

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2012"/>	<input type="text" value="90415.18"/>	<input type="text" value="90415.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="90415.18"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="166450.00"/>	<input type="text" value="166450.00"/>
(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="256865.18"/>	<input type="text" value="256865.18"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="43737.19"/>	<input type="text" value="43737.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="213127.99"/>	<input type="text" value="213127.99"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

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).....	166250.00	166250.00
(ii) Unitemized	200.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	166450.00	166450.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	166450.00	166450.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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))..... ▶	166450.00	166450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	166450.00	166450.00

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	16237.19	16237.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16237.19	16237.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	27500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	43737.19	43737.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43737.19	43737.19

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
33. Total Contributions (other than loans) (from Line 11(d), page 3)	166450.00	166450.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	166450.00	166450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16237.19	16237.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16237.19	16237.19

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 71
	<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. Karen Adler
Full Name (Last, First, Middle Initial)

Mailing Address 115 Central Park West

City New York State NY Zip Code 10023

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

Name of Employer The Adler Group Occupation Management Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012
Transaction ID : SA11AI.4425

Amount of Each Receipt this Period
 1000.00

B. Sara Adler
Full Name (Last, First, Middle Initial)

Mailing Address 1900 Sunset Harbor Dr. #GH6

City Miami Beach State FL Zip Code 33139

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

Name of Employer New Israel Fund Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012
Transaction ID : SA11AI.4426

Amount of Each Receipt this Period
 1000.00

C. Robin Albin
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 480

City North Salem State NY Zip Code 10560

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

Name of Employer Self employed Occupation Brand Strategist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4428

Amount of Each Receipt this Period
 1000.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Margo Alexander
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 E. 26th St, #10A
 City New York State NY Zip Code 10010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 01 / 22 / 2012
Transaction ID : SA11AI.4430
 Amount of Each Receipt this Period
 1000.00

B. Marlene E. Altman
 Full Name (Last, First, Middle Initial)
 Mailing Address 522 West End Ave.
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 01 / 30 / 2012
Transaction ID : SA11AI.4432
 Amount of Each Receipt this Period
 1000.00

C. Esther Ann Asch
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 E 86th St, Apt 3C
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unknown Occupation Unknown
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 02 / 22 / 2012
Transaction ID : SA11AI.4433
 Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 71
	<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. Roberta Ashkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 East 70th St #2205
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ashkin Law Firm Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 30 / 2012
Transaction ID : SA11AI.4435
 Amount of Each Receipt this Period
1000.00

B. Claudine Bacher
 Full Name (Last, First, Middle Initial)
 Mailing Address 930 Fifth Avenue
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Honoring Eleanor Roosevelt Occupation Founding Chair
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 02 / 2012
Transaction ID : SA11AI.4436
 Amount of Each Receipt this Period
1000.00

C. CARol Becker
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 E. 62nd St 12D
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer William Greenberg Desserts Occupation Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 30 / 2012
Transaction ID : SA11AI.4437
 Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Kathryn Begala
 Full Name (Last, First, Middle Initial)
 Mailing Address 445 Park Ave., 9th Floor
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unknown Occupation Unknown
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012
Transaction ID : SA11AI.4438
 Amount of Each Receipt this Period
 1000.00

B. Patricia Begley
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 West 82nd St, Apt 9
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prizmalite Industries Inc. Occupation Business Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012
Transaction ID : SA11AI.4440
 Amount of Each Receipt this Period
 1000.00

C. Stephanie Bernheim
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 71st St, Apt 6A
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2012
Transaction ID : SA11AI.4442
 Amount of Each Receipt this Period
 2000.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Jane Bevans
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 West End Ave., #8B
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Law Offices of Jane Bevans Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2012
Transaction ID : SA11AI.4444
 Amount of Each Receipt this Period
1000.00

B. Madeline Blinder
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 Cherry Hill Road
 City Princeton State NJ Zip Code 08540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2012
Transaction ID : SA11AI.4446
 Amount of Each Receipt this Period
5000.00

C. Adele Block
 Full Name (Last, First, Middle Initial)
 Mailing Address 535 Park. Ave.
 City New York State NY Zip Code 10065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2012
Transaction ID : SA11AI.4447
 Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 71
	<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. Jane Bryant Quinn
Full Name (Last, First, Middle Initial)

Mailing Address 322 Central Park West, #9C

City New York	State NY	Zip Code 10025
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed	Occupation Journalist
-----------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2012

Transaction ID : SA11AI.4448

Amount of Each Receipt this Period
1000.00

B. Noreen Buckfire
Full Name (Last, First, Middle Initial)

Mailing Address 1175 Park Ave.
#13 - A

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

Name of Employer N/A	Occupation Housewife
-------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	22	/	2012

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period
1000.00

C. Hon. Barbara Buono
Full Name (Last, First, Middle Initial)

Mailing Address 75 Woodbridge Ave.

City Metuchen	State NJ	Zip Code 08840
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FEC ID number of contributing federal political committee. **C**

Name of Employer State of New Jersey	Occupation State Senator
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2012

Transaction ID : SA11AI.4451

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 71
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Ellen Chesler
Full Name (Last, First, Middle Initial)

Mailing Address 1 West 72nd St.

City New York State NY Zip Code 10023

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

Name of Employer Roosevelt Institute Occupation Senior Fellow

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012

Transaction ID : SA11AI.4453

Amount of Each Receipt this Period
 1000.00

B. Terri Childs
Full Name (Last, First, Middle Initial)

Mailing Address 117 East 57th St, Apt 42C

City New York State NY Zip Code 10022

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

Name of Employer Self employed Occupation Theater producer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012

Transaction ID : SA11AI.4455

Amount of Each Receipt this Period
 1000.00

C. Adina Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 875 Fifth Avenue

City New York State NY Zip Code 10065

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

Name of Employer Argosy Books Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11AI.4459

Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Betsy Cohn		Date of Receipt 01 / 12 / 2012 Transaction ID : SA11AI.4461
Mailing Address 1111 Park Avenue		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Helen Cook		Date of Receipt 02 / 21 / 2012 Transaction ID : SA11AI.4463
Mailing Address 207 E 74th St, #6F		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Debra Cooper		Date of Receipt 02 / 20 / 2012 Transaction ID : SA11AI.4465
Mailing Address 290 West End Ave.		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Corcoran	Occupation Real Estate Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Stephanie Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 575 Madison Ave, 10th Fl
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Law Offices of Stephanie R Coe Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2012
Transaction ID : SA11AI.4466
 Amount of Each Receipt this Period
1000.00

B. Betty Cotton
 Full Name (Last, First, Middle Initial)
 Mailing Address 86 Sheldrake Rd.
 City Scarsdale State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 05 / 2012
Transaction ID : SA11AI.4468
 Amount of Each Receipt this Period
1000.00

C. Jenny Crumiller
 Full Name (Last, First, Middle Initial)
 Mailing Address 187 Library Place
 City Princeton State NJ Zip Code 06540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Borough of Princeton Occupation Councilwoman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 22 / 2012
Transaction ID : SA11AI.4470
 Amount of Each Receipt this Period
2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 71
	<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. Abbey Darer
Full Name (Last, First, Middle Initial)

Mailing Address 1025 5th Ave.
9B

City New York State NY Zip Code 10028

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

Name of Employer Abbey Darer Interiors Occupation Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 16 / 2012
Transaction ID : SA11AI.4471

Amount of Each Receipt this Period
1000.00

B. Joan Dean
Full Name (Last, First, Middle Initial)

Mailing Address 25 Central Park West
#5H

City New York State NY Zip Code 10023

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

Name of Employer Self Occupation Political Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 08 / 2012
Transaction ID : SA11AI.4621

Amount of Each Receipt this Period
250.00

C. Virginia Dean
Full Name (Last, First, Middle Initial)

Mailing Address 215 Fair Oak Drive

City Fairfield State CT Zip Code 06824

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

Name of Employer Self employed Occupation Freelance Producer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 18 / 2012
Transaction ID : SA11AI.4472

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Janet Denlinger		Date of Receipt MM / DD / YYYY 01 / 22 / 2012 Transaction ID : SA11AI.4476
Mailing Address 1040 Arcadian Way		Amount of Each Receipt this Period 1000.00
City Fort Lee	State NJ	Zip Code 07024
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1000.00
Name of Employer Matrix Biology Institute	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Barbara Dobkin		Date of Receipt MM / DD / YYYY 02 / 29 / 2012 Transaction ID : SA11AI.4477
Mailing Address 101 Central Park West		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1000.00
Name of Employer Dobkin Family Office	Occupation Philanthropist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Cynthia Drew		Date of Receipt MM / DD / YYYY 01 / 20 / 2012 Transaction ID : SA11AI.4479
Mailing Address 119 E. 84th St 8D		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1000.00
Name of Employer NYSE Euronext	Occupation Finance Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 71
	<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. Patricia Duff
Full Name (Last, First, Middle Initial)
Mailing Address 6 East 84th St, 8D
City New York State NY Zip Code 10028
FEC ID number of contributing federal political committee. **C**
Name of Employer NYSE Euronext Occupation Finance Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 25 / 2012
Transaction ID : SA11AI.4480
Amount of Each Receipt this Period
1000.00

B. Bonnie Engelbardt
Full Name (Last, First, Middle Initial)
Mailing Address 555 Park Avenue, #3W
City New York State NY Zip Code 10065
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Investor, Photographer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2012
Transaction ID : SA11AI.4482
Amount of Each Receipt this Period
1000.00

C. Elissa Epstein
Full Name (Last, First, Middle Initial)
Mailing Address 15 West 63rd St, #17A
City New York State NY Zip Code 10023
FEC ID number of contributing federal political committee. **C**
Name of Employer Unknown Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 15 / 2012
Transaction ID : SA11AI.4485
Amount of Each Receipt this Period
1000.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Jane Epstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 East 71st St.
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4484
 Amount of Each Receipt this Period
 1000.00

B. Judy Evnin
 Full Name (Last, First, Middle Initial)
 Mailing Address 364 E Middle Patent Rd
 City Greenwich State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.4487
 Amount of Each Receipt this Period
 1000.00

C. Bobbie Falk
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Willow Lane
 City Scarsdale State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4489
 Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 19 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Celia Felsher
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 Eagle Knolls Rd.
 City Larchmont State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Reservoir Operations Occupation Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2012
Transaction ID : SA11AI.4491
 Amount of Each Receipt this Period
 1000.00

B. Deborah Fennebresque
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 PArk Ave.
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.4493
 Amount of Each Receipt this Period
 1000.00

C. Jo Fine
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 West 16th St
 City New York State NY Zip Code 10011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harris, Rothenberg Intl Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.4494
 Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 71
	<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. Barbara Fleischman
Full Name (Last, First, Middle Initial)

Mailing Address 870 United Nations Plaza, 37C

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

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

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2012

Transaction ID : SA11AI.4496

Amount of Each Receipt this Period
1000.00

B. Michele Francis
Full Name (Last, First, Middle Initial)

Mailing Address 31 West 16th St, Apt 5

City New York	State NY	Zip Code 10011
------------------	-------------	-------------------

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

Name of Employer The Francis Company	Occupation Principle
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2012

Transaction ID : SA11AI.4498

Amount of Each Receipt this Period
1000.00

C. Cynthia Friedman
Full Name (Last, First, Middle Initial)

Mailing Address 535 Park Ave.
#14C

City New York	State NY	Zip Code 10065
------------------	-------------	-------------------

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

Name of Employer Self	Occupation Private Investor
--------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2012

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4501
 Amount of Each Receipt this Period
 1000.00

B. Karen Friedman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Dolma Road
 City Scarsdale State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Professional Volunteer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4502
 Amount of Each Receipt this Period
 1000.00

C. Marilyn Friedman
 Full Name (Last, First, Middle Initial)
 Mailing Address 895 Park Ave.
 City New York State NY Zip Code 10075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Design Historian
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2012
Transaction ID : SA11AI.4503
 Amount of Each Receipt this Period
 1000.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Gail Furman

Mailing Address 151 East 83rd St

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Self employed Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4504

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Arlyn Gardner

Mailing Address 350 Grace Church Street

City State Zip Code
Rye NY 10580

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4506

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ronnie Ginnott

Mailing Address 650 Lake Avenue

City State Zip Code
Greenwich CT 06830

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

Name of Employer Occupation
Reyburn Music CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2012
Transaction ID : SA11AI.4507

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Diana Goldin		Date of Receipt MM / DD / YYYY 02 / 22 / 2012
Mailing Address 941 Park Avenue		Transaction ID : SA11AI.4508
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Phyllis Goldman		Date of Receipt MM / DD / YYYY 02 / 12 / 2012
Mailing Address 72 Mamaroneck Rd.		Transaction ID : SA11AI.4510
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self employed	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Barbara Goldstein		Date of Receipt MM / DD / YYYY 03 / 01 / 2012
Mailing Address 1035 5th Ave. Apt. 6B		Transaction ID : SA11AI.4512
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 71
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Mindy Goodfriend
Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Avenue, 9th Floor

City New York	State NY	Zip Code 10022
------------------	-------------	-------------------

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

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2012

Transaction ID : SA11AI.4513

Amount of Each Receipt this Period
1000.00

B. Linda Gottlieb
Full Name (Last, First, Middle Initial)

Mailing Address 131 East 66th ST

City New York	State NY	Zip Code 10065
------------------	-------------	-------------------

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

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2012

Transaction ID : SA11AI.4516

Amount of Each Receipt this Period
1000.00

C. Marilyn Gottlieb
Full Name (Last, First, Middle Initial)

Mailing Address 44 West 62nd St.
Apt 12C

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

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

Name of Employer N/A	Occupation Retired Attorney
-------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2012

Transaction ID : SA11AI.4515

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Jill Greiss		Date of Receipt
Mailing Address 372 Madison Avenue		M M M / D D D / Y Y Y Y Y Y 02 / 12 / 2012
City	State	Zip Code
New York	NY	10017
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4518
Name of Employer Financial Guaranty Ins. Co.		Amount of Each Receipt this Period
Occupation Attorney		1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1000.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Guest		Date of Receipt
Mailing Address 38 Country Oaks Rd.		M M M / D D D / Y Y Y Y Y Y 02 / 22 / 2012
City	State	Zip Code
Stanton	NJ	08885
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4520
Name of Employer Self employed		Amount of Each Receipt this Period
Occupation Decorator/designer		1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1000.00	

Full Name (Last, First, Middle Initial) C. Carole Hankin		Date of Receipt
Mailing Address 837 Dune Road		M M M / D D D / Y Y Y Y Y Y 02 / 08 / 2012
City	State	Zip Code
Westhampton Beach	NY	11978
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4522
Name of Employer SYosset Central School Dist.		Amount of Each Receipt this Period
Occupation Superintendent of Schools		1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Jane Harmon		Date of Receipt MM / DD / YYYY 01 / 24 / 2012 Transaction ID : SA11AI.4523
Mailing Address 43 Kettle Creek Rd.		Amount of Each Receipt this Period 1000.00
City Weston	State CT	Zip Code 06883
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Jane Harmon Associates	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Pamela D. Hayes		Date of Receipt MM / DD / YYYY 02 / 29 / 2012 Transaction ID : SA11AI.4525
Mailing Address 360 Central Park West Apt 3B		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Law Offices of Pamela D. Hayes	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Cheryl Hazan		Date of Receipt MM / DD / YYYY 01 / 30 / 2012 Transaction ID : SA11AI.4526
Mailing Address 5 East 22nd St, #23C		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Self employed	Occupation Gallery Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 71
	<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. Elaine Heffner
Full Name (Last, First, Middle Initial)

Mailing Address 90 Riverside Drive
Apt. 9A

City New York State NY Zip Code 10024

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

Name of Employer Self Occupation Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 30 / 2012
Transaction ID : SA11AI.4528

Amount of Each Receipt this Period
1000.00

B. Harriet Helfenbein
Full Name (Last, First, Middle Initial)

Mailing Address 25 Attitash St.

City Chappaqua State NY Zip Code 10514

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

Name of Employer Self employed Occupation Speech Pathologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 27 / 2012
Transaction ID : SA11AI.4529

Amount of Each Receipt this Period
1000.00

C. Anne H. Hess
Full Name (Last, First, Middle Initial)

Mailing Address 214 E. 18th St.

City New York State NY Zip Code 10003

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 22 / 2012
Transaction ID : SA11AI.4531

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 71
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Seema Hingorani		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 25 / 2012 Transaction ID : SA11AI.4532
Mailing Address 4 Nutmeg Lane		Amount of Each Receipt this Period 1000.00
City Darren	State CT	Zip Code 06820
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Judith Hope		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 12 / 2012 Transaction ID : SA11AI.4533
Mailing Address 9 Two Holes of Water		Amount of Each Receipt this Period 1000.00
City E. Hampton	State NY	Zip Code 11937
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Susan Horsfall		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 08 / 2012 Transaction ID : SA11AI.4534
Mailing Address 417 East 60th St, #4		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		
Name of Employer Aegis Holding LLC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 OF 71
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Robin Hubbard
Full Name (Last, First, Middle Initial)
Mailing Address 437 Madison Ave.
City New York State NY Zip Code 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer Unknown Occupation Unknown
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2012
Transaction ID : SA11AI.4536
Amount of Each Receipt this Period
1000.00

B. Fern Hurst
Full Name (Last, First, Middle Initial)
Mailing Address 1060 Fifth Avenue
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 21 / 2012
Transaction ID : SA11AI.4538
Amount of Each Receipt this Period
1000.00

C. Marla Isackson
Full Name (Last, First, Middle Initial)
Mailing Address 6 Peter Lynas Ct.
City Tenafly State NJ Zip Code 07670
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 27 / 2012
Transaction ID : SA11AI.4539
Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 71
	<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. Susan Jacobson
Full Name (Last, First, Middle Initial)

Mailing Address 812 Park Ave.

City New York State NY Zip Code 10021

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4540

Amount of Each Receipt this Period
 1000.00

B. Suzi Jaffe
Full Name (Last, First, Middle Initial)

Mailing Address 784 Park Ave.
#5A

City New York State NY Zip Code 10021

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

Name of Employer SDJ Associates Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2012
Transaction ID : SA11AI.4541

Amount of Each Receipt this Period
 1000.00

C. Ellen Jewett
Full Name (Last, First, Middle Initial)

Mailing Address 257 West 11th St

City New York State NY Zip Code 10014

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

Name of Employer BMO Capital Markets Occupation Investment banking

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.4542

Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Barbara Kane		Date of Receipt MM / DD / YYYY 02 / 29 / 2012 Transaction ID : SA11AI.4544
Mailing Address 445 Park Avenue, 9th Fl		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Karen Karpowich		Date of Receipt MM / DD / YYYY 02 / 21 / 2012 Transaction ID : SA11AI.4546
Mailing Address 125 E 71st St		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MAI	Occupation Non-profit Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Karen Kasner		Date of Receipt MM / DD / YYYY 02 / 21 / 2012 Transaction ID : SA11AI.4548
Mailing Address 17 Murray Hill Road		Amount of Each Receipt this Period 1000.00
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Attorney, advocate, volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 71
	<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. Patricia Kenner
Full Name (Last, First, Middle Initial)
Mailing Address 720 Park Ave.
City New York State NY Zip Code 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer Campus Coach Line Occupation Executive
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 27 / 2012**
Transaction ID : SA11AI.4550
Amount of Each Receipt this Period **1000.00**

B. Morley Klausner
Full Name (Last, First, Middle Initial)
Mailing Address 245 7th Ave., Apt 4B
City New York State NY Zip Code 10001
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 16 / 2012**
Transaction ID : SA11AI.4551
Amount of Each Receipt this Period **1000.00**

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

Date of Receipt **01 / 12 / 2012**
Transaction ID : SA11AI.4553
Amount of Each Receipt this Period **1000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 71
	<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. Sarah Kovner
Full Name (Last, First, Middle Initial)

Mailing Address 27 West 67th St.

City New York State NY Zip Code 10023

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : SA11AI.4554

Amount of Each Receipt this Period
1000.00

B. Susan Kraus
Full Name (Last, First, Middle Initial)

Mailing Address 54 East 80 th St

City New York State NY Zip Code 10075

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012

Transaction ID : SA11AI.4555

Amount of Each Receipt this Period
1000.00

C. Dale Kurland
Full Name (Last, First, Middle Initial)

Mailing Address 25 E 86th St

City New York State NY Zip Code 10028

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

Name of Employer Unknown Occupation financial Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2012

Transaction ID : SA11AI.4557

Amount of Each Receipt this Period
1000.00

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

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

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

FOR LINE NUMBER: PAGE 34 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Jill Lafer

Mailing Address 1060 Fifth Avenue

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
Self Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4559

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Joanne Lang

Mailing Address 445 Park Ave.

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2012
Transaction ID : SA11AI.4560

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Joanne Lang

Mailing Address 445 Park Ave.

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2012
Transaction ID : SA11AI.4561

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Deborah Larkin		Date of Receipt MM / DD / YYYY 02 / 29 / 2012 Transaction ID : SA11AI.4562
Mailing Address 70 West Red Oak Lane		Amount of Each Receipt this Period 1000.00
City White Plains	State NY	Zip Code 10604
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer USTA Serves	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Susan Levkoff		Date of Receipt MM / DD / YYYY 02 / 22 / 2012 Transaction ID : SA11AI.4564
Mailing Address 27 N Moore St, Apt 7A		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Tondra Lynford		Date of Receipt MM / DD / YYYY 02 / 08 / 2012 Transaction ID : SA11AI.4566
Mailing Address 785 Fifth Ave, #6D		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self employed	Occupation Psychotherapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Wendy Mackenzie		Date of Receipt MM / DD / YYYY 01 / 24 / 2012 Transaction ID : SA11AI.4568
Mailing Address 829 Park Ave.		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Public Affairs Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Joan Marks		Date of Receipt MM / DD / YYYY 02 / 09 / 2012 Transaction ID : SA11AI.4569
Mailing Address 445 Park Ave.		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Hon. Beth Mason		Date of Receipt MM / DD / YYYY 02 / 08 / 2012 Transaction ID : SA11AI.4570
Mailing Address 921 Hudson St		Amount of Each Receipt this Period 1000.00
City Hoboken	State NJ	Zip Code 07039
FEC ID number of contributing federal political committee. C		
Name of Employer City of Hoboken	Occupation Councilwoman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 71
	<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 (Last, First, Middle Initial) A. Va Maughn		Date of Receipt
Mailing Address 730 Park Ave.		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10021
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4572
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Nancy May		Date of Receipt
Mailing Address 501 Westport Ave. #205		<input type="text" value="02"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
Norwalk	CT	06851
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4574
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
BoardBench Companies LLC	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Joyce Menschel		Date of Receipt
Mailing Address 1035 Fifth Avenue, 7B		<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10028
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4576
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
N/A	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 38 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4578
 Amount of Each Receipt this Period
 1000.00

B. Rachel Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Bayberry St.
 City Bronxville State NY Zip Code 10704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Ballet Theater Occupation Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4580
 Amount of Each Receipt this Period
 1000.00

C. Alice Netter
 Full Name (Last, First, Middle Initial)
 Mailing Address 888 Park Ave.
 City New York State NY Zip Code 10075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2012
Transaction ID : SA11AI.4583
 Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name (Last, First, Middle Initial) A. Nancy Newhouse		Date of Receipt MM / DD / YYYY 02 / 22 / 2012 Transaction ID : SA11AI.4587
Mailing Address 154 West 88th St		Amount of Each Receipt this Period 2000.00
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Felicity Nitz		Date of Receipt MM / DD / YYYY 02 / 12 / 2012 Transaction ID : SA11AI.4585
Mailing Address 4645 Independence Ave.		Amount of Each Receipt this Period 1000.00
City Bronx	State NY	Zip Code 10471
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Andrea Pastor		Date of Receipt MM / DD / YYYY 02 / 22 / 2012 Transaction ID : SA11AI.4589
Mailing Address 19 East 88th St, Apt 5H		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 71
	<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

Full Name (Last, First, Middle Initial) A. Sharon Patrick		Date of Receipt
Mailing Address 119 East 84th St. PH		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.4591
Name of Employer Patrick Partners Inc.	Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="3000.00"/>
	<input type="text" value="3000.00"/>	

Full Name (Last, First, Middle Initial) B. Sharon Patrick		Date of Receipt
Mailing Address 119 East 84th St. PH		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.4592
Name of Employer Patrick Partners Inc.	Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1250.00"/>
	<input type="text" value="4250.00"/>	

Full Name (Last, First, Middle Initial) C. Susan Patricof		Date of Receipt
Mailing Address 830 Park Ave. 11C		<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.4593
Name of Employer N/A	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 41 OF 71
	<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. Judy Peck
Full Name (Last, First, Middle Initial)

Mailing Address 1 West 72nd St

City New York State NY Zip Code 10023

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

Name of Employer Self employed Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
02 / 27 / 2012
Transaction ID : SA11AI.4594

Amount of Each Receipt this Period
1000.00

B. Daphne Philipson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 242

City Ardsley-on-Hudson State NY Zip Code 10503

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

Name of Employer N/A Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
01 / 24 / 2012
Transaction ID : SA11AI.4596

Amount of Each Receipt this Period
1000.00

C. Abigail Pogrebin
Full Name (Last, First, Middle Initial)

Mailing Address 941 Park Avenue - 14C

City New York State NY Zip Code 10028

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

Name of Employer Self employed Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
02 / 18 / 2012
Transaction ID : SA11AI.4608

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 71
	<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 (Last, First, Middle Initial)
A. Letty Pogrebin

Mailing Address 33 West 67th St

City New York State NY Zip Code 10023

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2012
Transaction ID : SA11AI.4610

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
B. Vivian Polak

Mailing Address 31 West 16th St.

City New York State NY Zip Code 10024

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4612

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
C. Julie Ratner

Mailing Address 95 Ely Brook to Hands Cr. Rd.

City East Hampton State NY Zip Code 11937

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

Name of Employer Self Occupation Not for profit foundation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2012
Transaction ID : SA11AI.4613

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Bonita Roche-Bronfman
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 West 54th St
 City New York State NY Zip Code 10019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unknown Occupation Unknown
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.4614
 Amount of Each Receipt this Period
 1000.00

B. Lysa Rohan
 Full Name (Last, First, Middle Initial)
 Mailing Address 3715 Cragmont Ave.
 City Dallas State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation Writer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4616
 Amount of Each Receipt this Period
 1000.00

C. Linda Rosensweig
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Carthage Rd.
 City Scarsdale State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Tennis Pro
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4607
 Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Laura Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 770 Park Avenue
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 24 / 2012
Transaction ID : SA11AI.4606
 Amount of Each Receipt this Period
1000.00

B. Rosina Rubin
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1133
 City New City State NY Zip Code 10956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attitude NY Occupation VP/Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 16 / 2012
Transaction ID : SA11AI.4602
 Amount of Each Receipt this Period
1000.00

C. Susan Rubinstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 435 East 52nd St.
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Marketing Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 27 / 2012
Transaction ID : SA11AI.4603
 Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 71
	<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. Lori Sackler
Full Name (Last, First, Middle Initial)

Mailing Address 238 Engle St.

City Tenafly State NJ Zip Code 07670

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

Name of Employer MSSB Occupation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012

Transaction ID : SA11AI.4604

Amount of Each Receipt this Period
 1000.00

B. Deborah Sale
Full Name (Last, First, Middle Initial)

Mailing Address 151 West 74th St #9A

City New York State NY Zip Code 10023

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

Name of Employer Hospital for Special Surgery Occupation EVP, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2012

Transaction ID : SA11AI.4605

Amount of Each Receipt this Period
 1000.00

C. Barbara Salmanson
Full Name (Last, First, Middle Initial)

Mailing Address 190 East 72nd St

City New York State NY Zip Code 10021

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11AI.4618

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 71
<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

Full Name (Last, First, Middle Initial) A. Reshma Saujani		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 30 / 2012 Transaction ID : SA11AI.4601
Mailing Address 50 Avenue A #5C		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10009
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer City of NY	Occupation Dep. Public Advocate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Janice Schacter		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 16 / 2012 Transaction ID : SA11AI.4600
Mailing Address 233 East 78th St		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Self	Occupation Human Rights Advocate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Harriet Schliefer		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 20 / 2012 Transaction ID : SA11AI.4599
Mailing Address 49 Carolyn Place		Amount of Each Receipt this Period 1000.00
City Chappaqua	State NY	Zip Code 10514
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Student Advocacy Inc.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 OF 71
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Marcia Schloss		Date of Receipt MM / DD / YYYY 02 / 22 / 2012 Transaction ID : SA11AI.4598
Mailing Address 895 Park Ave. 13C		Amount of Each Receipt this Period 1000.00
City New York	State NY	
Zip Code 10075		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Nadine Schramm		Date of Receipt MM / DD / YYYY 02 / 22 / 2012 Transaction ID : SA11AI.4620
Mailing Address 160 E. 48th St. 15T		Amount of Each Receipt this Period 1000.00
City New York	State NY	
Zip Code 10017		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Budd Enterprises Ltd.	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Brett Schulman		Date of Receipt MM / DD / YYYY 02 / 22 / 2012 Transaction ID : SA11AI.4633
Mailing Address 110 East End Ave., 2C		Amount of Each Receipt this Period 500.00
City New York	State NY	
Zip Code 10028		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 71
<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. Ethan Schulman
Full Name (Last, First, Middle Initial)

Mailing Address 110 EAst End Ave., 2C

City New York State NY Zip Code 10028

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

Name of Employer Unknown Occupation Unknown

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
 02 / 22 / 2012

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period
500.00

B. Beatrice Seravello
Full Name (Last, First, Middle Initial)

Mailing Address 119 E 84th St, 9A

City New York State NY Zip Code 10028

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

Name of Employer Blank Rome LLP Occupation Chief Strategy Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.4638

Amount of Each Receipt this Period
1000.00

C. Geri Shapiro
Full Name (Last, First, Middle Initial)

Mailing Address 88 Highland Rd.

City Scarsdale State NY Zip Code 10583

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

Name of Employer Senator Gillibrand's Office Occupation Senate Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2012

Transaction ID : SA11AI.4640

Amount of Each Receipt this Period
1000.00

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

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

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

FOR LINE NUMBER: PAGE 49 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Selma Shapiro

Mailing Address 169 E 69th St

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.4642

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Jill Smith

Mailing Address 73 Wooster St.

City State Zip Code
New York NY 10012

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

Name of Employer Occupation
Self Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2012
Transaction ID : SA11AI.4629

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Victoria Lea Smith

Mailing Address 1160 Park Ave.
#10D

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2012
Transaction ID : SA11AI.4630

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. MARY Ann Stein

Mailing Address 5634 Bent Ranch Rd.

City State Zip Code
Bethesda MD 20816

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

Name of Employer Occupation
Unknown Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2012
Transaction ID : SA11AI.4644

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Susie Stern

Mailing Address 39 Park Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
None None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2012
Transaction ID : SA11AI.4646

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
c. Cecile Sutherland

Mailing Address 356 Bloomfield Ave.
Suite 4

City State Zip Code
Montclair NJ 07042

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

Name of Employer Occupation
Cedas Home Care Services Founder & President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.4648

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 71
	<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. Rica Tarnoff
Full Name (Last, First, Middle Initial)

Mailing Address 150 East 69th St, Apt 3R

City New York State NY Zip Code 10021

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2012

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period
 2000.00

B. Aimee Telsey
Full Name (Last, First, Middle Initial)

Mailing Address 601 W. 113th St. #12A

City New York State NY Zip Code 10025

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

Name of Employer Beth Israel Medical Ctr. Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2012

Transaction ID : SA11AI.4625

Amount of Each Receipt this Period
 1000.00

C. Fern Tessler
Full Name (Last, First, Middle Initial)

Mailing Address 130 East End Ave.

City New York State NY Zip Code 10028

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012

Transaction ID : SA11AI.4651

Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 71
	<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. Lili Thomas
Full Name (Last, First, Middle Initial)

Mailing Address 407 Southmoreland Place

City New York State NY Zip Code 10027

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

Name of Employer N/A Occupation Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2012
Transaction ID : SA11AI.4653

Amount of Each Receipt this Period
 1000.00

B. Susan Thomases
Full Name (Last, First, Middle Initial)

Mailing Address 929 Park Ave.

City New York State NY Zip Code 10028

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4626

Amount of Each Receipt this Period
 1000.00

C. Caren Turner
Full Name (Last, First, Middle Initial)

Mailing Address 16 Willow Lane

City Tenafly State NJ Zip Code 07670

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

Name of Employer Turener Govt & Public Affairs Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2012
Transaction ID : SA11AI.4627

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. Karen Ubelhart

Mailing Address 800 West End Ave., Apt 7A

City New York State NY Zip Code 10025

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

Name of Employer Bloomberg LP Occupation Financial Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012

Transaction ID : SA11AI.4655

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Meryl Unger

Mailing Address 240 East 39th St. Apt 48H

City New York State NY Zip Code 10016

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

Name of Employer Katsy Korins Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2012

Transaction ID : SA11AI.4657

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ann Unterberg

Mailing Address 49 East 67th St

City New York State NY Zip Code 10065

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

Name of Employer N/A Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012

Transaction ID : SA11AI.4658

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Susan Van Dolsen
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 Highland Rd.
 City Rye State NY Zip Code 10586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Homemaker, volunteer, activist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 29 / 2012
Transaction ID : SA11AI.4660
 Amount of Each Receipt this Period 1000.00

B. Allen Van Hoven
 Full Name (Last, First, Middle Initial)
 Mailing Address 530 East 76 St, Apt 7G
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unknown Occupation Unknown
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 16 / 2012
Transaction ID : SA11AI.4457
 Amount of Each Receipt this Period 500.00

C. Allen Van Hoven
 Full Name (Last, First, Middle Initial)
 Mailing Address 530 East 76 St, Apt 7G
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unknown Occupation Unknown
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 16 / 2012
Transaction ID : SA11AI.4475
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 71
	<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. Elizabeth Wainstock
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 West 15th St, Apt 6D
 City new York State NY Zip Code 10011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation Real estate agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2012
Transaction ID : SA11AI.4662
 Amount of Each Receipt this Period
1000.00

B. Didi Wallerstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1130 PARk Ave.
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Media Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2012
Transaction ID : SA11AI.4628
 Amount of Each Receipt this Period
1000.00

C. Maureen White
 Full Name (Last, First, Middle Initial)
 Mailing Address 998 Fifth Avenue
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unknown Occupation Unknown
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 29 / 2012
Transaction ID : SA11AI.4664
 Amount of Each Receipt this Period
2500.00

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

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

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

FOR LINE NUMBER: PAGE 56 OF 71
(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. Joanne Witty
Full Name (Last, First, Middle Initial)
Mailing Address 77 Cloumbia Heights
City Brooklyn State NY Zip Code 11201
FEC ID number of contributing federal political committee. **C**
Name of Employer Self employed Occupation Lawyer/ civic volunteer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 02 / 22 / 2012
Transaction ID : SA11AI.4667
Amount of Each Receipt this Period 1000.00

B. Ann Yerman
Full Name (Last, First, Middle Initial)
Mailing Address 31 Sheridan Road
City Scarsdale State NY Zip Code 10685
FEC ID number of contributing federal political committee. **C**
Name of Employer Self employed Occupation Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 02 / 22 / 2012
Transaction ID : SA11AI.4623
Amount of Each Receipt this Period 1000.00

C. Lois Zenkel
Full Name (Last, First, Middle Initial)
Mailing Address 46 Burking Hill Road
City Greenwich State CT Zip Code 06831
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired Photographer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 01 / 19 / 2012
Transaction ID : SA11AI.4622
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	166250.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Processing Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4971

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
AMEX Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4973

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
AMEX Processing Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4977

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Fort Lauderdale FL 33336-0001

Purpose of Disbursement
AMEX Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4979

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Chase Paymentech

Mailing Address PO Box 659754

City State Zip Code
San Antonio TX 78265-8632

Purpose of Disbursement
Paymentech Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4970

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Chase Paymentech

Mailing Address PO Box 659754

City State Zip Code
San Antonio TX 78265-8632

Purpose of Disbursement
Paymentech Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4976

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Davidoff Mailto Hatcher LLP

Mailing Address 605 3rd Avenue

City New York State NY Zip Code 10158

Purpose of Disbursement
Attorney Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2012

Transaction ID : SB21B.4987

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Gilbert & Wolfand PC

Mailing Address 2201 Wisconsin Ave NW # 320

City Washington State DC Zip Code 20007

Purpose of Disbursement
Accounting Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2012

Transaction ID : SB21B.4680

Amount of Each Disbursement this Period

1225.00

Full Name (Last, First, Middle Initial)

C. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Adminsitration Support

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2012

Transaction ID : SB21B.4671

Amount of Each Disbursement this Period

400.00

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

5625.00

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"/> 24	<input type="checkbox"/> 25	<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. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Adminsitration Support

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4672

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4674

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Administration Support

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4980

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Event Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2012

Transaction ID : SB21B.4981

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Administration Support

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2012

Transaction ID : SB21B.4985

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

C. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Administration Support

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2012

Transaction ID : SB21B.4975

Amount of Each Disbursement this Period

200.00

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

700.00

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"/> 24	<input type="checkbox"/> 25	<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. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Administration Support

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4986

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Administration Support

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4678

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Administration Support

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4679

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Wendy Komaroff

Mailing Address 115 West 132nd ST
GFL

City New York State NY Zip Code 10027

Purpose of Disbursement
Administration Support

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4682

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Regus Office Solutions

Mailing Address 445 Park Avenue, 9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Meeting Room

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4683

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. James Stanton

Mailing Address 235 East 22nd St.
#15HI

City New York State NY Zip Code 10010

Purpose of Disbursement
Graphic Design

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4670

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. James Stanton

Mailing Address 235 East 22nd St.
#15HI

City New York State NY Zip Code 10010

Purpose of Disbursement
Graphic Design

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4982

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. James Stanton

Mailing Address 235 East 22nd St.
#15HI

City New York State NY Zip Code 10010

Purpose of Disbursement
Graphic Design

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4983

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. James Stanton

Mailing Address 235 East 22nd St.
#15HI

City New York State NY Zip Code 10010

Purpose of Disbursement
Graphic Design

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4984

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Marcia Dickstein Sudolsky

Mailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Consulting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2012

Transaction ID : SB21B.4675

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

B. Marcia Dickstein Sudolsky

Mailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Consulting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2012

Transaction ID : SB21B.4989

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Marcia Dickstein Sudolsky

Mailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Office Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2012

Transaction ID : SB21B.4990

Amount of Each Disbursement this Period

200.00

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

2400.00

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"/> 24	<input type="checkbox"/> 25	<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. Marcia Dickstein Sudolsky

Mailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Event Supplies

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4991

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Marcia Dickstein Sudolsky

Mailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Office Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4676

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Marcia Dickstein Sudolsky

Mailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Consulting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4677

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Marcia Dickstein Sudolsky

Mailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Consulting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4978

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. BETTY SUTTON FOR CONGRESS

Mailing Address PO BOX 14693

City COPLEY State OH Zip Code 44321

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: OH District: 16

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : SB23.4691

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. BOOCKVAR FOR CONGRESS

Mailing Address 73 OLD DUBLIN PIKE
SUITE 10 #134

City DOYLESTOWN State PA Zip Code 18901

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : SB23.4694

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CHERI BUSTOS

Mailing Address PO BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: IL District: 17

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SB23.4700

Amount of Each Disbursement this Period

2500.00

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

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. LOIS G CAPPS

Mailing Address P.O. BOX 23940

City State Zip Code
SANTA BARBARA CA 93121

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 24

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SB23.4706

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. VALDEZ VAL DEMINGS

Mailing Address 9148 SOUTHERN BREEZE DRIVE

City State Zip Code
ORLANDO FL 32836

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: FL District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : SB23.4696

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. EHRlich FOR CONGRESS

Mailing Address PO BOX 7224

City State Zip Code
SAINT PETERSBURG FL 33734

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: FL District: 10

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SB23.4702

Amount of Each Disbursement this Period

2500.00

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

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. GILLIBRAND FOR SENATE

Mailing Address 236 MASSACHUSETTS AVE NE
SUITE 110

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2012

Transaction ID : SB23.4708

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. KATHY HOCHUL FOR CONGRESS

Mailing Address PO BOX 64

City BUFFALO State NY Zip Code 14231

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 26

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2012

Transaction ID : SB23.4712

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. ANN MCLANE KUSTER

Mailing Address 331 GOULD HILL ROAD

City HOPKINTON State NH Zip Code 03329

Purpose of Disbursement
Candidate Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: NH District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : SB23.5042

Amount of Each Disbursement this Period

2500.00

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

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. LORETTA SANCHEZ

Mailing Address P.O. BOX 6037

City State Zip Code
SANTA ANA CA 92706

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 46

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 24 / 2012

Transaction ID : SB23.4687

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. WARREN, ELIZABETH

Mailing Address PO Box 290568

City State Zip Code
BOSTON MA 02129

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 24 / 2012

Transaction ID : SB23.4685

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00

27500.00