



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Tri-State Maxed-Out Women

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>	<input type="text" value="66618.56"/>	<input type="text" value="66618.56"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="162151.91"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19280.24"/>	<input type="text" value="271136.69"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="181432.15"/>	<input type="text" value="337755.25"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31071.35"/>	<input type="text" value="187394.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="150360.80"/>	<input type="text" value="150360.80"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**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).....	17050.00	233040.60
(ii) Unitemized .....	15.00	445.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17065.00	233485.60
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1200.00	1200.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	18265.00	234685.60
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	15.00	75.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1000.24	35376.09
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)).....▶	19280.24	271136.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19280.24	271136.69

**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 .....	15892.54	68448.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15892.54	68448.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	68000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	11200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	11200.00
29. Other Disbursements (Including Non-Federal Donations).....	7678.81	39745.93
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)) ..	31071.35	187394.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31071.35	187394.45

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18265.00	234685.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	11200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18265.00	223485.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	15892.54	68448.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	15.00	75.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15877.54	68373.52

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

This report is being amended to add the note 'Non Contribution Account' to all Line 17 income.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 12 / 2023  
**Transaction ID : 4683569**  
 Amount of Each Receipt this Period 1200.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 16865.00

Date of Receipt 05 / 15 / 2023  
**Transaction ID : 4683569E**  
 Amount of Each Receipt this Period 1200.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Barnes, Elisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 440 Riverside Dr Apt 121  
 City New York State NY Zip Code 10027-6832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 10 / 2023  
**Transaction ID : 4680125**  
 Amount of Each Receipt this Period 1200.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2023

**Transaction ID : 4680125E**

Amount of Each Receipt this Period  
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Engel, Ilene, , ,**

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

Mailing Address 1057 Arbor Trce NE

City Brookhaven	State GA	Zip Code 30319-5381
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2023

**Transaction ID : 4680120**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2023

**Transaction ID : 4680120E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 29
	<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. Friedman, Dana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 E 56Th St Apt 37H  
 City New York State NY Zip Code 10022-4339  
 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 ▼ 1400.00

Date of Receipt **05 / 05 / 2023**  
**Transaction ID : 4680121**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 16865.00

Date of Receipt **05 / 08 / 2023**  
**Transaction ID : 4680121E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Johnson, Joyce S., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 65 W 96Th St Apt 16G  
 City New York State NY Zip Code 10025-6537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 03 / 2023**  
**Transaction ID : 4680119**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2023

**Transaction ID : 4680119E**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Just-Michael, Haina, , ,**

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

Mailing Address 1725 York Ave

City New York	State NY	Zip Code 10128-7807
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Media Consultant
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2023

**Transaction ID : 4684956**

Amount of Each Receipt this Period  
1200.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2023

**Transaction ID : 4684956E**

Amount of Each Receipt this Period  
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Lawner, Marsha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 W 64Th St  
 City New York State NY Zip Code 10023-7129  
 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 ▼ 1800.00

Date of Receipt 05 / 07 / 2023  
**Transaction ID : 4680122**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 16865.00

Date of Receipt 05 / 08 / 2023  
**Transaction ID : 4680122E**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Myers, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 417 Park Ave  
 City New York State NY Zip Code 10022-4401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Evercore Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 09 / 2023  
**Transaction ID : 4680124**  
 Amount of Each Receipt this Period 1200.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> 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 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee.    **C**    C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2023

**Transaction ID : 4680124E**

Amount of Each Receipt this Period  
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Newhouse, Nancy, , ,**

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

Mailing Address 154 W 88Th St

City New York	State NY	Zip Code 10024-2441
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FEC ID number of contributing federal political committee.    **C**    [ ]

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Author, Lecturer
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2023

**Transaction ID : 4680822**

Amount of Each Receipt this Period  
1200.00

Memo Item

**C. Rothstein, Cynthia, , ,**

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2023

**Transaction ID : 4687188**

Amount of Each Receipt this Period  
1200.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2400.00
<b>TOTAL</b> 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 13 OF 29
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

**A. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2023

**Transaction ID : 4687188E**

Amount of Each Receipt this Period  
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Sarnoff, Elizabeth, , ,**

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

Mailing Address 901 Lexington Ave

City New York	State NY	Zip Code 10065-5924
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Drug Policy Alliance	Occupation (for Individual) Non Profit Employee
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2023

**Transaction ID : 4680128**

Amount of Each Receipt this Period  
1200.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2023

**Transaction ID : 4680128E**

Amount of Each Receipt this Period  
1200.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> 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 29
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Tamaro, Lana, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 14 / 2023
Mailing Address 305 E 86Th St Apt 3GW			<b>Transaction ID : 4683571</b>
City New York	State NY	Zip Code 10028-4757	Amount of Each Receipt this Period 1200.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pace University		Occupation (for Individual) Professor	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ACTBLUE</b>			Date of Receipt MM / DD / YYYY 05 / 15 / 2023
Mailing Address PO Box 441146			<b>Transaction ID : 4683571E</b>
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 1200.00
FEC ID number of contributing federal political committee. C C00401224			<input checked="" type="checkbox"/> Memo Item
Name of Employer (for Individual)		Occupation (for Individual) Conduit total listed in Agg. field	Note: Above Contribution earmarked through this organization.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16865.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Thypin, Marilyn, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 15 / 2023
Mailing Address 400 E 56Th St Apt 25H			<b>Transaction ID : 4683573</b>
City New York	State NY	Zip Code 10022-4339	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2023

**Transaction ID : 4683573E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Yanofsky, Nancy, , ,**

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

Mailing Address 2500 S Ocean Blvd

City Palm Beach	State FL	Zip Code 33480-5470
--------------------	-------------	------------------------

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

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

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  
 05 / 14 / 2023

**Transaction ID : 4683570**

Amount of Each Receipt this Period  
1500.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2023

**Transaction ID : 4683570E**

Amount of Each Receipt this Period  
1500.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	17050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. CAROLYN'S PAC**

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

Mailing Address 49 E 92Nd St  
Apt 1

City New York State NY Zip Code 10128-1326

FEC ID number of contributing federal political committee. **C** C00341990

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2023

**Transaction ID : 4683568**

Amount of Each Receipt this Period  
1200.00

Memo Item

**B.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1200.00



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 29
<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Berenson, Ellen, , ,

Mailing Address 233 E 48Th St

City New York	State NY	Zip Code 10017-1538
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2023

**Transaction ID : 4687189**

Amount of Each Receipt this Period  
1000.00

Memo Item

\* Earmarked Contribution: See Below Non Contribution Account

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16865.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2023

**Transaction ID : 4687189E**

Amount of Each Receipt this Period  
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

**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) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2023	
Mailing Address PO Box 441146		FEC Identification Number C00401224 <b>Transaction ID : 500133307</b>	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 37.53
Purpose of Disbursement PAC Credit Card Processing Fee		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2023	
Mailing Address PO Box 441146		FEC Identification Number C00401224 <b>Transaction ID : 500133308</b>	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 296.25
Purpose of Disbursement PAC Credit Card Processing Fee		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2023	
Mailing Address PO Box 441146		FEC Identification Number C00401224 <b>Transaction ID : 500133309</b>	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 197.50
Purpose of Disbursement PAC Credit Card Processing Fee		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	531.28
<b>TOTAL</b> 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. ActBlue Technical Services

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

Purpose of Disbursement  
PAC Credit Card Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	3

FEC Identification Number

C C00401224

Transaction ID : 500133310

Amount of Each Disbursement this Period

0	0	0	0	0	0	0	0	0	0
									60

Memo Item

Full Name (Last, First, Middle Initial)

### B. ActBlue Technical Services

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

Purpose of Disbursement  
PAC Credit Card Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C C00401224

Transaction ID : 500133536

Amount of Each Disbursement this Period

9	4	8	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

### C. Curb Mobility LLC

Mailing Address 1111 34Th Ave

City  
Long Island City

State  
NY

Zip Code  
11106-4923

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	3

FEC Identification Number

C

Transaction ID : 500133345

Amount of Each Disbursement this Period

1	9	6	2	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

1	1	5	0	2	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	5	0	2	0	0	0	0	0
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Curb Mobility LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 09 / 2023

FEC Identification Number: C  
**Transaction ID : 500133346**

Amount of Each Disbursement this Period: 27.50

Memo Item

**B. Curb Mobility LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 12 / 2023

FEC Identification Number: C  
**Transaction ID : 500133347**

Amount of Each Disbursement this Period: 23.88

Memo Item

**C. Curb Mobility LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 15 / 2023

FEC Identification Number: C  
**Transaction ID : 500133348**

Amount of Each Disbursement this Period: 59.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 110.48

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Curb Mobility LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1111 34Th Ave

City Long Island City State NY Zip Code 11106-4923

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 24 / 2023

FEC Identification Number: C  
**Transaction ID : 500133349**

Amount of Each Disbursement this Period: 15.12

Memo Item

**B. Davidovich Bakery**

Full Name (Last, First, Middle Initial)

Mailing Address 88 Essex St

City New York State NY Zip Code 10002-5575

Purpose of Disbursement  
PAC Event Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 01 / 2023

FEC Identification Number: C  
**Transaction ID : 500133335**

Amount of Each Disbursement this Period: 642.32

Memo Item

**C. Dickstein Sudolsky, Marcia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave

City New York State NY Zip Code 10022-2606

Purpose of Disbursement  
PAC Administrative Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 01 / 2023

FEC Identification Number: C  
**Transaction ID : 500133320**

Amount of Each Disbursement this Period: 6250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6907.44

**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. Dickstein Sudolsky, Marcia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave

City New York State NY Zip Code 10022-2606

Purpose of Disbursement  
PAC Reimbursement - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 09 / 2023

FEC Identification Number: C  
**Transaction ID : 500133108**

Amount of Each Disbursement this Period: 435.00

Memo Item

**B. Dickstein Sudolsky, Marcia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave

City New York State NY Zip Code 10022-2606

Purpose of Disbursement  
PAC Administrative Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 15 / 2023

FEC Identification Number: C  
**Transaction ID : 500133321**

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Dickstein Sudolsky, Marcia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave

City New York State NY Zip Code 10022-2606

Purpose of Disbursement  
PAC Administrative Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 24 / 2023

FEC Identification Number: C  
**Transaction ID : 500133322**

Amount of Each Disbursement this Period: 1500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2435.00

**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. Howe, Nora, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 113 Mott St  
Apt 4R

City New York State NY Zip Code 10013-4634

Purpose of Disbursement  
PAC Administrative Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 26 / 2023

FEC Identification Number: C

Transaction ID : 500133333

Amount of Each Disbursement this Period: 320.00

Memo Item

**B. Lotos Club**

Full Name (Last, First, Middle Initial)

Mailing Address 5 E 66Th St

City New York State NY Zip Code 10065-5801

Purpose of Disbursement  
PAC Fundraising Event Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 15 / 2023

FEC Identification Number: C

Transaction ID : 500133325

Amount of Each Disbursement this Period: 4000.00

Memo Item

**C. Political Compliance Management Services, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 910 17Th St NW Ste 925

City Washington State DC Zip Code 20006-2641

Purpose of Disbursement  
PAC Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 09 / 2023

FEC Identification Number: C

Transaction ID : 500133324

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4820.00

**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. Regus Office Solutions**

Mailing Address 445 Park Ave  
FI 9

City New York State NY Zip Code 10022-8606

Purpose of Disbursement  
PAC Conference Room Rental

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2023

FEC Identification Number

C [ ]

Transaction ID : 500133337

Amount of Each Disbursement this Period

[ ] 229.51

Memo Item

Full Name (Last, First, Middle Initial)

**B. Seamless.Com**

Mailing Address 111 W Washington St  
Ste 2100

City Chicago State IL Zip Code 60602-2783

Purpose of Disbursement  
PAC Meeting Expense

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2023

FEC Identification Number

C [ ]

Transaction ID : 500133343

Amount of Each Disbursement this Period

[ ] 58.02

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 455 Market St

City San Francisco State CA Zip Code 94105-2420

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2023

FEC Identification Number

C [ ]

Transaction ID : 500133328

Amount of Each Disbursement this Period

[ ] 97.62

Memo Item

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

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

[ ] 385.15

[ ]



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)

Form for line numbers 21b through 30b with checkboxes.

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

Form A: Uber. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Uber. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Uber. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) and 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. Uber**

Mailing Address 455 Market St

City  
San Francisco

State  
CA

Zip Code  
94105-2420

Purpose of Disbursement

PAC Travel Expense

Candidate Name

Category/  
Type

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	5		2	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500133332

Amount of Each Disbursement this Period

[REDACTED] 41.21

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 455 Market St

City  
San Francisco

State  
CA

Zip Code  
94105-2420

Purpose of Disbursement

PAC Travel Expense

Candidate Name

Category/  
Type

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	5		2	6		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500133539

Amount of Each Disbursement this Period

[REDACTED] 48.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 455 Market St

City  
San Francisco

State  
CA

Zip Code  
94105-2420

Purpose of Disbursement

PAC Travel Expense

Candidate Name

Category/  
Type

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	5		2	3		0	2	3	0

FEC Identification Number

C [REDACTED]

Transaction ID : 500133540

Amount of Each Disbursement this Period

[REDACTED] 25.95

Memo Item

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

[REDACTED] 116.14

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

[REDACTED] 15502.12

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

**A. Emilia Sykes For Congress**

Mailing Address PO Box 1347

City  
Akron

State  
OH

Zip Code  
44309-1347

Purpose of Disbursement

Contribution

Candidate Name

Sykes, Emilia, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: OH District: 13

Date of Disbursement

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

FEC Identification Number

C C00801274

Transaction ID : 500133314

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. GRACE FOR NEW YORK**

Mailing Address PO Box 656555

City  
Fresh Meadows

State  
NY

Zip Code  
11365-6555

Purpose of Disbursement

Contribution

Candidate Name

MENG, GRACE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: NY District: 06

Date of Disbursement

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

FEC Identification Number

C C00516666

Transaction ID : 500133315

Amount of Each Disbursement this Period

5000.00

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

7500.00

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

7500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Non Contribution Account PAC Credit Card Processing Fee

Candidate Name  
ActBlue Technical Services

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 15 / 2023

FEC Identification Number: C C00401224  
**Transaction ID : 500133311**

Amount of Each Disbursement this Period: 39.50

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement  
Non Contribution Account PAC Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 26 / 2023

FEC Identification Number: C  
**Transaction ID : 500133537**

Amount of Each Disbursement this Period: 35.50

Memo Item

**C. Dickstein Sudolsky, Marcia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave

City New York State NY Zip Code 10022-2606

Purpose of Disbursement  
Non Contribution Account PAC Administration Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 01 / 2023

FEC Identification Number: C  
**Transaction ID : 500133318**

Amount of Each Disbursement this Period: 6250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6325.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Tri-State Maxed-Out Women**

Full Name (Last, First, Middle Initial)

**A. Dickstein Sudolsky, Marcia, , ,**

Mailing Address 445 Park Ave

City  
New York

State  
NY

Zip Code  
10022-2606

Purpose of Disbursement  
Non Contribution Account PAC Administration Services

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500133319**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Howe, Nora, , ,**

Mailing Address 113 Mott St  
Apt 4R

City  
New York

State  
NY

Zip Code  
10013-4634

Purpose of Disbursement  
Non Contribution Account PAC Administrative Services

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500133334**

Amount of Each Disbursement this Period

[REDACTED] 320.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Political Compliance Management Services, LLC**

Mailing Address 910 17Th St NW Ste 925

City  
Washington

State  
DC

Zip Code  
20006-2641

Purpose of Disbursement  
Non Contribution Account PAC Accounting Services

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500133323**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

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

[REDACTED] 1320.00

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

[REDACTED] 7645.00