Individual)

General

Not Employed

Primary

Other (specify)

Receipt For:

Memo Item

* Earmarked Contribution: See Below

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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PAGE 19 OF

	EMIZED RECEIPTS			ch category of the ed Summary Page	×]11a] 11	b	11c		12					
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\rangle	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women																
Α.	Full Name of Individual (Last, First, Middle Initial) of ACTBLUE	or Full O	Irganizatio	n Name	1	Date of Receipt											
	Mailing Address PO Box 441146					м м 01	/	Γ	D D 17	/		2022	Y				
	5	State	Zip (Transaction ID : 3814121E											
	West Somerville	MA	02	144-0031	/	Amount of Each Receipt this Period											
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	Other (specify)		-	123005.64		ganiza											
<u> </u>	Full Name of Individual (Last, First, Middle Initial) of Goldstein, Deborah, , ,	or Full O	rganizatio	n Name		Date of	Re	ecei	ipt								
	Mailing Address 10 Park Ave Apt 12DE			01 11 2022													
	5	State	Zip (Code		Transaction ID : 3814116											
	New York	NY	/	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.					,				1100.0	00						
	Name of Employer (for Individual) Not Employed	Occ Not		M	emo	o Ite	em										
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Year-to-D] *'	* Earmarked Contribution: See Below												
<u>с.</u>	Full Name of Individual (Last, First, Middle Initial) of ACTBLUE	or Full O	organizatio	n Name		Date of	Re	ecei	ipt								
	Mailing Address PO Box 441146					^M 01	/		D D 17	1		2022	Y				
	5	State	Zip (Trans	acti	ion	ID : 3	38141	16E		_				
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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Mailing Address 1930 Broadway Image: City State Zip Code Transaction New York NY 10023-6938 Amount of Ea FEC ID number of contributing federal political committee. C Amount of Ea Name of Employer (for Individual) Occupation (for Individual) Memo It Not Employed Not Employed Memo It Primary General 1100.00 * Earmarked Committee Other (specify) ▼ 1100.00 Date of Rece Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Rece ACTBLUE Mailing Address PO Box 441146 Image: Memory of City	se of solicitin									
or for commercial purposes, other than using the name and address of any political committee to solicit contribution in the political committee in the political committee in the political committee. A. Hirshberg, Marjorie, , , Date of Reception in the political committee in the political committee in the political committee. Mailing Address 1930 Broadway Date of Reception in the political committee. City State Zip Code New York NY 10023-6938 FEC ID number of contributing federal political committee. C Amount of Ear Name of Employer (for Individual) Occupation (for Individual) Aggregate Year-to-Date ▼ Not Employed Aggregate Year-to-Date ▼ * Earmarked Committee B. ACTBLUE Mailing Address PO Box 441146 Date of Reception Name										
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B. ACTBLUE Date of Rece	ontribution: S	ee Below								
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West Somerville MA 02144-0031 Amount of Ea	ach Receipt t	his Period								
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	n ID : 381414	-								
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FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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		Detailed Summary Page	×			11b	11c	12							
Any information copied from such Reports and	Statemonto m	w not be sold or used by any n		13 or the		14	15	16	tions						
or for commercial purposes, other than using th															
NAME OF COMMITTEE (In Full)															
Tri-State Maxed-Out Women															
Full Name of Individual (Last, First, Middle Ir A. ACTBLUE	nitial) or Full C	rganization Name		Date of	Re	ceipt									
Mailing Address PO Box 441146				м м 01	/	31	/ Y	2022	Y						
City	State	Zip Code	- 1	Transaction ID : 3814145E											
West Somerville	MA	02144-0031	Amount of Each Receipt this Period												
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Receipt For:	Aggregate	Year-to-Date ▼													
Primary General Other (specify) ▼		123005.64		ote: Ab ganiza			ition ear	marked th	nrough th						
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Mailing Address 1050 Park Ave # 4D				™ 01	/	D D D 04	/ Y	ү ү 2022	Y						
City	State	Zip Code		Trans	acti	on ID : 3	814162								
New York	NY	10028-1031	A	mount	t of	Each Re	eceipt th	is Period							
FEC ID number of contributing federal political committee.	С			5000.00											
Name of Employer (for Individual) Not Employed		upation (for Individual) Employed		Memo Item											
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Full Name of Individual (Last, First, Middle Ir	nitial) or Full C	rganization Name		Date of	Re	reint									
Mailing Address PO Box 441146				01		10	/ Y	y y 2022	Y						
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West Somerville	MA	02144-0031	A	mount	t of	Each Re	eceipt th	is Period							
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SCHEDULE A	(FEC Form 3X)
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	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the		pose of	soliciting		ntribut	ions						
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\rangle	Tri-State Maxed-Out Women																
Α.	Full Name of Individual (Last, First, Middle Initia Lafer, Jill, , ,	al) or Full Or	ganization Name	Date of Receipt													
	Mailing Address 1060 5Th Ave # 7B				01	1	D D 04	/ Y	2() 022	Y						
	City	State NY	Zip Code		Trans	act	ion ID :	3814156									
	New York		10128-0104	Amount of Each Receipt this Period													
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В.	Full Name of Individual (Last, First, Middle Initia	al) or Full Or	ganization Name		Date of	Re	eceipt										
	Mailing Address PO Box 441146				01 10 / Y Y Y Y 01 10 2022												
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	West Somerville	MA	02144-0031	'	Amount	of	Each R	eceipt th	is P	Period							
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	Mailing Address 565 W End Ave				01	/	D D D 11	JL	20)22	Y						
	City New York	State NY	Zip Code 10024-2705					3814118									
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SCHEDULE A	(FEC Form 3X)
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17											
or for commercial purposes, other than usin			rson for the purpose of soliciting contributions to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Womer	٦													
Full Name of Individual (Last, First, Middl A. ACTBLUE	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ACTBLUE													
Mailing Address PO Box 441146			01 / Y Y Y Y Y 2022											
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814118E Amount of Each Receipt this Period											
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Full Name of Individual (Last, First, Middl B. Legow, Amy, , ,	Date of Receipt													
Mailing Address 670 W End Ave Apt 10A			01 / Y Y Y Y Y 01 11 2022											
City New York	State NY	Zip Code 10025-7328	Transaction ID : 3814119 Amount of Each Receipt this Period											
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	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose c		liciting		ntribut	ions						
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A.		or Full Or	ganization Name		D	ate of	Re	eceipt											
	Mailing Address 27 N Moore St	State	Zip Code		01 19 2022														
	New York	NY	10013-5721	Transaction ID : 3814133 Amount of Each Receipt this Period															
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	Name of Employer (for Individual) Chelseatown		pation (for Individual) Estate		Memo Item														
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or for commercial p	urposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
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Mailing Address	PO Box 441146	Otata	Zie Oode	01 / D D / Y Y Y Y 01 31 2022										
City West Somerville		State MA	Zip Code 02144-0031	Transaction ID : 3814146E Amount of Each Receipt this Period										
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Full Name of Ind B. Lipsky, Caro	lividual (Last, First, Middle , , ,	Initial) or Full O	rganization Name	Date of Receipt										
	1385 York Ave Apt 21A			01 / Y Y Y Y Y 2022										
City New York		State NY	Zip Code 10021-3908	Transaction ID: 3814114 Amount of Each Receipt this Period										
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City West Somerville		State MA	Zip Code 02144-0031	Transaction ID : 3814114E										
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			Detailed Summary Page	×	11a 13	-	11b		11c		12 16	17				
	y information copied from such Reports and State for commercial purposes, other than using the na				for the		pose		soliciting		ntribut	ions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women															
 A.	Full Name of Individual (Last, First, Middle Initial) Locker, Nancy, , ,	or Full Or	ganization Name	Date of Receipt												
	Mailing Address 983 Park Ave # 9C				01	1		D 19	/ Y	ү 20)22	Y				
	City New York	State NY	Zip Code 10028-0808		Transaction ID : 3814136 Amount of Each Receipt this Period											
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с.	Full Name of Individual (Last, First, Middle Initial) McHale, Judith, , ,	or Full Or	ganization Name		Date o	f Re	eceipt									
	Mailing Address 4657 Devon Path				^M 01	1		D4	/ Y		22 [°]	Y				
	City Royal Oak	State MD	Zip Code 21662						3814161 eceipt th		eriod					
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	Mailing Address 2 Columbus Ave Apt 26A							01 / D / Y Y Y Y 2022								
	City New York	State NY		Zip Code 10023-6929		Transaction ID : 3814127 Amount of Each Receipt this Period						od				
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$\Big\rangle$	Tri-State Maxed-Out Women														
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	City East Hampton	State NY	Zip Co 11937		-					814126					
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NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women								
Full Name of Individual (Last, First, Middle A. ACTBLUE	Initial) or Full Or	ganization Name	Date of Receipt					
Mailing Address PO Box 441146			01 / D D / Y Y Y Y Y 01 17 2022					
City	State MA	Zip Code	Transaction ID : 3814126E					
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Full Name of Individual (Last, First, Middle B. Rie, Gloria, , ,	Initial) or Full Or	ganization Name	Date of Receipt					
Mailing Address 23 Jared Dr			01 07 2022					
City	State	Zip Code	Transaction ID : 3814163					
White Plains	NY	10605-3411	Amount of Each Receipt this Period					
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Name of Employer (for Individual) Not Employed		ipation (for Individual) Employed	Memo Item					
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Full Name of Individual (Last, First, Middle C. ACTBLUE	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ACTBLUE							
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\rangle	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women															
A.	Full Name of Individual (Last, First, Middle Initia Rosensweig, Linda, , ,	al) or Full O	Drga	nization Name		Date of Receipt										
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В.	Full Name of Individual (Last, First, Middle Initia Rothchild, Jane, , ,	al) or Full O	Drga	nization Name		Date	of F	Red	ceipt							
	Mailing Address 2774 S Ocean Blvd Apt 310			1	01 / D / Y Y Y Y 2022											
	CityStateZip CodePalm BeachFL33480-5523						Transaction ID : 3814153 Amount of Each Receipt this Period									
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SCHEDULE A	(FEC Form 3X)
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
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Full Name of Individual (Last, First, Mide A. ACTBLUE	dle Initial) or Full Orga	nization Name	Date of Receipt
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City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814117E Amount of Each Receipt this Period
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Full Name of Individual (Last, First, Mide B. Salmanson, Barbara, , ,	dle Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 190 E 72Nd St		T	01 / Y Y Y Y 02022
City New York	State NY	Zip Code 10021-4370	Transaction ID : 3814132 Amount of Each Receipt this Period
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Full Name of Individual (Last, First, Mide C. ACTBLUE	dle Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address PO Box 441146			01 / Y Y Y Y Y 2022
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814132E
FEC ID number of contributing federal political committee.	C C0040		Amount of Each Receipt this Period
Name of Employer (for Individual)		tion (for Individual) t total listed in Agg. field	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 123005.64	Note: Above Contribution earmarked through this organization.
SUBTOTAL of Receipts This Page (option	al)	••••••	2000.00
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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FOR LINE NUMBER:

PAGE 32 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	en										
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Full Name of Individual (Last, First, Mi Sapery, Elisabeth, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 180 W 58Th St			M M / D D / Y Y Y Y 01 27 2022								
City New York	State NY	Zip Code 10019-2145	Transaction ID : 3814147 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) Not Employed		upation (for Individual) Employed	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	* Earmarked Contribution: See Below								
Full Name of Individual (Last, First, Mi B. ACTBLUE	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address PO Box 441146			01 31 2022								
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814147E Amount of Each Receipt this Period								
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Name of Employer (for Individual)		upation (for Individual) Iduit total listed in Agg. field	Memo Item								
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Full Name of Individual (Last, First, Mi C. Sarnoff, Rosita, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 180 W 58Th St			01 / 27 / 2022								
City New York	State NY	Zip Code 10019-2145	Transaction ID : 3814148 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		1100.00								
Name of Employer (for Individual) None		upation (for Individual) Employed	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1100.00	* Earmarked Contribution: See Below								
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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48

ITEMIZED RECEIPTS		ategory of the ummary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women												
Full Name of Individual (Last, First, Middle A. ACTBLUE	Date of Receipt											
Mailing Address PO Box 441146			01 31 Y Y Y Y 0222									
City	State Zip Code		Transaction ID : 3814148E									
West Somerville	MA 02144-0	0031	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C C00401224		1100.00									
Name of Employer (for Individual)	Occupation (for In Conduit total listed	,	Memo Item									
Receipt For:												
Other (specify) ▼		123005.64	Note: Above Contribution earmarked through this organization.									
Full Name of Individual (Last, First, Middle B. Shor, Nancy, G., ,	Initial) or Full Organization Na	ame	Date of Receipt									
Mailing Address 242 E 48Th St												
City	State Zip Code)	Transaction ID : 3814138									
New York	NY 10017-1	567	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		1100.00									
Name of Employer (for Individual) Binder&Binder Law Firm	Occupation (for In Lawyer	idividual)	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1100.00	* Earmarked Contribution: See Below									
Full Name of Individual (Last, First, Middle C. ACTBLUE	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name											
Mailing Address PO Box 441146	Mailing Address PO Box 441146											
City	State Zip Code		Transaction ID : 3814138E									
West Somerville	MA 02144-0	0031	Amount of Each Receipt this Period									
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Name of Employer (for Individual)	Conduit total listed in Agg. field											
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	123005.64	Note: Above Contribution earmarked through the organization.									
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 34 OF

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	y information copied from such Reports and for commercial purposes, other than using the																	
\backslash	NAME OF COMMITTEE (In Full)																	
$\Big/$	Tri-State Maxed-Out Women																	
A.	Full Name of Individual (Last, First, Middle In Shufro, Marlene, , ,	nitial) or Full O	rganization Name		Date of Receipt													
	Mailing Address 10 E 70Th St Apt 3C		01 / D D / Y Y Y Y 2022															
	City New York	State NY	Zip Code 10021-5246	-	Transaction ID : 3814135													
	FEC ID number of contributing	C	10021-3240		Amount of Each Receipt this Period 1500.00													
	federal political committee.				Memo Item													
	Name of Employer (for Individual) Not Employed		upation (for Individual) Employed		M	emc	o Iter	n										
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	Primary General Other (specify) ▼		1500.00		* Earmarked Contribution: See Below													
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name						Date of Receipt											
	Mailing Address PO Box 441146		01 24 2022															
	City	State	Zip Code		Transaction ID : 3814135E													
	West Somerville	MA	02144-0031		Amount	t of	Each	h Re	ceipt th	is P	'eriod							
	FEC ID number of contributing federal political committee.	° C004040204								1500.00								
	Name of Employer (for Individual)		upation (for Individual) nduit total listed in Agg. field		Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 123005.64		Note: Above Contribution earmarked through this organization.													
С.	Full Name of Individual (Last, First, Middle In Smokler, Carol, , ,	nitial) or Full O	rganization Name		Date of	f Re	eceip	t										
	Mailing Address 2424 N Federal Hwy		01 13 2022															
	City	State	Zip Code		Trans	sact	ion I	D : 3	814120)								
	Boca Raton	FL	33431-7735		Amount	t of	Each	h Re	ceipt th	is P	'eriod							
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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48

TIEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Wome	en									
Full Name of Individual (Last, First, Mide A. ACTBLUE	Date of Receipt									
Mailing Address PO Box 441146			01 17 Y Y Y Y 2022							
City	State	Zip Code	Transaction ID : 3814120E							
West Somerville	MA	02144-0031	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C coo	0401224	1500.00							
Name of Employer (for Individual)		upation (for Individual) duit total listed in Agg. field	X Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
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Full Name of Individual (Last, First, Mide B. Sternheim, Sharon, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1020 Park Ave										
# 17C			01 28 2022							
City	State	Zip Code	Transaction ID : 3814151							
New York	NY	10028-0913	Amount of Each Receipt this Period							
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Mailing Address PO Box 441146										
City	State	Zip Code	Transaction ID : 3814151E							
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FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

PAGE 36 OF

ITEMIZED RECEIPTS			Use separate schedule(s)			(check only one)										
			for each category of the Detailed Summary Page					11b	11c		12					
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	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women															
Full Name of Individual (Last, First, Middle Initial) or A. Ubelhart, Karen, , ,				nization Name		Date o	of Re	eceipt								
	Mailing Address 800 W End Ave Apt 7A			01 09 2022												
	City New York	State NY		Zip Code 10025-5467	-			t ion ID : Each F			eriod	_				
	FEC ID number of contributing federal political committee.	С				<u> </u>					5000.0	0				
	Name of Employer (for Individual) Bloomberg LP			tion (for Individual) 7 Analyst		М	lem	o Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00				* Earmarked Contribution: See Below										
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ACTBLUE						of Re	eceipt								
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	City	State		Zip Code				ion ID :								
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<u> </u>	Full Name of Individual (Last, First, Middle Initia Weiner, Shari, , ,	al) or Full O	rgar	nization Name		Date o	of Re	eceipt								
	Mailing Address 30 E 81St St Apt 3E						01 25 2022									
	City New York	State NY		Zip Code 10028-0247	-			tion ID		-) e vi e el					
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Stribling			Occupation (for Individual) Real Estate Broker				lem	o Item								
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 37 OF

			Detailed Summary Page	×			11b	11c		12				
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1	NAME OF COMMITTEE (In Full)													
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_	Mailing Address 350 W 57Th St Apt 18C				^M 01	1	D D 24	/ Y	ү 2	ү 022	Y			
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_	Mailing Address 136 Arcadia Dr	1			^M 01	/	D D 17	/ Y) 222	Y			
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 38 OF

			Detailed Summary Page	×	11a 13		11 14		11c 15	\vdash	12 16	17
	y information copied from such Reports and Statem for commercial purposes, other than using the nam				or the				olicitin		ntributi	ons
\rangle	NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women											
A.	Full Name of Individual (Last, First, Middle Initial) o	rganization Name		Date of	Re	ecei	ipt					
	Mailing Address PO Box 441146	tate	Zip Code		01		L	24	/ Y	1.00	022	Y
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	Name of Employer (for Individual)	Occ	upation (for Individual)		Me	emo	o Ite	em				
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s)

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PAGE 39 OF

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17							
			e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Middle Cohn, Betsy, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 1111 Park Ave			M M / D D / Y Y Y Y 01 04 2022							
City New York	State NY	Zip Code 10128-1234	Transaction ID : 3814011 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		1000.00							
Name of Employer (for Individual) Not Employed		upation (for Individual) Employed	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	* Earmarked Contribution: See Below							
Full Name of Individual (Last, First, Middle ACTBLUE	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address PO Box 441146			M M / D D / Y Y Y Y 01 10 2022							
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814011E Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C co	0401224	1000.00							
Name of Employer (for Individual)		cupation (for Individual) Induit total listed in Agg. field	X Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 123005.64	Note: Above Contribution earmarked through this organization.							
Full Name of Individual (Last, First, Middle JOHNSON, FREDA, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 1050 Park Ave # 4D			M M / D D / Y Y Y Y 01 04 2022							
City New York	State NY	Zip Code 10028-1031	Transaction ID : 3814009 Amount of Each Receipt this Period							
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Name of Employer (for Individual) Not Employed		upation (for Individual) Employed	Memo Item							
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Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women			e to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle A. ACTBLUE Mailing Address PO Box 441146	Initial) or Full C	Organization Name	Date of Receipt
City West Somerville	State MA	Zip Code 02144-0031	01 10 2022 Transaction ID : 3814009E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C CO	0401224	1000.00
Name of Employer (for Individual)		cupation (for Individual) nduit total listed in Agg. field	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 123005.64	Note: Above Contribution earmarked through this organization.
Full Name of Individual (Last, First, Middle B. Lafer, Jill, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 1060 5Th Ave #7B			01 / D D / Y Y Y Y 0222
City New York	State NY	Zip Code 10128-0104	Transaction ID : 3713572 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		5000.00
Name of Employer (for Individual) Not Employed		cupation (for Individual) t Employed	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	* Earmarked Contribution: See Below Non contribution account
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Primary

Other (specify)

General

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X				
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women						
Full Name of Individual (Last, First, Middle In A. McHale, Judith, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 4657 Devon Path		M M / D D / Y Y Y Y 01 04 2022				
City Royal Oak	StateZip CodeMD21662	Transaction ID : 3814010 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	5000.00				
Name of Employer (for Individual) Cane Investments LLC	Occupation (for Individual) President And CEO	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	* Earmarked Contribution: See Below Non Contributi Account				
Full Name of Individual (Last, First, Middle II ACTBLUE	nitial) or Full Organization Name	Date of Receipt				
Mailing Address PO Box 441146	01 / Y Y Y Y 01 2022					
City West Somerville	StateZip CodeMA02144-0031	Transaction ID : 3814010E Amount of Each Receipt this Period				
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Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 123005.64	Note: Above Contribution earmarked through this organization.				
Full Name of Individual (Last, First, Middle In C. Ubelhart, Karen, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 800 W End Ave Apt 7A		01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City New York	StateZip CodeNY10025-5467	Transaction ID : 3814008 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	2000.00				
Name of Employer (for Individual) Bloomberg LP	Occupation (for Individual) Industry Analyst	Memo Item				
Receipt For: Primary General Other (specify)	Primary General Agglegate Teal-to-Date V					
SUBTOTAL of Receipts This Page (optional)	·	7000.00				
TOTAL This Period (last page this line numbe	r only)					

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 42 OF

		Use separate schedule(s) for each category of the	(check only one)									
		Detailed Summary Page	11a 11b 11c 12 13 14 15 16 ✗ 17									
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women												
Full Name of Individual (Last, First, Middle A. ACTBLUE	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address PO Box 441146			M M / D D / Y Y Y Y Y 01 10 2022									
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : 3814008E Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C co	0401224	2000.00									
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City	State	Zip Code	Amount of Each Receipt this Period									
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Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date]									
Full Name of Individual (Last, First, Middle C.	Initial) or Full C	Prganization Name	Date of Receipt									
Mailing Address												
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Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date]									
SUBTOTAL of Receipts This Page (optional).			0.00									
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S	CHEDULE B (FEC Form 3X)			F	OR L	NE N	NUMBER: PAGE 43 OF 48						
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		heck	only	one)						
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\square	NAME OF COMMITTEE (In Full)												
	Tri-State Maxed-Out Women												
Α.	Full Name (Last, First, Middle Initial) ActBlue Technical Services		Date of Disbursement										
	Mailing Address PO Box 441146						FEC Identification Number						
	City West Somerville	State MA	Zip Code 02144-0031										
	Purpose of Disbursement PAC Credit Card Processing Fee					1	C C00401224 Transaction ID : 500109833						
	Candidate Name				egory ype	/	Amount of Each Disbursement this Period						
	Office Sought: House Disburse Senate President	ement For: Primary	General				1638.01						
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B.	Full Name (Last, First, Middle Initial) ActBlue Technical Services						Date of Disbursement						
	Mailing Address PO Box 441146						01 / D D / Y Y Y Y 01 18 2022						
	City West Somerville	State MA	· · ·				FEC Identification Number						
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	Candidate Name			Category/ Type			Amount of Each Disbursement this Period						
	Senate	Senate Primary General					917.89						
	State: District:	Other (spec	city)				Memo Item						
C.	Full Name (Last, First, Middle Initial) ActBlue Technical Services		Date of Disbursement										
	Mailing Address PO Box 441146				01 / D D / Y Y Y Y 224 / 2022								
	City West Somerville	State MA	Zip Code 02144-0031				FEC Identification Number						
	Purpose of Disbursement PAC Credit Card Processing Fee]	C C00401224 Transaction ID : 500109835									
	Candidate Name	/	Amount of Each Disbursement this Period										
	Senate						1078.35						
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s	UBTOTAL of Disbursements This Page (optional)						3634.25						
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SCHEDULE B (FEC Form 3X)			FOF	RLINE	NUMBER: PAGE 44 OF 48					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(che	ck only	r one)					
		Summary Page		21b 28a	22 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na				ny perso	on for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)										
Tri-State Maxed-Out Women										
Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement								
Mailing Address PO Box 441146					FEC Identification Number					
City West Somerville	State MA	Zip Code 02144-0031								
Purpose of Disbursement PAC Credit Card Processing Fee	<u> </u>				C C00401224					
Candidate Name			Categ Typ		Transaction ID : 500109836 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate	ement For: Primary	General			671.50					
State: District:	President Other (specify)									
Full Name (Last, First, Middle Initial)										
B. Dickstein Sudolsky, Marcia, , ,					Date of Disbursement					
Mailing Address 445 Park Ave FI 9					01 01 2022					
City New York	State NY	Zip Code 10022-8606			FEC Identification Number					
Purpose of Disbursement PAC Administration Services	Purpose of Disbursement									
Candidate Name	Candidate Name Categ									
Office Sought: House Disburse	ement For: Primary	General			4166.50					
State: District:	President Other (specify)									
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)									
C. Dickstein Sudolsky, Marcia, , ,					Date of Disbursement					
Mailing Address 445 Park Ave FI 9	-									
City New York	ew York NY 10022-8606									
Purpose of Disbursement PAC Reimbursement	C Transaction ID : 500109913									
Candidate Name	e Name Category/ Type									
Office Sought: House Disburse Senate										
State: District:		Memo Item								
SUBTOTAL of Disbursements This Page (optional)					5008.71					
TOTAL This Period (last page this line number only	y)			🕨						

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Full) Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) A. Dickstein Sudolsky, Marcia, , , Mailing Address 445 Park Ave F19 City New York Pac of Disbursement PAC Administration Services Cardidate Name Office Sought: House State: District: District: Purpose of Disbursement Por: State: District: Purpose of Disbursement For: State: Disbursement For: </th <th colspan="3">SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS</th> <th>for each o</th> <th colspan="3">Use separate schedule(s) for each category of the Detailed Summary Page</th> <th></th> <th colspan="4">NUMBER: / one) 22 23 26 27 28b 28c 29 30b</th>	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS			for each o	Use separate schedule(s) for each category of the Detailed Summary Page				NUMBER: / one) 22 23 26 27 28b 28c 29 30b								
A. Dickstein Sudolsky, Marcia, , , Date of Disbursement Mailing Address 445 Park Ave City Purpose of Disbursement PAC Printing Candidate Name Category City Senate Presolent Disbursement Proces of Disbursement Presolent Category Other (specify) ▼ Office Sought: House Disbursement Disbursement Presolent Disbursement B. Symmetry Lithographers LTD Date of Disbursement Mailing Address 40 Skyline Dr City State Office Sought: House Pac Printing Category Gandidate Name Category Office Sought: House Disbursement Cr PAC Printing Category Gandidate Name Disbursement For: Office Sought: House Disbursement Disbursement For: Pact Printing Category Gandidate Name Disbursement For: President Disbursement For: Purpose of Disbursement <t< th=""><th>or for</th><th>r commercial pu AME OF COMM</th><th>rposes, other than u</th><th>sing the nai</th><th></th><th></th><th></th><th>any p</th><th>persor</th><th>n for the</th><th></th><th>oose</th><th></th><th>olicitir</th><th></th><th>ntributi</th><th></th></t<>	or for	r commercial pu AME OF COMM	rposes, other than u	sing the nai				any p	persor	n for the		oose		olicitir		ntributi	
New York NY 1022-8606 Purpose of Disbursement President Office Sought: House District: Disbursement For: President Disbursement For: District: Disbursement Full Name (Last, First, Middle Initial) B. Symmetry Lithographers LTD Mailing Address Candidate Name Office Sought: House PAC Administration Office Sought: House Disbursement PAC Paining Candidate Name Office Sought: House Pace Admines Other (specify) Tate of Disbursement PAC Paining Candidate Name Office Sought: House Disbursement Forl Name (Last, First, Middle Initial) Ct Candidate Name Office Sought: House Disbursement City Purpose of Disbursement City Purpose of Disbursement Of	A. C	Full Name (Last, First, Middle Initial) Dickstein Sudolsky, Marcia, , , Mailing Address 445 Park Ave									M M / D D / Y Y Y Y						
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Sherman CT 06784-2141 Purpose of Disbursement PAC Printing Candidate Name Category/ Type Office Sought: House President Disbursement For: President Other (specify) Date of Disbursement City Purpose of Disbursement Candidate Name Candidate Name Candidate Name Category/ Type Transaction ID: 500109858 Amount of Each Disbursement this Period Memo Item Et control (Specify) Date of Disbursement City State Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Purpose of Disbursement Category/ Type Office Sought: House Disbursement For: President State: Disbursement For: Disbursement For: Senate President Other (specify) State: Disbursement For: Disbursement For: Disbursement F	B. S	Symmetry Lithographers LTD								M M / D D / Y Y Y Y Y						Ŷ	
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Interface of the Detailed Summary Page 21b 22 23c 26 27 37	SCHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)	FOR LINE (check only									
ar 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-OutKorn Full Name (Last, First, Middle Initial) Cardidate Name Candidate Name Category/ Diffice Sought: Full Name (Last, First, Middle Initial) B. Full Name (Last, First, Middle Initial) Category: City Purpose of Disbursement Candidate Name Category: City Full Name (Last, First, Middle Initial) Category: City Full Name (Last, First, Middle Initial) Category: City Full Name Category: City Full Name Category: Category: City Full Name Category: Categ	II EINIIZED DIƏDURƏEINIEN 13			21b	22								
Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) A. KATHY MANNING FOR CONGRESS Mailing Address PO Box 41197 City Cardidate Name MAINING, KATHY, , , , Office Sought: House Disbursement Propose of Disbursement Propose of Disbursement Category/ Mailing Address City Full Name (Last, First, Middle Initial) B. Mailing Address City Purpose of Disbursement Category/ Transaction Number Category/ Verpose of Disbursement Category/ Total Category/ Verpose of Disbursement Category/ Office Sought: House Disbursement For: Office Sought: House Disbursement City State Purpose of Disbursement City State Purpose of Disbursement City State Purpose of Disbursement <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>													
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Greensboro NC 27404-1197 Purpose of Disbursement Category/ Transaction Dis : 50019853 MANNING, KATHY, , , Office Sought: A House Office Sought: Senate Disbursement For: 2022 Purpose of Disbursement Other (specify) V Mailing Address Disbursement For: 21p Code City State: Disbursement For: Purpose of Disbursement Disbursement For: Category/ Office Sought: House Disbursement For: Purpose of Disbursement Disbursement For: President Candidate Name Disbursement For: Category/ Office Sought: House Disbursement For: Mailing Address City State Disbursement For: Memo Item Purpose of Disbursement Other (specify) Memo Item Memo Item Full Name (Last, First, Middle Initial) Category/ Memo Item Memo Item City State Zip Code FEC Identification Number City State Zip Code FEC Identification Number City State Zip		-											
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Senate Primary General President Other (specify) ▼ Memo Item		Amount of Each Disbursement this Period											
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SCHEDULE B (FEC Form 3X)			FO	R LINE	NUMBER: PAGE 47 OF 48				
ITEMIZED DISBURSEMENTS	Use separ for each c Detailed S		eck only 21b 28a	7 one) 22 23 26 27 28b 28c x 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women									
Full Name (Last, First, Middle Initial) A. ActBlue Technical Services Mailing Address PO Box 441146		Date of Disbursement							
City West Somerville	State MA	Zip Code 02144-0031			FEC Identification Number				
Purpose of Disbursement Non Contribution Account PAC Credit Card Proces		02144-0031		Π	C C00401224 Transaction ID : 500109832				
Candidate Name ActBlue Technical Services Office Sought: House Disburse	ment For:		Cateo Typ		Amount of Each Disbursement this Period				
State: District:	Senate Primary General President Other (specify) ▼								
Full Name (Last, First, Middle Initial) B. Dickstein Sudolsky, Marcia, , ,					Date of Disbursement				
Mailing Address 445 Park Ave FI 9	01.1				01 01 2022				
New York Purpose of Disbursement	Purpose of Disbursement Non Contribution Account PAC Administration Services								
	ment For: Primary	General	Cateo Typ		Amount of Each Disbursement this Period 4166.50				
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Full Name (Last, First, Middle Initial) C. Dickstein Sudolsky, Marcia, , ,		Date of Disbursement							
Mailing Address 445 Park Ave FI 9					01 / 25 / Y Y Y Y 2022				
City New York Purpose of Disbursement	_	FEC Identification Number							
Non Contribution Account PAC Administration Serv	gory/ be	Transaction ID : 500109912 Amount of Each Disbursement this Period							
Office Sought: House Disburse Senate President District:	ment For: Primary Other (speci		1042.00 Memo Item						
SUBTOTAL of Disbursements This Page (optional)					5761.50				
TOTAL This Period (last page this line number only									

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 48 OF 48 (check only one)							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b							
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women										
Full Name (Last, First, Middle Initial) A. Dickstein Sudolsky, Marcia, , ,		Date of Disbursement								
Mailing Address 445 Park Ave FI 9			01 25 2022							
City New York Purpose of Disbursement	State Zip Code NY 10022-8606		FEC Identification Number							
Non Contribution Account PAC Reimbursement		Cotogony	C Transaction ID : 500109914 Amount of Each Disbursement this Period							
Office Sought: House Disburser	ment For:	Category/ Type	170.71							
President	Primary General Other (specify) v		Memo Item							
State: District: Full Name (Last, First, Middle Initial) B. Symmetry Lithographers LTD			Date of Disbursement							
Mailing Address 40 Skyline Dr			01 / D D / Y Y Y Y 01 11 2022							
Sherman	State Zip Code CT 06784-2141		FEC Identification Number							
Purpose of Disbursement Non Contribution Account PAC Printing Candidate Name		Category/	C Transaction ID : 500109860 Amount of Each Disbursement this Period							
	ment For: Primary General Other (specify)	Туре	478.45 Memo Item							
State: District:										
C.			Date of Disbursement							
Mailing Address	Chaine Zin Condo									
City S Purpose of Disbursement	State Zip Code		FEC Identification Number							
Candidate Name		Category/	Amount of Each Disbursement this Period							
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	President Other (specify)									
SUBTOTAL of Disbursements This Page (optional)		····· >	649.16							
TOTAL This Period (last page this line number only))	····· ►	6410.66							