Image# 14952923802 PAGE 1 / 14

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Use Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT		ample: If typion the lines.	ng, type	12FE4M5	
Tri-State Maxed-Out Wo	omen					I
ADDRESS (number and street)	445 Park Avenue	9				
Check if different	9th Floor					
than previously reported. (ACC)	New York				NY [10022
2. FEC IDENTIFICATION NUM	MBER ▼	CITY		5	STATE 🛦	ZIP CODE ▲
C C00488387		3. IS THIS REPORT		NEW N) OR	AN (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)		Jun 20 (M6)	Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)		Jul 20 (M7)	Oct :	20 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15	(c) 12-Day	y Election	Primary (12F	?)	General	(12G) Runoff (12R)
Quarterly Report (Q2) October 15	Report	t for the:	Convention (12C)	Special (12S)
Quarterly Report (Q3) January 31 Year-End Report (YE		Election on	M = M /	D D /	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	-Election X	General (300	ā)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Report	t for the: Election on	M M /	04	2014	in the State of
5. Covering Period 10	/ D D /	2014	through	M - M	/ D D /	2014
I certify that I have examined this	Report and to t	he best of my kno	wledge and I	pelief it is tru	e, correct and	d complete.
Type or Print Name of Treasurer	Marcia Dickstein	Sudolsky				
Signature of Treasurer Marcia	Dickstein Sudolsky		[Electronicall	v Filed] D	ate 12	04 / 2014
NOTE: Submission of false, erroneo	ous, or incomplete	information may so	ubject the pers	son signing th	is Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Tri-State Maxed-Out Women 10 16 2014 24 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 101023.82 January 1, 2014 (b) Cash on Hand at 56099.38 Beginning of Reporting Period..... 189378.46 9502.90 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 65602.28 290402.28 6(a) and 6(c) for Column B)..... 13206.24 238006.24 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 52396.04 52396.04 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: 10	16 2014 To	o: 11 24 2014
I. Receipts	COLUMN B Calendar Year-to-Date	
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0500.00	185650.00
(i) Itemized (use Schedule A)	9500.00	183030.00
(*) 11-7	0.00	200.00
(ii) Unitemized(iii) TOTAL (add	0.00	200.00
Lines 11(a)(i) and (ii)	9500.00	185850.00
Lines Tr(a)(i) and (ii)	, 5550.55	, , , , , ,
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	1000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	9500.00	186850.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	2500.00
7. Other Federal Receipts	0.00	2300.00
(Dividends, Interest, etc.)	2.90	28.46
B. Transfers from Non-Federal and Levin Funds	2.30	20.40
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
,	7	4
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Levin Fands (nom Schedule Fig)		7 7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
D. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	9502.90	189378.46
). Total Federal Receipts	0500.00	100000
(subtract Line 18(c) from Line 19)▶	9502.90	189378.46

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	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	7206.24	43006.24
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	7206.24	43006.24
22.	Transfers to Affiliated/Other Party		
2	CommitteesContributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	6000.00	195000.00
24.	Independent Expenditures	0.00	0.00
25.	(use Schedule E)	3.00	
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
8.	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		0.00
	(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	0.00	0.00
RO.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	13206.24	238006.24
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	13206.24	238006.24
	from Line 31)	13200.24	230000.24

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	9500.00	186850.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9500.00	186850.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7206.24	43006.24
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	7206.24	43006.24

FOR LINE NUMBER: **PAGE** 6 OF 14 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) Claudine Bacher Date of Receipt Mailing Address 930 Fifth Avenue 10 2014 27 City Zip Code State Transaction ID: SA11AI.5152 NY New York 10021 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Contribution Name of Employer Occupation Honoring Eleanor Roosevelt Founding Chair Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Polly Cleveland Date of Receipt Mailing Address 20 W 72nd Street, Apt. 506 10 27 2014 City State Zip Code Transaction ID: SA11AI.5157 NY New York 10023 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Contribution Name of Employer Occupation Columbia University Adjunct Prof Economics Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Janet Denlinger Date of Receipt Mailing Address 1040 Arcadian Way M M / 11 17 2014 City State Zip Code Transaction ID: SA11AI.5167 NJ Fort Lee 07024 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Contribution Name of Employer Occupation Matrix Biology Institute Scientist Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

9

FOR LINE NUMBER: **PAGE** 7 OF 14 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) Anne Hess Date of Receipt Mailing Address 214 East 18th Street 2014 11 City State Zip Code Transaction ID: SA11AI.5170 NY New York 10003 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer Occupation Self Employed Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joanna Hochman Date of Receipt Mailing Address 425 East 63rd St Apt E3D 10 18 2014 City State Zip Code Transaction ID: SA11AI.5129 NY New York 10065 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Contribution Name of Employer Occupation Hochman Weiner Assoc. Real Estate Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Catherine Kangas Date of Receipt Mailing Address 106 Clearview Ln M = M 2014 10 27 City State Zip Code Transaction ID: SA11AI.5155 CT New Canaan 06840 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer Occupation CEO PRAI Beauty Group Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 8 OF 14 Use separate schedule(s) for each category of the Detailed Summary Page

	1 OIT LINE		· ITAGE	- 0 01	• • •
)	(check only	one)			
	X 11a	11b	11c	12	
	13	14	15	16	17

	e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Tri-State Maxed-Out Women		
Full Name (Last, First, Middle Initial) Donald Kramer		Date of Receipt
Mailing Address 55 Perkins Rd		10 27 2014
City	State Zip Code	Transaction ID : SA11AI.5153
Greenwich	CT 06830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	Contribution
ILS Capital	Chairman/CEO	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General	00 0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Barbara Lowenstein		Date of Receipt
Mailing Address 1025 5th Ave		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	11 20 2014 Transaction ID : SA11AI.5171
New York	NY 10028	Transaction ID : SA11AI.5171 Amount of Each Receipt this Period
FEC ID number of contributing	10020	
federal political committee.	C	1000.00
Name of Employer	Occupation	Contribution
Lowenstein Associates	Literary Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)	<u> </u>	Date of Receipt
Mailing Address 21 E 87th St, Apt 9B		M = M / D = D / Y = Y = Y
City	State Zip Code	11 17 2014
New York	NY 10128	Transaction ID : SA11AI.5173 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	Contribution
N/A	Homemaker	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: **PAGE** 9 OF 14 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) Susan Stern Date of Receipt Mailing Address 39 Park Road 2014 10 City Zip Code State Transaction ID: SA11AI.5131 NY Scarsdale 10583 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer Occupation N/A Volunteer Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... 9500.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X) SCHEDULE B (FEC Form 3X) FOR LINE NUMBER:				BER: PAGE 10 OF 14			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 2 28c 29 3			
Any information copied from such Reports and Statem		ed by any perso	on for the purpose of	soliciting contributions			
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women	e and address of any politic	cal committee to	solicit contributions fi	rom such committee.			
Full Name (Last, First, Middle Initial)			D (D: .)				
A. American Express			Date of Disbursem	ent			
Mailing Address PO Box 360001			11 03	2014			
•	State Zip Code FL 33336-0001		Transaction ID :	SB21B.5181			
Fort Lauderdale Purpose of Disbursement	FL 33336-0001						
Bank Fee			Amount of Each Di	isbursement this Period			
Candidate Name		Category/ Type		7.95			
	nent For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial) B. American Express			Date of Disbursem	_			
Mailing Address PO Box 360001			11 03	2014			
,	State Zip Code FL 33336-0001		Transaction ID :	SB21B.5182			
Purpose of Disbursement Bank Fee			Amount of Each Di	isbursement this Period			
Candidate Name		Category/ Type		29.05			
	nent For: Primary General Other (specify)	,,					
Full Name (Last, First, Middle Initial) C. Chase Paymentech			Date of Disbursem	_			
Mailing Address PO Box 659754			11 03	2014			
San Antonio	State Zip Code TX 78265-8632		Transaction ID :	SB21B.5184			
Purpose of Disbursement Bank Fee			Amount of Foot D	inhuraamant this Davied			
Candidate Name		Category/ Type	Amount of Each Di	isbursement this Period 169.24			
	nent For: Primary General Other (specify)	715-5					
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			1 1 1	206.24			

17

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE	11 0)F 14
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(onlook only					
		Summary Page	X 21b	22 28a	23 28b	24 28c	25 29	26 30b
Any information copied from such Reports and State	mente meu	not he sold or us						
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
Tri-State Maxed-Out Women								
Full Name (Last, First, Middle Initial)								
A. Grand Hyatt Hotel				Date of	Disburseme	ent		
Grand Hyatt Hotel				M M	/ D D		/ Y	Υ
Mailing Address PO Box 20293				10	29	2	014	
Greeley Square Station	01-1-	7'- 0-1-						
City New York	State NY	Zip Code 10001		Transa	action ID : S	B21B.515	8	
Purpose of Disbursement		10001						
Event Space				Amount	of Each Dis	sbursemen	t this P	'eriod
Candidate Name			Category/				3000.	00
Office Cought			Туре		7	-	3000.	.00
Office Sought: House Disburse Senate	ment For: Primary	General						
President	Other (spe							
State: District:	(0)	,, · ·						
Full Name (Last, First, Middle Initial)								
B. Political Compliance Management	Service	es, LLC		Date of	Disburseme	ent		
				M = M	/ D D		/	Y
Mailing Address 1050 17th St NW Ste 590				10	30	2	2014	
City	State	Zip Code		Trans	nation ID . S	P24D E46		
Washington	DC	20036		irans	action ID : S	BZ1B.516	3	
Purpose of Disbursement Accounting Services				Amount	of Foob Die	. h r. a a m. a m	t thin D	Daviad
Candidate Name				Amount	of Each Dis	soursemen	t tills P	renod
Canadate Name			Category/ Type				600	.00
Office Sought: House Disburse	ment For:		.) 0					
Senate	Primary	General						
President	Other (spe	ecify) 🔻						
State: District:								
Full Name (Last, First, Middle Initial) C Political Compliance Management	Sonias	vc 11 C		Date of	Disburseme	ent		
 Political Compliance Management 	Service	o, LLU		M M	/ D D		/ Y	Y
Mailing Address 1050 17th St NW Ste 590				11	10		014	'
City	State DC	Zip Code 20036		Transa	action ID : S	B21B.516	5	
Washington Purpose of Disbursement	DC	20030						
Accounting Services				Amount	of Each Dis	sbursemen	t this P	eriod
Candidate Name			Category/	2 2				-
			Туре		-		600.	.00
	ment For:	Ganaral						
Senate President	Primary Other (spe	General						
State: District:	Culci (spe	√y) ▼						
								_
SUBTOTAL of Disbursements This Page (optional).							4200.	00
TOTAL This Period (last page this line number only	·)							

	Lien consusts asked	FOR LINE	
EMIZED DISBURSEMENTS	Use separate schedule for each category of the Detailed Summary Page	he Concor only	7 one) 22 23 24 25 26 28a 28b 28c 29 30
ny information copied from such Reports and State			
NAME OF COMMITTEE (In Full) Tri-State Maxed-Out Women	ime and address of any p	omicai committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Elizabeth Raden			Date of Disbursement
Mailing Address 455 Park AVe			10 31 2014
City	State Zip Code		
New York	NY 10022		Transaction ID : SB21B.5179
Purpose of Disbursement Event Staffing			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	200.00
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) James Stanton			Date of Disbursement
Mailing Address 235 East 22nd Street #15HI			11 10 2014
City New York	State Zip Code NY 10010		Transaction ID : SB21B.5166
Purpose of Disbursement Graphic Design Services			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	450.00
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Marcia D. Sudolsky			Date of Disbursement
Mailing Address 131 East 93rd Street Apt 10D			10 28 2014
City New York	State Zip Code NY 10128		Transaction ID : SB21B.5175
Purpose of Disbursement Office Supplies Reimbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	300.00
Office Sought: House Disburse	ement For: Primary General	al	
Senate President State: District:	Other (specify) ▼		

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 committies to solicit contributions from such committies. AME OF COMMITTEE (in Full) Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) A. Marcia D. Sudolsky Mailing Address 131 East 93rd Street Apt 10D City Now York NY 10128 Primary Primary Primary Primary Office Sought: Full Name (Last, First, Middle Initial) Mailing Address 131 East 93rd Street Apt 10D City Sanate Primary Primary Primary General Other (specify) Purpose of Disbursement PAC Administrative Consulting Services Cardidate Name Category Address 131 East 93rd Street Apt 10D City Name (Last, First, Middle Initial) Mailing Address 131 East 93rd Street Apt 10D City Naw York Name (Last, First, Middle Initial) Date of Disbursement PAC Administrative Consulting Services Cardidate Name Category Type Date of Disbursement Date of Disbursement Transaction ID: SB218.5176 Amount of Each Disbursement Transaction ID: SB218.5176 Amount of Each Disbursement this Period Category Type State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Transaction ID: SB218.51776 Amount of Each Disbursement Transaction ID: SB218.5177 Amount of Each Disbursement Transaction ID: SB218.5177 Amount of Each Disbursement this Period Category Type Transaction ID: SB218.5177 Amount of Each Disbursement this Period Category Type Transaction ID: SB218.5177 Amount of Each Disbursement this Period Category Type Transaction ID: SB218.5177 Transaction ID: SB218.5177 Amount of Each Disbursement this Period Category Type Transaction ID: SB218.5177 Transaction ID: SB218.5177 Amount of Each Disbursement this Period Category Type Transaction ID: SB218.5177 T	SCHEDULE B (FEC Form 3X)	Llos concrete askadula (-)	FOR LINE	-	PAGE 13 OF 14
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMINTTEE (in Full) Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) A. Marcia D. Sudolsky Mailing Address 131 East 93rd Street Apt 10D City State Zip Code New York NY 10128 Purpose of Disbursement PAC Administrative Consulting Services Candidate Name Category' Type Office Sought: House Disbursement For: District Full Name (Last, First, Middle Initial) Amount of Each Disbursement PAC Administrative Consulting Services Candidate Name Category' Transaction ID : SB218.5176 Amount of Each Disbursement PAC Administrative Consulting Services Candidate Name Category' John Category' State: District Full Name (Last, First, Middle Initial) Charge of Disbursement PAC Administrative Consulting Services Candidate Name Category' John Category' Sound Date of Disbursement this Period Amount of Each Disbursement PAC Administrative Consulting Services Candidate Name Category' John Category' New York Mailing Address 131 East 93rd Street Apt 10D City Name (Last, First, Middle Initial) District District Transaction ID : SB218.5176 Amount of Each Disbursement Transaction ID : SB218.5177 Amount of Each Disbursement District Transaction ID : SB218.5177 Amount of Each Disbursement Transaction ID : SB218.5177 Amount of Each Disbursement Transaction ID : SB218.5177 Amount of Each Disbursement District Distr	ITEMIZED DISBURSEMENTS		X 21b	22 23	
NAME OF COMMITTEE (in Full) Tri-State Maxed-Out Women Full Name (Last, First, Middle Initial) A. Marcia D. Sudolsky Malling Address 131 East 93rd Street Apt 10D City State Zip Code NY 10128 Purpose of Disbursement PAC Administrative Consulting Services Cardidate Name City State: Cotted Primary General President Other (specify) ▼ State: Disbursement For: State: City State: Category/ Type Transaction ID: SB218.5178 Amount of Each Disbursement this Period Category/ Type Transaction ID: SB218.5178 Date of Disbursement this Period Transaction ID: SB218.5176 Date of Disbursement Transaction ID: SB218.5177 Amount of Each Disbursement Transaction ID: SB218.5177 Transaction ID: SB218.5178 Transaction ID: SB218.5				on for the purpose of	
Marcia D. Sudolsky Mailing Address 131 East 93rd Street Apt 10D City New York Now	NAME OF COMMITTEE (In Full)	ie and address of any point	car committee to	SOUCH COMMISSIONS II	om such committee.
Mailing Address 131 East 93rd Street Apt 10D				Data of Diahumaana	
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Senate President Other (specify) Tother	Office Squaht: House Dishursen	aant Far	Туре		323.00
Full Name (Last, First, Middle Initial) Marcia D. Sudolsky Mailing Address 131 East 93rd Street Apt 10D City State Zip Code New York NY 10128 Purpose of Disbursement PAC Administrative Consulting Services Candidate Name Category/ Type District: Date of Disbursement Category/ Type Category/ Type Date of Disbursement Dr: Senate Primary General Other (specify) Mailing Address 131 East 93rd Street Apt 10D City New York NY 10128 Date of Disbursement this Period Transaction ID: SB21B.5176 Amount of Each Disbursement this Period Date of Disbursement Date of Disbursement Dr: Senate Primary General NY 10128 Transaction ID: SB21B.5177 Transaction ID: SB21B.5177 Amount of Each Disbursement Category/ Type Transaction ID: SB21B.5177 Amount of Each Disbursement Dr: Category/ Type Transaction ID: SB21B.5177 Amount of Each Disbursement this Period Category/ Type Transaction ID: SB21B.5177 Amount of Each Disbursement this Period Category/ Type Transaction ID: SB21B.5177 Amount of Each Disbursement this Period Category/ Type Transaction ID: SB21B.5177 Amount of Each Disbursement this Period Category/ Type 1000.00	Senate	Primary General			
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Marcia D. Sudolsky Mailing Address 131 East 93rd Street Apt 10D City State Zip Code New York NY 10128 Purpose of Disbursement PAC Administrative Consulting Services Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President State: District: Substortal of Disbursements This Page (optional)	Senate President	Primary General			
Mailing Address 131 East 93rd Street Apt 10D City New York Purpose of Disbursement PAC Administrative Consulting Services Candidate Name Category/ Type Office Sought: House Senate President President State: District: Substate Zip Code NY 10128 Transaction ID: SB21B.5177 Amount of Each Disbursement this Period Category/ Type 1000.00 11 19 2014 Transaction ID: SB21B.5177 Amount of Each Disbursement this Period Category/ Type Senate Primary General Other (specify) ▼ Substate: Substate: Substate: Substate: Substate: Disbursements This Page (optional)	Full Name (Last, First, Middle Initial) C. Marcia D. Sudolsky				
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Candidate Name Category/ Type Type Category/ Type Category/ Type 1000.00 Office Sought: House Senate Primary General President Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)					
Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Substitution: State Disbursements This Page (optional)				Amount of Each Di	
30BTOTAL OF DISDUISEMENTS THIS Page (optional)	Senate President	Primary General	. 780		
	SUBTOTAL of Dishursements This Page (ontional)				1825.00
TOTAL This Period (lest page this line number only)	COSTOTAL OF BIODUISCINGTING THIS Tage (optional)				

SCHEDULE B (FEC Form 3X)	Har sament 1 2 2 2 2	, FOR LINE	NUMBER:	PAGE 14 OF 14
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orling	,	
	Detailed Summary Page		22 X 23 28b	24 25 26 28c 29 30
Any information copied from such Reports and Statem				
or for commercial purposes, other than using the name	ne and address of any poli	tical committee to	solicit contributions fr	om such committee.
NAME OF COMMITTEE (In Full)				
Tri-State Maxed-Out Women				
Full Name (Last, First, Middle Initial)				
A. ALMA ADAMS FOR CONGRESS			Date of Disburseme	
Mailing Address PO BOX 20622			10 30	2014
City	State Zip Code		Transaction ID : S	PD22 E402
GREENSBORO	NC 27420		Transaction iD .	DD23.3103
Purpose of Disbursement Contribution			Amount of Each Di	sbursement this Period
Candidate Name		Category/		2500.00
ALMA SHEALEY ADAMS		Type		2500.00
	nent For: 2014			
	Primary			
State: NC District: 12	Carlor (opcony)			
Full Name (Last, First, Middle Initial)				
B. BRENDA LAWRENCE FOR CONC	GRESS		Date of Disburseme	ent
			M = M / D = D	/ Y = Y = Y = Y
Mailing Address PO BOX 3060			10 30	2014
•	State Zip Code		Transaction ID : S	SB23.5161
SOUTHFIELD Purpose of Disbursement	MI 48037			
Contribution			Amount of Each Di	sbursement this Period
Candidate Name		Category/		
BRENDA LULENAR LAWRENCE		Type		1000.00
	nent For: 2014			
	Primary General			
President State: MI District: 14	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
FRIENDS OF MARY LANDRIEU, I	NC.		Date of Disburseme	ent
			M M / D D	/ Y = Y = Y = Y
Mailing Address 700 13TH STREET NW SUITE 600			11 17	2014
	State Zip Code		Towns of the ID (D00 5400
WASHINGTON	DC 20005		Transaction ID:	ob23.5169
Purpose of Disbursement Contribution				
Candidate Name			Amount of Each Di	sbursement this Period
MARY L LANDRIEU		Category/ Type		2500.00
	nent For: 2014	Турс	7	7
	Primary General			
President	Other (specify) ▼			
State: LA District: 00	Runoff			
OUDTOTAL (CD:)				6000.00
SUBTOTAL of Disbursements This Page (optional)		·····•		0000.00
TOTAL This Period (last page this line number only)				6000.00