PAGE 1 / 16

Image# 14952403873

## 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 ▼	Example: If typing, type over the lines.	12FE4M5
Tri-State Maxed-Out Wo	omen		1
ADDRESS (number and street)	445 Park Avenue		
Check if different	9th Floor		
than previously reported. (ACC)	New York		NY 10022 -
2. FEC IDENTIFICATION NUM	MBER ▼ CIT	Υ▲	STATE ▲ ZIP CODE ▲
C C00488387		S THIS EPORT X NEW (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report	20 (M2) May 20 (M	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Mar	20 (M3) Jun 20 (M	Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) Jul 20 (M	7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15	(c) 12-Day	Primary (12P)	X General (12G) Runoff (12R)
Quarterly Report (Q2	PRE-Election Report for the:	Convention (12C)	Special (12S)
October 15 Quarterly Report (Q3	)		
January 31 Year-End Report (YE	) Election	n on 11 04	in the State of NY
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Report for the:	M = M / D = D	/ Y Y Y Y Y Y in the
	Election	n on	State of
5. Covering Period 10	01 2014	through 10	M / D D / Y Y Y Y Y Y 15 2014
I certify that I have examined this	Report and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	Marcia Dickstein Sudolsky		
Signature of Treasurer Marcia	Dickstein Sudolsky	[Electronically Filed]	Date 10 / 23 / 2014
NOTE: Cubmission of follow	uro or incomplete information	move outlinest the management of	a this Deposit to the penaltics of 0 1100 0007
	ous, or incomplete information	i may subject the person signir	g this Report to the 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 2014 10 2014 Report Covering the Period: 15 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 58427.97 Beginning of Reporting Period..... 179875.56 13000.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 71427.97 280899.38 6(a) and 6(c) for Column B)..... 15328.59 224800.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 56099.38 56099.38 (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:	01 2014	To: 10 15 / Y Y Y Y
I. Receipts	COLUMN A	COLUMN B
i. Heceipts	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10500.00	176150.00
(i) iternized (use scriedule A)		
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	10500.00	176350.00
· ///		
(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	40500.00	177350.00
Totals to Line 33, page 5)	10500.00	177350.00
. Transfers From Affiliated/Other		0.00
Party Committees	0.00	0.00
s. All Loans Received	0.00	0.00
. All LOGIS HECCIVES		0.00
Loan Pongyments Possived	0.00	0.00
. Loan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
5. Refunds of Contributions Made		0.00
to Federal Candidates and Other		
Political Committees	2500.00	2500.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	25.56
3. 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
(c) Total Transfers (add 18(a) and 18(b))  7. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	13000.00	179875
. Total Federal Receipts		
(subtract Line 18(c) from Line 19) ▶	13000.00	179875.56

#### **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	4328.59	35800.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	4328.59	35800.00
22.	Transfers to Affiliated/Other Party		7
3	CommitteesContributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	11000.00	189000.00
24.	Independent Expenditures (use Schedule E)	0.00	0.00
25.	Coordinated Party Expenditures (2 U.S.C. §441a(d))		7 7 7
	(use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
29.	Other Disbursements	0.00	0.00
-0.	Carior Dissurdentiante	7	
80.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(1) III I O	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
81.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15328.59	224800.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	15000 50	004000.00
	from Line 31)▶	15328.59	224800.00

#### **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)	10500.00	177350.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10500.00	177350.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4328.59	35800.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	4328.59	35800.00

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

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

6 OF 16 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 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) Stephanie Lynn Ackler Date of Receipt Mailing Address 465 West End, #2C 01 2014 10 City State Zip Code Transaction ID: SA11AI.5084 NY New York 10024 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer Occupation Wells Fargo Advisors LLC Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Anne Hess Date of Receipt Mailing Address 214 East 18th Street 10 80 2014 City State Zip Code Transaction ID: SA11AI.5110 NY 10003 New York Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Contribution Name of Employer Occupation Self Employed Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  C. Karen Karpowich		Date of Receipt
Mailing Address 125 E 71st Street		10 01 2014
City	State Zip Code	Transaction ID : SA11AI.5094
New York	NY 10021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1500.00
Name of Employer	Occupation	Contribution
MAI	Non-profit Executive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2500.00	

SUBTOTAL of Receipts This Page (optional).....

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

3500.00

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

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

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(che	eck only	or	ne)							
×	11a		11b		11c		12			
	13		14		15		16	;		17

	Statements may not be sold or used by any pers 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)  Laura Maloney  Mailing Address 372 5th Ave, #9D  City New York  FEC ID number of contributing federal political committee.  Name of Employer  Panthera  Receipt For:  Primary General Other (specify)	State Zip Code NY 10018  C  Occupation Chief Operating Officer  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  10 01 2014  Transaction ID: SA11AI.5086  Amount of Each Receipt this Period  1000.00  Contribution
Full Name (Last, First, Middle Initial)  Sharon Patrick  Mailing Address 119 East 84th Street PH  City New York  FEC ID number of contributing federal political committee.  Name of Employer Patrick Partners Inc.  Receipt For: Primary General Other (specify)	State Zip Code NY 10028  C  Occupation CEO  Aggregate Year-to-Date ▼  5000.00	Date of Receipt  10 01 2014  Transaction ID: SA11AI.5088  Amount of Each Receipt this Period  1000.00  Contribution
Full Name (Last, First, Middle Initial)  David Paul  Mailing Address 2330 Newtown Ave, #5A-W  City Astoria  FEC ID number of contributing federal political committee.  Name of Employer  NYC Dept of Education  Receipt For:  Primary General Other (specify)	State Zip Code NY 11102  C  Occupation Teacher  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  10 10 2014  Transaction ID: SA11AI.5098  Amount of Each Receipt this Period  1000.00  Contribution
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	3000.00
TOTAL This Period (last page this line number	only)	

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

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

16

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) Cynthia Rothstein Date of Receipt Mailing Address 1050 Park Avenue 2014 10 02 City Zip Code State Transaction ID: SA11AI.5091 NY New York 10028 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer Occupation Retired Teacher Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Sale Date of Receipt Mailing Address 151 W 74th, #9A 10 01 2014 City State Zip Code Transaction ID: SA11AI.5082 NY New York 10024 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Contribution Name of Employer Occupation State University of New York Health Care Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Barbara Steiner Date of Receipt Mailing Address 101 West 12th Street 19K M M / 02 2014 10 City Zip Code State Transaction ID: SA11AI.5090 NY New York 10011 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Contribution Name of Employer Occupation Retired Stockbroker N/AReceipt 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).....

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

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

16

for each category of the 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) Shari Weiner Date of Receipt Mailing Address 425 East 63rd St, #30D 10 02 2014 City Zip Code State Transaction ID: SA11AI.5092 NY New York 10065 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer Occupation Murphy McKeon PC Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) В. 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)..... 10500.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF 16						
ITEMIZED RECEIPTS		arate schedule(s) category of the	(check only one)						
		Summary Page	11a 11b 11c 12 13 14 15 X 16 17						
Any information copied from such Reports and S	tataments may not be se	ld or used by any r							
or for commercial purposes, other than using the	name and address of ar	ny political committe	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Tri-State Maxed-Out Women									
Full Name (Lost First Middle Initial)									
Full Name (Last, First, Middle Initial)  A. ANN CALLIS FOR CONGRESS			Date of Receipt						
Mailing Address 517 CHAPMAN ST			M = M / D = D / Y = Y = Y						
			10 14 2014						
City	State Zip Coo	de	Transaction ID : SA16.5151						
EDWARDSVILLE	IL 62025		Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C C00544486		2500.00						
			Refund of 3/28/14 Primary contribution						
Name of Employer	Occupation		Refund of 3/26/14 Filmary contribution						
Receipt For: 2014			_						
Primary General	Aggregate Year-to-Date	<b>●</b> ▼	_						
Other (specify) ▼		2500.00							
	7								
Full Name (Last, First, Middle Initial)									
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EDULE B (FEC Form 3X)	Hoo comments and the	(a) I -	E NUMBER:		PAGE	11 (	OF 16
ZED DISBURSEMENTS	Use separate schedule for each category of the	e (6/100K 6/		y one) 22 23			20
	Detailed Summary Pag			23 28b	24 28c	25 29	30
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IE OF COMMITTEE (In Full)							
-State Maxed-Out Women							
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ng Address PO Box 360001			10	01		2014	Y
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didate Name		ـــــا إ	Amount	of Each Di	sburseme	nt this I	Period
-State Maxed-Out Women	Category/ Type				79	9.71	
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Mailling Address 2201 Wisconsin Avenue, NW, #320  City	SC	CHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 1						iE 12	12 OF 16		
Detailed Summary Page    27   28a   28b   20c   29   30b   30c	ITI	EMIZED DISBURSEMENTS			(c		-	·							
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions of for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  Tri-State Maxed-Out Women  Full Name (Last, First, Middle Initial)  A. Gilbert & Wolfand PC  Mailing Address 2201 Wisconsin Avenue, NW, #320  City State Zip Code DC 20007  Purpose of Disbursement Accounting Services  Candidate Name  Category/ Type  Prission Disbursement For:  Full Name (Last, First, Middle Initial)  B. Elizabeth Raden  Mailing Address  Candidate Name  City State Zip Code NY 10022  Transaction ID: SB218.5127  Amount of Each Disbursement this Period  City State Zip Code NY 10022  Transaction ID: SB218.5127  Amount of Each Disbursement this Period  Category/ Type  City State Zip Code  Office Sought: House Disbursement For:  Full Name (Last, First, Middle Initial)  C. Restaurant Marketing Associates  Mailing Address 2055 L St. NW  City State Zip Code  Office Sought: Senate Primary General  Other (specify) ▼  State Zip Code  Transaction ID: SB218.5127  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB218.5127  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB218.5127  Amount of Each Disbursement  Transaction ID: SB218.5127  Amount of Each Disbursement  Full Name (Last, First, Middle Initial)  C. Restaurant Marketing Associates  Mailing Address 2055 L St. NW  City State Zip Code  Washington DC 20336  Purpose of Disbursement  Event expenses  Cardidate Name  Office Sought: House Primary General  Disbursement For:  Transaction ID: SB218.5097  Amount of Each Disbursement Ithis Period  Category/ Type  1498.88						×									
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, Frist, Middle Initial)  A. Gilbert & Wolfand PC  Mailing Address 2201 Wisconsin Avenue, NW, #320  City State Zip Code DC 20007  Purpose of Disbursement Accounting Services  Candidate Name  Category/ Type  Transaction ID : \$8218.5096  Amount of Each Disbursement For:  City State Zip Code NY 10022  Full Name (Last, Frist, Middle Initial)  B. Elizabeth Raden  Mailing Address  City State Zip Code NY 10022  Furpose of Disbursement PAC Event Services  Candidate Name  Category/ Type  Office Sought: House Disbursement For:  City State Zip Code NY 10022  Furpose of Disbursement PAC Event Services  Candidate Name  Category/ Type  Office Sought: House Disbursement For:  City State Zip Code NY 10022  Furpose of Disbursement For:  Category/ Type  Office Sought: House Disbursement For:  City State Zip Code Ny 10022  Transaction ID : \$8218.5127  Amount of Each Disbursement  Disbursement For:  City State Zip Code Ny 10022  Transaction ID : \$8218.5127  Amount of Each Disbursement  Disbursement  District:  Full Name (Last, Frist, Middle Initial)  C. Restraurant Marketing Associates  Mailing Address 2055 L St. NW  City State Zip Code Weshington DC 20036  Purpose of Disbursement  City Category/ Type  Office Sought: House Disbursement For:  City State Zip Code Weshington DC 20036  Purpose of Disbursement  Disbursement For:  Cardidate Name  Office Sought: House Disbursement For:  City State Zip Code Weshington DC 20036  Purpose of Disbursement  Disbursement For:  Category/ Type  1498.88	_		<u> </u>												
Full Name (Last, First, Middle Initial)  A. Gilbert & Wolfand PC  Mailing Address 2201 Wisconsin Avenue, NW, #320  City State Zip Code Washington DC 20007  Purpose of Disbursement Accounting Services  Candidate Name  Office Sought: House President Primary General Primary General Primary General Primary General Primary General President State: District: President State: Presi															
Full Name (Last, First, Middle Initial)  A. Gilbert & Wolfand PC  Mailing Address 2201 Wisconsin Avenue, NW, #320  City State Zip Code DC 20007  Purpose of Disbursement Accounting Services  Candidate Name  City State District:  Full Name (Last, First, Middle Initial)  B. Elizabeth Raden  Mailing Address  City State Zip Code DC 20007  Primary General Primary Gener		NAME OF COMMITTEE (In Full)													
A. Gilbert & Wolfand PC  Mailing Address 2201 Wisconsin Avenue, NW, #320  City State Zip Code Disbursement Accounting Services  Candidate Name  Office Sought: President Disbursement For: Senate Primary General Disbursement  State: District: Primary General Disbursement For: Senate Primary 10022  Purpose of Disbursement For: Senate Primary General Disbursement For: Senate Primary 10022  Transaction ID : SB21B.5096  Amount of Each Disbursement this Period  Category/ 1194.50  Date of Disbursement  Transaction ID : SB21B.5096  Transaction ID : SB21B.5096  Transaction ID : SB21B.5096  Amount of Each Disbursement this Period  Category/ 10022  Transaction ID : SB21B.5097  Transaction ID : SB21B.5127  Transaction ID : SB21B.5127  Amount of Each Disbursement  Date of Disbursement  Date of Disbursement this Period  Category/ 200.00  Office Sought: House Disbursement For: Senate President Other (specify) ▼  State: District:  Transaction ID : SB21B.5097  Transaction ID : SB21B.5097  Transaction ID : SB21B.5097  Amount of Each Disbursement this Period  Category/ 200.00  Transaction ID : SB21B.5097  Transaction ID : SB21B.5097  Transaction ID : SB21B.5097  Amount of Each Disbursement this Period  Category/ 200.00  State Zip Code Disbursement For: Senate Primary General Primary General Primary General Primary General Primary General Disbursement For: Senate President District:  SubstortAL of Disbursements This Page (optional)	$ \rangle$	Tri-State Maxed-Out Women													
Mailing Address 2201 Wisconsin Avenue, NW, #320  City State Zip Code Washington DC Z0007  Purpose of Disbursement Accounting Services  Candidate Name		Full Name (Last, First, Middle Initial)													
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try information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliditing contributions from such committee.  NAME OF COMMITTEE (in Full)  Tri-State Maxed-Out Women  Full Name (Last, First, Middle Initial)  Mailing Address 13t East 93rd Street Apt 10D  City State Zip Code Purpose of Disbursement PAC Consulting  Candidate Name  Category/ District  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code Purpose of Disbursement  Full Name (Last, First, Middle Initial)  Date of Disbursement  Amount of Each Disbursement  Cardidate Name  Category/ Type  Office Sought: House Disbursement For:  Senate President Other (specify)   Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Transaction ID: \$8218.5128  Amount of Each Disbursement  Amount of Each Disbursement  Category/ Type  Office Sought: House Disbursement For:  Senate President Other (specify)   City State Zip Code  Purpose of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For:  City State Zip Code  Purpose of Disbursement  Cardidate Name  Category/ Type  Office Sought: House Disbursement For:  City State Zip Code  Purpose of Disbursement  Cardidate Name  Category/ Type  Office Sought: House Disbursement For:  Cardidate Name  Category/ Type  District  Cardidate Name  Category/ Type						
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Full Name (Last, First, Middle Initial)  - Marcia D. Sudolsky  Mailing Address 131 East 93rd Street Apt 10D  City State Zip Code NY 10128  Purpose of Disbursement PAC Consulting  Candidate Name  Category' Type  Date of Disbursement this Period  Category' Type  Date of Disbursement this Period  Category' Type  Date of Disbursement To:  Category' Type  Date of Disbursement this Period  Category' Type  Date of Disbursement  Amount of Each Disbursement  Category' Type  Date of Disbursement this Period  Category' Type  Date of Disbursement this	NAME OF COMMITTEE (In Full)					
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 14 OF 16
ITEMIZED DISBURSEMENTS	Use separate schedule( for each category of the Detailed Summary Page	(check only	
Any information copied from such Reports and State or for commercial purposes, other than using the na		used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  Tri-State Maxed-Out Women			
Full Name (Last, First, Middle Initial)  A. ALMA ADAMS FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 20622			10 15 2014
City GREENSBORO	State Zip Code NC 27420		Transaction ID : SB23.5150
Purpose of Disbursement Contribution Candidate Name			Amount of Each Disbursement this Period
ALMA SHEALEY ADAMS	ement For: 2014	Category/ Type	1000.00
Senate President	Primary		
State: NC District: 12  Full Name (Last, First, Middle Initial)  BONNIE WATSON COLEMAN FO	OR CONGRESS		Date of Disbursement
Mailing Address 180 UPLAND AVENUE  City	State Zip Code		10 15 2014
EWING Purpose of Disbursement	NJ 08638		Transaction ID : SB23.5147
Contribution Candidate Name BONNIE WATSON COLEMAN FO	OR CONGRESS	Category/ Type	Amount of Each Disbursement this Period 1000.00
	ment For: 2014 Primary		
Full Name (Last, First, Middle Initial) CAIN FOR CONGRESS			Date of Disbursement
Mailing Address P.O. BOX 1523			10 15 2014
City BANGOR Purpose of Disbursement	State Zip Code ME 04402		Transaction ID : SB23.5146
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Contribution Candidate Name		Category/	Amount of Each Disbursement this Period
Contribution Candidate Name EMILY ANN CAIN	ement For: 2014  Primary	Type	Amount of Each Disbursement this Period 2000.00

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NAME OF COMMITTEE (In Full)			
Tri-State Maxed-Out Women			
Full Name (Last, First, Middle Initial)			
A. FRIENDS OF RENTERIA			Date of Disbursement
Mailing Address P.O. BOX 655			10 15 2014
City	tate Zip Code		Transaction ID - CD02 5440
- · · · · · - · · ·	CA 93657		Transaction ID : SB23.5149
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Candidate Name		Category/	2000.00
AMANDA RENTERIA		Туре	2000.00
	nent For: 2014 Primary X General		
President State: CA District: 21	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. Lois Capps for Congress			Date of Disbursement
Mailing Address PO Box 23940			10 15 2014
City	itate Zip Code		
	CA 93121		Transaction ID : SB23.5143
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	0000.00
Lois Capps for Congress		Туре	2000.00
	ent For: 2014		
	Primary General		
State: CA District: 24	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
$^{ extsf{C}_{ extsf{c}}}$ natalie tennant for senate			Date of Disbursement
Mailing Address PO BOX 1063			10 15 2014
City	itate Zip Code		T
	WV 25324		Transaction ID : SB23.5144
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Candidate Name		Category/	
NATALIE TENNANT FOR SENATI	≣	Type	1000.00
	ent For: 2014		
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TOTAL This Period (last page this line number only).			

Any information copied from such Reports and Statements may not be sold or used by any person for the purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  Tri-State Maxed-Out Women  Full Name (Last, First, Middle Initial)  A. TITUS FOR CONGRESS  Mailing Address PO BOX 72454  City State Zip Code NV 89170  Triansaction ID : SB23.5148  Amount of Each Disbursement this Period Category/ Type  Other (specify)  Full Name (Last, First, Middle Initial)  A. House Disbursement For: 2014  Senate President State: NV District: 01  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period Category/ Type  Amount of Each Disbursement this Period Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Senate President Other (specify)  Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)	Hoo concrete ashadula(-)	I .	FOR LINE NUMBER: PAGE 16 OF 16				
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