

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) 1050 17th St NW Ste 590 Washington DC 20036 Check if different than previously reported. (ACC)

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

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

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

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

Signature of Treasurer Dickstein Sudolsky, Marcia, , , [Electronically Filed] Date 07 / 31 / 2017

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)

Page 2

Write or Type Committee Name

Tri-State Maxed-Out Women

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		38169.44
(b) Cash on Hand at Beginning of Reporting Period.....	38169.44	
(c) Total Receipts (from Line 19)	102126.80	102126.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	140296.24	140296.24
7. Total Disbursements (from Line 31).....	36595.55	36595.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	103700.69	103700.69
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: / / 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).....	95118.29	95118.29
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	95118.29	95118.29
(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)	95118.29	95118.29
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	7008.51	7008.51
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	102126.80	102126.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	102126.80	102126.80

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	19095.55	19095.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19095.55	19095.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	17500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	36595.55	36595.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36595.55	36595.55

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)	95118.29	95118.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	95118.29	95118.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19095.55	19095.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19095.55	19095.55

**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 54
<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. Adelson, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 N Moore St
 Apt 14
 City New York State NY Zip Code 10013-2460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 15 / 2017
Transaction ID : 53201
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Adler, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 Park Ave
 Apt 8C
 City New York State NY Zip Code 10021-0104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 21 / 2017
Transaction ID : 53215
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Altman, Marlene, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 522 W End Ave
 City New York State NY Zip Code 10024-3228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 03 / 2017
Transaction ID : 2874
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Amdur, Shirley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 983 Park Ave
 City New York State NY Zip Code 10028-0808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) No Occupation Occupation (for Individual) No Employer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 53211
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Amster, Peggy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 Bay Ln
 City Water Mill State NY Zip Code 11976-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Landscape Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : 3603
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Berenson, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 E 48th St
 City New York State NY Zip Code 10017-1538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Antique Dealer Occupation (for Individual) Ellen Berenson Antiques & Fine
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2017
Transaction ID : 3032
 Amount of Each Receipt this Period
 5000.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 8 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Brenner, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 Neustadt Ln
 City Chappaqua State NY Zip Code 10514-3804
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 13 / 2017
Transaction ID : 2866
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Brosen, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 W 86th St Apt 14C
 City New York State NY Zip Code 10024-3439
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 21 / 2017
Transaction ID : 53216
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Cohn, Betsy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 Park Ave
 City New York State NY Zip Code 10128-1234
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 13 / 2017
Transaction ID : 2933
 Amount of Each Receipt this Period 5000.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Cohn, Joan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 W 66th St

City New York	State NY	Zip Code 10023-6206
------------------	-------------	------------------------

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

Name of Employer (for Individual) Psychotherapist	Occupation (for Individual) Self employed
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2017

Transaction ID : 2884

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 515 E 84th St

City New York	State NY	Zip Code 10028-7301
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2017

Transaction ID : 53204

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 480 Park Ave

City New York	State NY	Zip Code 10022-1613
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Investor
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

Transaction ID : 39720

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 54
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2017
Transaction ID : 2879
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Epstein, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Grace Ct
 City Brooklyn State NY Zip Code 11201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Volunteer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : 53217
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Felsher, Celia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 Eagle Knolls Rd
 City Larchmont State NY Zip Code 10538-3908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Reservoir Operations Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2017
Transaction ID : 2870
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Fenster, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 W 12th St
 Apt 4G
 City New York State NY Zip Code 10014-6028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Office of Julie R Fenster Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 26 / 2017**
Transaction ID : 2891
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Friedman, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 5th Ave
 Apt 14C
 City New York State NY Zip Code 10065-7289
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Private Investor Occupation (for Individual) Self employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 28 / 2017**
Transaction ID : 53218
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Friedman, Fredrica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 857 5th Ave
 City New York State NY Zip Code 10065-5857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Literary Management Occupation (for Individual) Fredrica S. Friedman Co Inc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 28 / 2017**
Transaction ID : 3035
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Friedman, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 Park Ave
 City New York State NY Zip Code 10075-0327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Design Historian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 14 / 2017
Transaction ID : 2883
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Furman, Gail, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 E 83rd St
 City New York State NY Zip Code 10028-1906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Psychologist Occupation (for Individual) Self employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 24 / 2017
Transaction ID : 2890
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Gibbons, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2247 PO Box
 City Setauket State NY Zip Code 11733-0726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 13 / 2017
Transaction ID : 2922
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Goldberg, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 E 68th St
 City New York State NY Zip Code 10065-5718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Communications Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 13 / 2017**
Transaction ID : 2920
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Gottlieb, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1129 E 82ND St Apt 10C
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 13 / 2017**
Transaction ID : 2916
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Grosvenor, Nina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 Gramatan Ct
 City Bronxville State NY Zip Code 10708-3015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Author Occupation (for Individual) Self
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 21 / 2017**
Transaction ID : 53208
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 54
	<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. Harmon, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 Kettle Creek Rd
 City Weston State CT Zip Code 06883-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Theater Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 30 / 2017
Transaction ID : 2872
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Hess, Anne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 E 18th St
 City New York State NY Zip Code 10003-3605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Consultant Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2017
Transaction ID : 3034
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Hurst, Fern, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 5th Ave
 City New York State NY Zip Code 10128-0104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 04 / 2017
Transaction ID : 3605
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Iscol, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 Lyndel Rd
 City Pound Ridge State NY Zip Code 10576-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) President Occupation (for Individual) IF Hummingbird Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2017
Transaction ID : 2982
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Iscol, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 Lyndel Rd
 City Pound Ridge State NY Zip Code 10576-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) President Occupation (for Individual) IF Hummingbird Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2017
Transaction ID : 39686
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Jeffrey, Lynn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 E 70th St
 City New York State NY Zip Code 10021-4985
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 53213
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Johnson, Freda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 Park Ave
 City New York State NY Zip Code 10028-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2017
Transaction ID : 2886
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Karotkin, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Reimer Rd
 City Scarsdale State NY Zip Code 10583-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Volunteer and Philanthropist Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 41284
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Karpowich, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 E 71st St
 City New York State NY Zip Code 10021-4219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Non-profit Executive Occupation (for Individual) MAI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2017
Transaction ID : 2918
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 17 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Konecky, Isobel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 E 68th St
 City New York State NY Zip Code 10065-6001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : 17419
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Kraus, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 E 80th St
 City New York State NY Zip Code 10075-0237
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 53209
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Kuhn, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 Park Ave
 City New York State NY Zip Code 10065-7332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Volunteer Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 53214
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 54
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Kwiat, Fern, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Howard Dr
 City Syosset State NY Zip Code 11791-7003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 05 / 2017
Transaction ID : 39595
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Lafer, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 5th Ave
 City New York State NY Zip Code 10128-0104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Consultant Occupation (for Individual) Self employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2017
Transaction ID : 2914
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Lapidus, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 Park Ave
 City New York State NY Zip Code 10022-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) No Employer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 14 / 2017
Transaction ID : 2888
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Lipsky, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1385 York Ave
Apt 21A

City New York State NY Zip Code 10021-3908

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017

Transaction ID : 53206

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 983 Park Ave

City New York State NY Zip Code 10028-0808

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017

Transaction ID : 53210

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 320 Central Park W

City New York State NY Zip Code 10025-7659

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

Name of Employer (for Individual) Self Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2017

Transaction ID : 2871

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Tri-State Maxed-Out Women

A. Minard, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 E 62nd St
 City New York State NY Zip Code 10065-7301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) President & CEO Occupation (for Individual) Franklin D Roosevelt Freedoms
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 07 / 2017**
Transaction ID : 2900
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. O'Grady, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 E 81st St Apt 5B
 City New York State NY Zip Code 10028-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 13 / 2017**
Transaction ID : 2923
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Panush, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 Riverside Blvd Apt 14E
 City New York State NY Zip Code 10069-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **03 / 28 / 2017**
Transaction ID : 3033
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Panush, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 Riverside Blvd
 Apt 14E
 City New York State NY Zip Code 10069-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 53205
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Pastor, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 E 88th St
 Apt 5H
 City New York State NY Zip Code 10128-0561
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 53212
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Patch, Peter, , ,
 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) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2017
Transaction ID : 2877
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 54
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Patrick, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 E 84th St
 Ph
 City New York State NY Zip Code 10028-0939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEO Occupation (for Individual) Patrick Partners Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2017
Transaction ID : 53203
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Pogrebin, Letty Cottin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 W 67th St
 City New York State NY Zip Code 10023-6224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Writer Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2017
Transaction ID : 2889
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Potash, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 Sylvan Ln
 City Mamaroneck State NY Zip Code 10543-3955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : 2873
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Raker, Gerry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 Sutton Pl
 Apt 5C
 City New York State NY Zip Code 10022-2429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 53207
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Ratner, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 Ely Brook To Hands CR Rd
 City East Hampton State NY Zip Code 11937-3707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not for Profit Foundation Occupation (for Individual) Self employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2017
Transaction ID : 2919
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Rebell, Susan, Cohen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1965 Broadway
 Apt 24B
 City New York State NY Zip Code 10023-5980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2017
Transaction ID : 2887
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Reiss, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Central Park W
 City New York State NY Zip Code 10023-4198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : 41285
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Rosen, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 Central Park W Apt 3C
 City New York State NY Zip Code 10025-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2017
Transaction ID : 2867
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2017
Transaction ID : 2869
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Ross, Laura, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 Park Ave

City New York	State NY	Zip Code 10021-4153
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID : 2899

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 11 Mamaroneck Rd

City Scarsdale	State NY	Zip Code 10583-2811
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2017

Transaction ID : 2915

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 238 Engle St

City Tenafly	State NJ	Zip Code 07670-2136
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Financial Advisor	Occupation (for Individual) Morgan Stanley
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2017

Transaction ID : 2921

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Sapery, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 W 58th St
 City New York State NY Zip Code 10019-2145
 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 ▼ 1000.00

Date of Receipt 06 / 15 / 2017
Transaction ID : 40915
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Sarnoff, Rosita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 W 58th St
 City New York State NY Zip Code 10019-2145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Real Estate Occupation (for Individual) Stribling
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 15 / 2017
Transaction ID : 40916
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Schwartz, Jodi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 W 52nd St
 City New York State NY Zip Code 10019-6119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wachtell Lipton Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 368.29

Date of Receipt 02 / 13 / 2017
Transaction ID : 2892
 Amount of Each Receipt this Period 368.29
 Memo Item
 * In-Kind: PAC Event Catering

SUBTOTAL of Receipts This Page (optional).....▶	2368.29
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 27 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Shapiro, Geri, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 Highland Rd
 City Scarsdale State NY Zip Code 10583-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Senator Gillibrand's Office Occupation (for Individual) Senate Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 06 / 2017**
Transaction ID : 2875
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Shufro, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 E 70th St Apt 5C
 City New York State NY Zip Code 10021-5246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 22 / 2017**
Transaction ID : 2917
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Snedeker, Frances, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Linden Ave
 City Larchmont State NY Zip Code 10538-4037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 30 / 2017**
Transaction ID : 53219
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Snyder, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1080 5th Ave
Apt 3A

City New York	State NY	Zip Code 10128-0102
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2017

Transaction ID : 2876

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 39 Park Rd

City Scarsdale	State NY	Zip Code 10583-2143
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Volunteer	Occupation (for Individual) N/A
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017

Transaction ID : 56621

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 601 W 103RD St

City New York	State NY	Zip Code 10055
------------------	-------------	-------------------

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

Name of Employer (for Individual) Physician	Occupation (for Individual) Mt. Sinai/Beth Israel
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2017

Transaction ID : 2885

Amount of Each Receipt this Period
1000.00

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 29 OF 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Tessler, Fern, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 Irving Pl
 FI 55
 City New York State NY Zip Code 10003-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 25 / 2017
Transaction ID : 2868
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Ubelhart, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 W End Ave
 Apt 7A
 City New York State NY Zip Code 10025-5467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Financial Analyst Occupation (for Individual) Bloomberg LP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 03 / 2017
Transaction ID : 2898
 Amount of Each Receipt this Period 2000.00
 Memo Item

C. Unterberg, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 E 67th St
 City New York State NY Zip Code 10065-5949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : 41283
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	8000.00
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 30 OF 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weiner, Shari, , ,

Mailing Address 425 E 63rd St
30D

City New York State NY Zip Code 10065-7804

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

Name of Employer (for Individual) Attorney Occupation (for Individual) Murphy McKeon PC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2017

Transaction ID : 53202

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	95118.29

**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 31 OF 54
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

A. Falk, Bobbie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Willow Ln
 City Scarsdale State NY Zip Code 10583-3411
 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) **Convention**
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2017
Transaction ID : 16405
 Amount of Each Receipt this Period
1000.00
 Memo Item

B. Feder, Phyllis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Central Park W
 City New York State NY Zip Code 10023-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A
 Receipt For:
 Primary General
 Other (specify) **Convention**
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2017
Transaction ID : 3660
 Amount of Each Receipt this Period
1000.00
 Memo Item

C. Fiske, Heidi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 Riverside Dr Apt 8C
 City New York State NY Zip Code 10023-8020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heidi Fiske Associates Occupation (for Individual) Editor
 Receipt For:
 Primary General
 Other (specify) **Convention**
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017
Transaction ID : 3814
 Amount of Each Receipt this Period
1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 54
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

A. Kovner, Victor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 W 67th St
 City New York State NY Zip Code 10023-6258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Attorney Occupation (for Individual) Davis Wright Tremaine LLP
 Receipt For: Primary General Other (specify) Convention
 Aggregate Year-to-Date 1000.00

Date of Receipt **04 / 05 / 2017**
Transaction ID : 3659
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Marks, Carol, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 Mountain Laurel Dr
 City Aspen State CO Zip Code 81611-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) None
 Receipt For: Primary General Other (specify) Convention
 Aggregate Year-to-Date 1000.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : 16407
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Menschel, Joyce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1035 5th Ave # 7B
 City New York State NY Zip Code 10028-0135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) No employer
 Receipt For: Primary General Other (specify) Convention
 Aggregate Year-to-Date 2000.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : 16406
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number

C
Transaction ID : 500003818
Amount of Each Disbursement this Period
7.95

Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2017

FEC Identification Number

C
Transaction ID : 500003819
Amount of Each Disbursement this Period
29.05

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2017

FEC Identification Number

C
Transaction ID : 500003820
Amount of Each Disbursement this Period
7.95

Memo Item

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

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

44.95

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2017

FEC Identification Number

C
Transaction ID : 500003821
Amount of Each Disbursement this Period
144.65

Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2017

FEC Identification Number

C
Transaction ID : 500003822
Amount of Each Disbursement this Period
7.95

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2017

FEC Identification Number

C
Transaction ID : 500003823
Amount of Each Disbursement this Period
87.15

Memo Item

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

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

239.75

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2017

FEC Identification Number

C
Transaction ID : 500003824
Amount of Each Disbursement this Period
7.95

Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C
Transaction ID : 500003845
Amount of Each Disbursement this Period
304.50

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 360001 PO Box

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2017

FEC Identification Number

C
Transaction ID : 500003825
Amount of Each Disbursement this Period
7.95

Memo Item

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

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

320.40

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 360001 PO Box

City
Fort Lauderdale

State
FL

Zip Code
33336-0001

Purpose of Disbursement
Credit Card Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : 500003826

Amount of Each Disbursement this Period

[REDACTED] 130.50

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Paymentech

Mailing Address 659754 PO Box

City
San Antonio

State
TX

Zip Code
78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500003833

Amount of Each Disbursement this Period

[REDACTED] 40.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Chase Paymentech

Mailing Address 659754 PO Box

City
San Antonio

State
TX

Zip Code
78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500003834

Amount of Each Disbursement this Period

[REDACTED] 40.00

Memo Item

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

[REDACTED] 210.50

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 500003835

Amount of Each Disbursement this Period

[REDACTED] 298.71

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 500003836

Amount of Each Disbursement this Period

[REDACTED] 40.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 500003837

Amount of Each Disbursement this Period

[REDACTED] 53.24

Memo Item

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

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

[REDACTED] 391.95

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Chase Paymentech

Mailing Address 659754 PO Box

City San Antonio State TX Zip Code 78265-9754

Purpose of Disbursement
Merchant Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 500003838

Amount of Each Disbursement this Period

[REDACTED] 40.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Deluxe

Mailing Address PO Box 742572

City Cincinnati State OH Zip Code 45274-2572

Purpose of Disbursement
Printing

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 500003844

Amount of Each Disbursement this Period

[REDACTED] 232.62

Memo Item

Full Name (Last, First, Middle Initial)

C. Deluxe

Mailing Address PO Box 742572

City Cincinnati State OH Zip Code 45274-2572

Purpose of Disbursement
Printing

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 500003259

Amount of Each Disbursement this Period

[REDACTED] 31.73

Memo Item

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

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

[REDACTED] 304.35

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Kato, Kazuko, , ,

Mailing Address 445 Park Ave
FI 9

City
New York

State
NY

Zip Code
10022-8606

Purpose of Disbursement
PAC Administrative Services

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500003290

Amount of Each Disbursement this Period

[] 280.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Paul Evans Caterers

Mailing Address 46 Saratoga Blvd
Unit B

City
Island Park

State
NY

Zip Code
11558-1182

Purpose of Disbursement
PAC Event Catering

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500003293

Amount of Each Disbursement this Period

[] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Political Compliance Management Services, LLC

Mailing Address 1050 17th St NW
Ste 590

City
Washington

State
DC

Zip Code
20036-5592

Purpose of Disbursement
PAC Accounting Services

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500003186

Amount of Each Disbursement this Period

[] 1802.45

Memo Item

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

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

[] 2332.45

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Political Compliance Management Services, LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

Mailing Address 1050 17th St NW
Ste 590

City
Washington

State
DC

Zip Code
20036-5592

Purpose of Disbursement
PAC Accounting Services

FEC Identification Number

C [REDACTED]

Transaction ID : 500003260

Amount of Each Disbursement this Period

[REDACTED] 609.68

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. Political Compliance Management Services, LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	7

Mailing Address 1050 17th St NW
Ste 590

City
Washington

State
DC

Zip Code
20036-5592

Purpose of Disbursement
PAC Accounting Services

FEC Identification Number

C [REDACTED]

Transaction ID : 500003261

Amount of Each Disbursement this Period

[REDACTED] 1220.71

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. Political Compliance Management Services, LLC

Date of Disbursement

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

Mailing Address 1050 17th St NW
Ste 590

City
Washington

State
DC

Zip Code
20036-5592

Purpose of Disbursement
PAC Accounting Services

FEC Identification Number

C [REDACTED]

Transaction ID : 500003257

Amount of Each Disbursement this Period

[REDACTED] 602.45

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 2432.84

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Rampersaud, Envira, , ,

Mailing Address 201 E 87th St

City
New York

State
NY

Zip Code
10128-3203

Purpose of Disbursement
PAC Administrative Staffing

Candidate Name

Office Sought:
 House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500003294

Amount of Each Disbursement this Period

[] 120.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Rampersaud, Envira, , ,

Mailing Address 201 E 87th St

City
New York

State
NY

Zip Code
10128-3203

Purpose of Disbursement
PAC Administrative Staffing

Candidate Name

Office Sought:
 House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500003295

Amount of Each Disbursement this Period

[] 120.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Restaurant Marketing Associates

Mailing Address 2055 L St NW

City
Washington

State
DC

Zip Code
20036-4983

Purpose of Disbursement
PAC Event Catering

Candidate Name

Office Sought:
 House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 500003289

Amount of Each Disbursement this Period

[] 718.58

Memo Item

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

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

[] 958.58

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Schwartz, Jodi, , ,

Mailing Address 51 W 52nd St

City
New York

State
NY

Zip Code
10019-6119

Purpose of Disbursement
PAC Event Catering

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 28921

Amount of Each Disbursement this Period

[REDACTED] 368.29

* In-Kind Received

Memo Item

Full Name (Last, First, Middle Initial)

B. Stanton, James, , ,

Mailing Address 235 E 22nd St
15HI

City
New York

State
NY

Zip Code
10010-4616

Purpose of Disbursement
PAC Graphic Design Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500003114

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Stanton, James, , ,

Mailing Address 235 E 22nd St
15HI

City
New York

State
NY

Zip Code
10010-4616

Purpose of Disbursement
PAC Graphic Design Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : 500003187

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

[REDACTED] 1118.29

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

[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Stanton, James, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 235 E 22nd St # 15HI

City New York State NY Zip Code 10010-4616

Purpose of Disbursement PAC Graphic Design

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 26 / 2017

FEC Identification Number C

Transaction ID : 500003258

Amount of Each Disbursement this Period 250.00

Memo Item

B. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 131 E 93rd St Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 05 / 2017

FEC Identification Number C

Transaction ID : 500003110

Amount of Each Disbursement this Period 250.00

Memo Item

C. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 131 E 93rd St Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 05 / 2017

FEC Identification Number C

Transaction ID : 500003113

Amount of Each Disbursement this Period 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 01 / 13 / 2017
Mailing Address 131 E 93rd St Apt 10D		FEC Identification Number C [] Transaction ID : 500003112 Amount of Each Disbursement this Period [] 250.00
City New York	State NY	Zip Code 10128-1606
Purpose of Disbursement PAC Event Staffing		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 01 / 23 / 2017
Mailing Address 131 E 93rd St Apt 10D		FEC Identification Number C [] Transaction ID : 500003271 Amount of Each Disbursement this Period [] 350.00
City New York	State NY	Zip Code 10128-1606
Purpose of Disbursement PAC Event Staffing		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 01 / 23 / 2017
Mailing Address 131 E 93rd St Apt 10D		FEC Identification Number C [] Transaction ID : 500003272 Amount of Each Disbursement this Period [] 400.00
City New York	State NY	Zip Code 10128-1606
Purpose of Disbursement PAC Event Staffing		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1000.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 131 E 93rd St
Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 01 / 2017

FEC Identification Number: C
Transaction ID : 500003273
Amount of Each Disbursement this Period: 300.00

Memo Item

B. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 131 E 93rd St
Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 04 / 2017

FEC Identification Number: C
Transaction ID : 500003274
Amount of Each Disbursement this Period: 500.00

Memo Item

C. Sudolsky, Marcia D., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 131 E 93rd St
Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 11 / 2017

FEC Identification Number: C
Transaction ID : 500003275
Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1300.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2017

FEC Identification Number

C []

Transaction ID : 500003276

Amount of Each Disbursement this Period

[] 236.99

Memo Item

Full Name (Last, First, Middle Initial)

B. UPS Store

Mailing Address 2nd Ave

City New York State NY Zip Code 10065-8293

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2017

FEC Identification Number

C []

Transaction ID : 500003300

Amount of Each Disbursement this Period

[] 236.99

Memo Item

Full Name (Last, First, Middle Initial)

C. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement
PAC Administrative Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2017

FEC Identification Number

C []

Transaction ID : 500003277

Amount of Each Disbursement this Period

[] 1250.00

Memo Item

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

[] 1486.99

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2017
Mailing Address 131 E 93rd St Apt 10D		FEC Identification Number C Transaction ID : 500003288 Amount of Each Disbursement this Period 286.00
City New York	State NY	
Zip Code 10128-1606		Memo Item <input type="checkbox"/>
Purpose of Disbursement Reimbursement		
Candidate Name		Category/ Type
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. UPS Store		Date of Disbursement MM / DD / YYYY 03 / 25 / 2017
Mailing Address 2nd Ave		FEC Identification Number C Transaction ID : 500003816 Amount of Each Disbursement this Period 49.50
City New York	State NY	
Zip Code 10065-8293		Memo Item <input checked="" type="checkbox"/>
Purpose of Disbursement Printing		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 131 E 93rd St Apt 10D		FEC Identification Number C Transaction ID : 500003287 Amount of Each Disbursement this Period 105.00
City New York	State NY	
Zip Code 10128-1606		Memo Item <input type="checkbox"/>
Purpose of Disbursement Reimbursement		
Candidate Name		Category/ Type
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)..... ▶

391.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City
New York

State
NY

Zip Code
10128-1606

Purpose of Disbursement
PAC Administrative Services

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 500003281

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City
New York

State
NY

Zip Code
10128-1606

Purpose of Disbursement
Reimbursement

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 : 500003286

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. UPS Store

Mailing Address 2nd Ave

City
New York

State
NY

Zip Code
10065-8293

Purpose of Disbursement
Printing

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 : 500003305

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

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

Full Name (Last, First, Middle Initial) A. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address 131 E 93rd St Apt 10D		FEC Identification Number C
City New York	State NY	Zip Code 10128-1606
Purpose of Disbursement Reimbursement		Transaction ID : 500003285
Candidate Name		Amount of Each Disbursement this Period 494.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Amazon.com		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address 410 Terry Ave N		FEC Identification Number C
City Seattle	State WA	Zip Code 98109-5210
Purpose of Disbursement Office Supplies		Transaction ID : 500003304
Candidate Name		Amount of Each Disbursement this Period 494.00
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Sudolsky, Marcia D., , ,		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017
Mailing Address 131 E 93rd St Apt 10D		FEC Identification Number C
City New York	State NY	Zip Code 10128-1606
Purpose of Disbursement PAC Administrative Services		Transaction ID : 500003280
Candidate Name		Amount of Each Disbursement this Period 1250.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1744.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City
New York

State
NY

Zip Code
10128-1606

Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : 500003284

Amount of Each Disbursement this Period

[REDACTED] 138.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City
New York

State
NY

Zip Code
10128-1606

Purpose of Disbursement
PAC Administrative Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500003279

Amount of Each Disbursement this Period

[REDACTED] 1250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City
New York

State
NY

Zip Code
10128-1606

Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500003283

Amount of Each Disbursement this Period

[REDACTED] 298.00

Memo Item

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

[REDACTED] 1686.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. UPS Store

Mailing Address 2nd Ave

City New York State NY Zip Code 10065-8293

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2017

FEC Identification Number

C
Transaction ID : 500003301
Amount of Each Disbursement this Period
278.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sudolsky, Marcia D., , ,

Mailing Address 131 E 93rd St
Apt 10D

City New York State NY Zip Code 10128-1606

Purpose of Disbursement
PAC Event Staffing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2017

FEC Identification Number

C
Transaction ID : 500003282
Amount of Each Disbursement this Period
120.00

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

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

120.00
18607.55

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Feinstein for Senate

Full Name (Last, First, Middle Initial)
Mailing Address 918 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-2140

Purpose of Disbursement Contribution

Candidate Name **Feinstein, Dianne, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 00

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: **C00539890**
Transaction ID : **500003267**
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. Friends of Elizabeth Esty

Full Name (Last, First, Middle Initial)
Mailing Address 61 PO Box

City Cheshire State CT Zip Code 06410-0061

Purpose of Disbursement Contribution

Candidate Name **Esty, Elizabeth, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) Convention

State: CT District: 05

Date of Disbursement: 06 / 21 / 2017

FEC Identification Number: **C00494203**
Transaction ID : **500003255**
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Heidi for Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1577

City Bismarck State ND Zip Code 58502-1577

Purpose of Disbursement Contribution

Candidate Name **Heitkamp, Heidi, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: ND District: 00

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: **C00505552**
Transaction ID : **500003165**
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)
Louise Slaughter

Date of Disbursement: 06 / 21 / 2017

Mailing Address: 1150 University Ave, Ste 5, Rochester, NY 14607-1647

Purpose of Disbursement: Contribution

Candidate Name: Slaughter, Louise, , ,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: NY, District: 25

FEC Identification Number: C00213611
Transaction ID: 500003256
Amount of Each Disbursement this Period: 1500.00

Memo Item

B. Maloney for Congress

Full Name (Last, First, Middle Initial)
Carolyn B. Maloney

Date of Disbursement: 05 / 30 / 2017

Mailing Address: 49 E 92nd St, New York, NY 10128-1326

Purpose of Disbursement: Contribution

Candidate Name: Maloney, Carolyn, B., ,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: NY, District: 12

FEC Identification Number: C00273169
Transaction ID: 500003268
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. McCaskill for Missouri

Full Name (Last, First, Middle Initial)
Claire McCaskill

Date of Disbursement: 05 / 30 / 2017

Mailing Address: PO Box 300077, Saint Louis, MO 63130-0338

Purpose of Disbursement: Contribution

Candidate Name: McCaskill, Claire, , ,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: MO, District: 00

FEC Identification Number: C00431304
Transaction ID: 500003266
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Stabenow for US Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 4945

City East Lansing State MI Zip Code 48826-4945

Purpose of Disbursement Contribution

Candidate Name
Stabenow, Debbie, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MI District: 00

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00344473
Transaction ID : 500003269
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. Tammy Baldwin for Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 696

City Madison State WI Zip Code 53701-0696

Purpose of Disbursement Contribution

Candidate Name
Baldwin, Tammy, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: WI District: 00

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: C00326801
Transaction ID : 500003164
Amount of Each Disbursement this Period: 2500.00

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

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)..... ▶

17500.00