

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Tri-State Maxed-Out Women

ADDRESS (number and street) **910 17th St NW Ste 925**
 Check if different than previously reported. (ACC) **Washington DC 20006**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00488387 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2020 through / / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Dickstein Sudolsky, Marcia, , ,
Type or Print Name of Treasurer

Signature of Treasurer Dickstein Sudolsky, Marcia, , , [Electronically Filed] Date / / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Tri-State Maxed-Out Women

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="38163.07"/>	<input type="text" value="38163.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="59547.14"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15070.75"/>	<input type="text" value="401988.40"/>
(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="74617.89"/>	<input type="text" value="440151.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15270.98"/>	<input type="text" value="380804.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="59346.91"/>	<input type="text" value="59346.91"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: / / 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).....	9275.00	360722.50
(ii) Unitemized	0.00	1005.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9275.00	361727.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9275.00	361727.50
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).....	195.13	528.27
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	5600.62	39732.63
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)).....▶	15070.75	401988.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15070.75	401988.40

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	5963.75	111582.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5963.75	111582.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 2500.00	240500.00
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	5000.00	12200.00
(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)).....	5000.00	12200.00
29. Other Disbursements (Including Non-Federal Donations).....	6807.23	16522.38
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)) ..	15270.98	380804.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15270.98	380804.56

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)	9275.00	361727.50
34. Total Contribution Refunds (from Line 28(d))	5000.00	12200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4275.00	349527.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5963.75	111582.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	195.13	528.27
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5768.62	111053.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Allen, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 E End Ave
 Apt 9J
 City New York State NY Zip Code 10028-7982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2020
Transaction ID : 3359373
 Amount of Each Receipt this Period
 1100.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 11275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2020
Transaction ID : 3359373E
 Amount of Each Receipt this Period
 1100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Englehardt-Lautenberg, Bonnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 Park Ave
 City New York State NY Zip Code 10065-8166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Photographer/Investor
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2020
Transaction ID : 3359377
 Amount of Each Receipt this Period
 1100.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : 3359377E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Goldstein, Deborah, , ,

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

Mailing Address 10 Park Ave
Apt 12DE

City New York	State NY	Zip Code 10016-4338
------------------	-------------	------------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2020

Transaction ID : 3359372

Amount of Each Receipt this Period
1100.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2020

Transaction ID : 3359372E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. 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 ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2020

Transaction ID : 3359375

Amount of Each Receipt this Period
1100.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2020

Transaction ID : 3359375E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 214 Duffield St
Apt 31A

City Brooklyn State NY Zip Code 11201-7017

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

Name of Employer (for Individual) **Not Employed** Occupation (for Individual) **Not Employed**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2020

Transaction ID : 3359371

Amount of Each Receipt this Period
37.50

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	1137.50
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 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2020

Transaction ID : 3359371E

Amount of Each Receipt this Period
37.50

Memo Item

Note: Above Contribution earmarked through this organization.

B. Mandle, Linda, , ,

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

Mailing Address 22 E 88Th St
STR3ET

City New York	State NY	Zip Code 10128-0509
------------------	-------------	------------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2020

Transaction ID : 3359374

Amount of Each Receipt this Period
1100.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2020

Transaction ID : 3359374E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Martell, Miranda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Willoughby St
Apt 3D

City Brooklyn State NY Zip Code 11201-4921

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

Name of Employer (for Individual) Framestore Occupation (for Individual) Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 14 / 2020
Transaction ID : 3359376

Amount of Each Receipt this Period 37.50

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 11275.00

Date of Receipt 12 / 21 / 2020
Transaction ID : 3359376E

Amount of Each Receipt this Period 37.50

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 19 E 88Th St

City New York State NY Zip Code 10128-0557

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

Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 12 / 04 / 2020
Transaction ID : 3359370

Amount of Each Receipt this Period 1100.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	1137.50
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 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2020

Transaction ID : 3359370E

Amount of Each Receipt this Period
1100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Smokler, Carol, , ,

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

Mailing Address 2424 N Federal Hwy Ste 454

City Boca Raton	State FL	Zip Code 33431-7746
--------------------	-------------	------------------------

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 ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2020

Transaction ID : 3359369

Amount of Each Receipt this Period
1500.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2020

Transaction ID : 3359369E

Amount of Each Receipt this Period
1500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

Mailing Address 1150 Park Ave
Apt 16F

City New York State NY Zip Code 10128-1244

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2020

Transaction ID : 3362475

Amount of Each Receipt this Period
1100.00

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	9275.00

**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 13 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

Mailing Address 700 Park Ave

City New York	State NY	Zip Code 10021-0104
------------------	-------------	------------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2020

Transaction ID : 3354934

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below Non Contribution Account

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2020

Transaction ID : 3354934E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 10 The Xing

City Purchase	State NY	Zip Code 10577
------------------	-------------	-------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) NFP Consultant
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2020

Transaction ID : 3359444

Amount of Each Receipt this Period
2500.00

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: (check only one)	PAGE 14 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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. Kasner, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 784 Park Ave
 City New York State NY Zip Code 10021-3553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 12 / 24 / 2020
Transaction ID : 3359368
 Amount of Each Receipt this Period 1100.00
 Memo Item
 * Earmarked Contribution: See Below Non Contribution Account

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11275.00

Date of Receipt 12 / 31 / 2020
Transaction ID : 3359368E
 Amount of Each Receipt this Period 1100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 31 / 2020
Transaction ID : 3354935
 Amount of Each Receipt this Period 1000.00
 Memo Item
 * Earmarked Contribution: See Below Non Contribution Account

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

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

A. ACTBLUE

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2020

Transaction ID : 3354935E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	5600.00

**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

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

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500099283

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500099284

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500099285

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 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

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

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2020

FEC Identification Number

C C00401224

Transaction ID : 500099286

Amount of Each Disbursement this Period

44.94

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2020

FEC Identification Number

C C00401224

Transaction ID : 500099287

Amount of Each Disbursement this Period

43.45

Memo Item

Full Name (Last, First, Middle Initial)

C. Chase Bank

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement
PAC Bank Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2020

FEC Identification Number

C

Transaction ID : 500099290

Amount of Each Disbursement this Period

15.00

Memo Item

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

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

103.39

**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

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. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2020

FEC Identification Number: C

Transaction ID : 500099291

Amount of Each Disbursement this Period: 25.00

Memo Item

B. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2020

FEC Identification Number: C

Transaction ID : 500099292

Amount of Each Disbursement this Period: 15.00

Memo Item

C. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 270 Park Ave

City New York State NY Zip Code 10017-2014

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 14 / 2020

FEC Identification Number: C

Transaction ID : 500099293

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

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

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

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
PAC Bank Fees

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
12			21			2020			

FEC Identification Number

C []

Transaction ID : 500099294

Amount of Each Disbursement this Period

[] 15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Cook Political Report

Mailing Address 600 New Hampshire Ave NW

City
Washington

State
DC

Zip Code
20037-2403

Purpose of Disbursement
PAC Subscription

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
12			14			2020			

FEC Identification Number

C []

Transaction ID : 500099295

Amount of Each Disbursement this Period

[] 35.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Katherine, Jesslyn, , ,

Mailing Address 214 Duffield St
Apt 31A

City
Brooklyn

State
NY

Zip Code
11201-7017

Purpose of Disbursement
PAC Administration 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
11			24			2020			

FEC Identification Number

C []

Transaction ID : 500099299

Amount of Each Disbursement this Period

[] 600.00

Memo Item

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

[] 650.00

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

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

Full Name (Last, First, Middle Initial)

A. Katherine, Jesslyn, , ,

Mailing Address 214 Duffield St
Apt 31A

City
Brooklyn

State
NY

Zip Code
11201-7017

Purpose of Disbursement
PAC Administration Services

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
12			23			20			

FEC Identification Number

C []

Transaction ID : 500099300

Amount of Each Disbursement this Period

[] 600.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Monize, Rebekah, , ,

Mailing Address 815 Gravesend Neck Rd
Apt LD

City
Brooklyn

State
NY

Zip Code
11223-5506

Purpose of Disbursement
PAC Administration Services

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
12			23			20			

FEC Identification Number

C []

Transaction ID : 500099311

Amount of Each Disbursement this Period

[] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Political Compliance Management Services, LLC

Mailing Address 910 17Th St NW Ste 925

City
Washington

State
DC

Zip Code
20006-2641

Purpose of Disbursement
PAC Accounting Services

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
12			28			20			

FEC Identification Number

C []

Transaction ID : 500099308

Amount of Each Disbursement this Period

[] 1533.23

Memo Item

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

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

[] 2358.23

[]

**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

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

Full Name (Last, First, Middle Initial) A. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 11 / 24 / 2020	
Mailing Address 445 Park Ave FI 9		FEC Identification Number C [] Transaction ID : 500099304 Amount of Each Disbursement this Period [] 2000.00	
City New York	State NY	Zip Code 10022-8606	Category/ Type []
Purpose of Disbursement PAC Event Staffing		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 11 / 27 / 2020	
Mailing Address 445 Park Ave FI 9		FEC Identification Number C [] Transaction ID : 500099307 Amount of Each Disbursement this Period [] 227.95	
City New York	State NY	Zip Code 10022-8606	Category/ Type []
Purpose of Disbursement Reimbursement for postage/shipping-See below if itemized		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Federal Express		Date of Disbursement MM / DD / YYYY 11 / 27 / 2020	
Mailing Address 842 Shady Grove Rd S		FEC Identification Number C [] Transaction ID : 500099306 Amount of Each Disbursement this Period [] 136.29	
City Memphis	State TN	Zip Code 38120-4114	Category/ Type []
Purpose of Disbursement PAC Shipping Costs		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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2227.95
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

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. Teitelbaum, Siena, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 115 E 86Th St
Apt 71

City New York State NY Zip Code 10028-1057

Purpose of Disbursement PAC Administration Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 23 / 2020

FEC Identification Number: C
Transaction ID : 500099314
Amount of Each Disbursement this Period: 250.00

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 27 / 2020

FEC Identification Number: C
Transaction ID : 500099315
Amount of Each Disbursement this Period: 13.31

Memo Item

C. Zoom

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Blvd
FI 6

City San Jose State CA Zip Code 95113-1608

Purpose of Disbursement PAC Conference Call Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 01 / 2020

FEC Identification Number: C
Transaction ID : 500099316
Amount of Each Disbursement this Period: 15.35

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	278.66
TOTAL This Period (last page this line number only).....▶	5907.77

**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

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

Full Name (Last, First, Middle Initial)

A. GINA ORTIZ JONES FOR CONGRESS

Mailing Address PO Box 769261

City
San Antonio

State
TX

Zip Code
78245-9261

Purpose of Disbursement
Void of lost check; contribution made on 10/5/2020

Candidate Name
JONES, GINA, ORTIZ, ,

Office Sought: House
 Senate
 President
State: TX District: 23

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C C00652297

Transaction ID : 500099296
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
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

– 2500.00

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

– 2500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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. Locker, Nancy, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 983 Park Ave # 9C

City New York State NY Zip Code 10028-0808

Purpose of Disbursement Contribution refund from Non Contribution Account made on 09/20/2020

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 31 / 2020

FEC Identification Number: C

Transaction ID : 500098605

Amount of Each Disbursement this Period: 5000.00

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) ▼

Date of Disbursement: MM / DD / YYYY

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) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 12 / 01 / 2020
Mailing Address PO Box 441146		FEC Identification Number C 000401224 Transaction ID : 500099281
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Non Contribution Account PAC Credit Card Processing Fee		Amount of Each Disbursement this Period 39.50
Candidate Name ActBlue Technical Services		Memo Item <input type="checkbox"/>
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 12 / 01 / 2020
Mailing Address PO Box 441146		FEC Identification Number C 000401224 Transaction ID : 500099282
City West Somerville	State MA	Zip Code 02144-0031
Purpose of Disbursement Non Contribution Account PAC Credit Card Processing Fee		Amount of Each Disbursement this Period 39.50
Candidate Name ActBlue Technical Services		Memo Item <input type="checkbox"/>
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Katherine, Jesslyn, , ,		Date of Disbursement MM / DD / YYYY 11 / 24 / 2020
Mailing Address 214 Duffield St Apt 31A		FEC Identification Number C Transaction ID : 500099297
City Brooklyn	State NY	Zip Code 11201-7017
Purpose of Disbursement Non Contribution Account PAC Administration Services		Amount of Each Disbursement this Period 600.00
Candidate Name		Memo Item <input type="checkbox"/>
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:	Category/Type	

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

679.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Katherine, Jesslyn, , ,

Mailing Address 214 Duffield St
Apt 31A

City Brooklyn State NY Zip Code 11201-7017

Purpose of Disbursement
Non Contribution Account PAC Administration Services

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500099298
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Monize, Rebekah, , ,

Mailing Address 815 Gravesend Neck Rd
Apt LD

City Brooklyn State NY Zip Code 11223-5506

Purpose of Disbursement
Non Contribution Account PAC Administration Services

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500099310
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Political Compliance Management Services, LLC

Mailing Address 910 17Th St NW Ste 925

City Washington State DC Zip Code 20006-2641

Purpose of Disbursement
Non Contribution Account PAC Accounting Services

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500099309
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 11 / 24 / 2020
Mailing Address 445 Park Ave FI 9		FEC Identification Number C Transaction ID : 500099302 Amount of Each Disbursement this Period 3250.00
City New York	State NY	
Purpose of Disbursement Non Contribution Account PAC Administration 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 / 24 / 2020
Mailing Address 445 Park Ave FI 9		FEC Identification Number C Transaction ID : 500099303 Amount of Each Disbursement this Period 250.00
City New York	State NY	
Purpose of Disbursement Non Contribution Account 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. Teitelbaum, Siena, , ,		Date of Disbursement MM / DD / YYYY 12 / 23 / 2020
Mailing Address 115 E 86Th St Apt 71		FEC Identification Number C Transaction ID : 500099313 Amount of Each Disbursement this Period 250.00
City New York	State NY	
Purpose of Disbursement Non Contribution Account PAC Administration 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:		

SUBTOTAL of Disbursements This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	6787.23