

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Tri-State Maxed-Out Women

ADDRESS (number and street)

445 Park Avenue

9th Floor

☐ Check if different than previously reported. (ACC)

New York

NY

10022

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00488387

3. IS THIS
REPORT☐ NEW
(N)

OR

☒ AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2012

through

M M M / D D D / Y Y Y Y Y Y
06 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Marcia Dickstein Sudolsky

Signature of Treasurer

Marcia Dickstein Sudolsky

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 23 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 01 2012 To: M M / D D / Y Y Y Y Y Y
06 30 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		90415.18
(b) Cash on Hand at Beginning of Reporting Period.....	213127.99	
(c) Total Receipts (from Line 19)	34000.00	200450.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	247127.99	290865.18
7. Total Disbursements (from Line 31)	80230.10	123967.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	166897.89	166897.89
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Tri-State Maxed-Out Women

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04	/	01	/	2012

To:

M M	/	D D	/	Y Y Y Y
06	/	30	/	2012

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).....

34000.00

200250.00

(ii) Unitemized

0.00

200.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

34000.00

200450.00

(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) ▶

34000.00

200450.00

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))..... ▶

34000.00

200450.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

34000.00

200450.00

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	10230.10	26467.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10230.10	26467.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	70000.00	97500.00
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)) ..	80230.10	123967.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	80230.10	123967.29

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)	34000.00	200450.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34000.00	200450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	10230.10	26467.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	10230.10	26467.29

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

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

FOR LINE NUMBER: PAGE 6 OF 37

(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. Stephanie Ackler

Mailing Address 160 West 77th St, 5A

City State Zip Code
 New York NY 10024

FEC ID number of contributing federal political committee.

C

Name of Employer

Ackler Wealth Management

Occupation

Managing Director, Investments

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
 04 / 21 / 2012

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Arlene Alda

Mailing Address 380 Lexington Ave., #17

City State Zip Code
 New York NY 10128

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
 04 / 28 / 2012

Transaction ID : SA11AI.4717

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Andrea Barchas

Mailing Address 60 East 42nd St, Suite 2540

City State Zip Code
 New York NY 10165

FEC ID number of contributing federal political committee.

C

Name of Employer

US Holocaust Mem Museum

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
 05 / 01 / 2012

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Brenda Block

Mailing Address 445 Park Ave., 9th Fl

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unk

Occupation

Unk

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 23 / 2012

Transaction ID : SA11AI.4723

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Polly Cleveland

Mailing Address 20 W 72nd St, Apt 506

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbia Univ

Occupation

Adjunct Prof Economics

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 16 / 2012

Transaction ID : SA11AI.4725

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Peggy Danziger

Mailing Address 155 East 69th St

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

N/A

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 15 / 2012

Transaction ID : SA11AI.4727

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Diane Fogg

Mailing Address 1185 Park Ave.

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Housewife

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
 04 / 26 / 2012

Transaction ID : SA11AI.4729

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ann Gottlieb

Mailing Address 325 West End Ave., #9D

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ann Gottlieb Associates

Occupation

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
 04 / 09 / 2012

Transaction ID : SA11AI.4731

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Monica Graham

Mailing Address 446 Park Ave., 9th Fl

City State Zip Code
 New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unk

Occupation

Unk

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
 04 / 02 / 2012

Transaction ID : SA11AI.4733

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Susan Haas

Mailing Address 247 Trinity Pass

City State Zip Code
 Pound Ridge NY 10576

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 / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Idelle Howitt

Mailing Address 2 Sutton Place South

City State Zip Code
 New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

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
 04 / 18 / 2012

Transaction ID : SA11AI.4737

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Sarah Kagan

Mailing Address 56 Brewster Road

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

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
 04 / 28 / 2012

Transaction ID : SA11AI.4739

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 OF 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Alice Kandell

Mailing Address 445 Park Ave., 9th Fl

City State Zip Code
 New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unk

Occupation

Unk

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
 04 / 02 / 2012

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Nancy Kaufman

Mailing Address 372 Central Park West, Apt 19N

City State Zip Code
 New York NY 10025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Natl Council Jewish Women

Occupation

CEO

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
 04 / 28 / 2012

Transaction ID : SA11AI.4743

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ruth Lapidus

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

Unk

Occupation

Unk

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
 04 / 02 / 2012

Transaction ID : SA11AI.4745

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 OF 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Susan Levine

Mailing Address 355 Bryant St

City

San Francisco

State

CA

Zip Code

94107

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired Supreme Court Justice

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Cathleen London

Mailing Address 445 PArk Ave.

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unk

Occupation

Doctor

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 05 / 2012

Transaction ID : SA11AI.4749

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Congwoman Carolyn Maloney

Mailing Address 1651 3rd Avenue, Suite 311

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

US Government

Occupation

Congresswoman

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11AI.4751

Amount of Each Receipt this Period

1000.00

Contribution

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Julie Menin

Mailing Address 445 Park Ave, 9th Fl

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unk

Occupation

Unk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 24 / 2012

Transaction ID : SA11AI.4754

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ronnie Planalp

Mailing Address 48 West 88th St.

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 24 / 2012

Transaction ID : SA11AI.4753

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Melanie Radley

Mailing Address 445 Park Ave, 9th Fl

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unk

Occupation

Unk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 13 / 2012

Transaction ID : SA11AI.4756

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 13 OF 37

(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. Jenifer Rajkumar

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

Unk

Occupation

Unk

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
 06 / 26 / 2012

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Joan Rothman

Mailing Address 11 Mamaroneck Rd.

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing federal political committee.

C

Name of Employer

None

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
 04 / 18 / 2012

Transaction ID : SA11AI.4760

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Sheryl Rubinstein

Mailing Address 755 Park Ave.

City State Zip Code
 New York NY 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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 26 / 2012

Transaction ID : SA11AI.4762

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 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. Judith Scheide

Mailing Address 445 Park Ave

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2012

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Sybil Shainwald

Mailing Address 445 Park Ave, 9th Fl

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unk

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2012

Transaction ID : SA11AI.4850

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Barbara Shuster

Mailing Address 91 Central Park West

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None, Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2012

Transaction ID : SA11AI.4844

Amount of Each Receipt this Period

1000.00

Contribution

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

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

7000.00

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

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

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(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. Barbara Sprung

Mailing Address 230 Saugatuck Ave., Apt. 6

City State Zip Code
Westport CT 06880

FEC ID number of contributing
federal political committee.

C

Name of Employer

FHI360

Occupation

Co-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
04 / 16 / 2012

Transaction ID : SA11AI.4842

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Altagracia Valle

Mailing Address 222 East 56th St, #4F

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

Occupation

Real Estate Investor

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
04 / 28 / 2012

Transaction ID : SA11AI.4846

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. JoAnn Wellner

Mailing Address 1065 Seahaven Dr

City State Zip Code
Mammaroneck NY 10543

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Attorney; Real estate 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
04 / 30 / 2012

Transaction ID : SA11AI.4848

Amount of Each Receipt this Period

1000.00

Contribution

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

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

3000.00

34000.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Tri-State Maxed-Out Women

Category/
Type

Age Group	Percentage
18-24	124.71
25-34	~100
35-44	~100
45-54	~100
55-64	~100
65-74	~100
75-84	~100
85+	~100

Category/
Type

7.95

Category/
Type

146.75

279.41

279.41

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Tri-State Maxed-Out Women

00'

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

MM / DD / YYYY

00

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

002

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

45.25

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Tri-State Maxed-Out Women

Age Group	Percentage
18-24	10.00
25-34	15.00
35-44	20.00
45-54	25.00
55-64	30.00
65-74	35.00
75-84	38.00
85+	40.00

1000.00

103.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Chase Paymentech

Mailing Address PO Box 659754

City

San Antonio

State

TX

Zip Code

78265-8632

Purpose of Disbursement

Paymentech Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2012

Transaction ID : SB21B.5005

Amount of Each Disbursement this Period

45.00

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 Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2012

Transaction ID : SB21B.4779

Amount of Each Disbursement this Period

632.00

Full Name (Last, First, Middle Initial)

C. Wendy KomaroffMailing 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

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2012

Transaction ID : SB21B.4768

Amount of Each Disbursement this Period

200.00

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

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

877.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Tri-State Maxed-Out Women

Category/
Type

05 / 12 / 2012

200.00

Category/
Type

100.00

Category/
Type

500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. James StantonMailing Address 235 East 22nd St.
#15HI

City New York State NY Zip Code 10010

Purpose of Disbursement
Graphic Design

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 12 2012

Transaction ID : SB21B.4778

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

B. James StantonMailing Address 235 East 22nd St.
#15HI

City New York State NY Zip Code 10010

Purpose of Disbursement
Graphic Design

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 20 2012

Transaction ID : SB21B.5008

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

C. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Consulting Services

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 01 2012

Transaction ID : SB21B.4776

Amount of Each Disbursement this Period

1000.00

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

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

1450.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Office Fee

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 01 / 2012

Transaction ID : SB21B.4777

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Event Supplies

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SB21B.5012

Amount of Each Disbursement this Period

175.00

Full Name (Last, First, Middle Initial)

C. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Event Staff

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : SB21B.5011

Amount of Each Disbursement this Period

200.00

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

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

575.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Consulting Services

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 01 2012**Transaction ID : SB21B.4782**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Office Fee

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 01 2012**Transaction ID : SB21B.4783**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Consulting Services

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 01 2012**Transaction ID : SB21B.4784**

Amount of Each Disbursement this Period

1000.00

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

2200.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Office Fee

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 01 / 2012**Transaction ID : SB21B.4785**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Event Staff

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 18 / 2012**Transaction ID : SB21B.4786**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Marcia Dickstein SudolskyMailing Address 445 Park Avenue
9th Floor

City New York State NY Zip Code 10022

Purpose of Disbursement
Event Staff

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 18 / 2012**Transaction ID : SB21B.5013**

Amount of Each Disbursement this Period

200.00

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

600.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Tri-State Maxed-Out Women

A. Debbie Teitelbaum

Mailing Address 115 East 86th ST

City	State	Zip Code
New York	NY	10128

Purpose of Disbursement	Administration Support

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4838

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

B. Tuscany Caterers

Mailing Address 61 West 55th St, #1

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement Event Catering Services

Candidate Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4787

Amount of Each Disbursement this Period

1149.72

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) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

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

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

1374.72

10045.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. SHELLEY ADLER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2012

Mailing Address 200 LAUREL CREEK BOULEVARD

Transaction ID : SB23.4809

City	State	Zip Code
MOORESTOWN	NJ	08057

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

2500.00

Candidate Name

SHELLEY ADLERCategory/
Type

Office Sought:	☒ House
	☐ Senate
	☐ President

Disbursement For: 2012

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ District: 03

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2012

Mailing Address 119 MARTIN LUTHER KING JR BLVD LL4

Transaction ID : SB23.4794

Amount of Each Disbursement this Period

City	State	Zip Code
MADISON	WI	53703

Purpose of Disbursement
Contribution

011

2500.00

Candidate Name

TAMMY BALDWINCategory/
Type

Office Sought:	☒ House
	☐ Senate
	☐ President

Disbursement For: 2012

☒ Primary	☐ General
☐ Other (specify) ▼	

State: WI District: 02

Full Name (Last, First, Middle Initial)

C. SHELLEY BERKLEY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2012

Mailing Address 1210 S VALLEY VIEW BLVD STE 114

Transaction ID : SB23.4825

Amount of Each Disbursement this Period

City	State	Zip Code
LAS VEGAS	NV	89102

Purpose of Disbursement
Contribution

011

2500.00

Candidate Name

SHELLEY BERKLEYCategory/
Type

Office Sought:	☐ House
	☒ Senate
	☐ President

Disbursement For: 2012

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NV District: 00

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

7500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. BOOCKVAR FOR CONGRESSMailing Address 73 OLD DUBLIN PIKE
SUITE 10 #134

City DOYLESTOWN State PA Zip Code 18901

Purpose of Disbursement
Contribution

011

Candidate Name

BOOCKVAR FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2012

Transaction ID : SB23.4833

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. JULIA BROWNLEY

Mailing Address 5613 FOXWOOD DRIVE

City OAK PARK State CA Zip Code 91377

Purpose of Disbursement
Contribution

011

Candidate Name

JULIA BROWNLEYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2012

Transaction ID : SB23.4800

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
Contribution

011

Candidate Name

CHERI BUSTOSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2012

Transaction ID : SB23.4836

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)
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. LOIS J FRANKEL

Mailing Address PO BOX 775

City	State	Zip Code
WEST PALM BEACH	FL	33402

Purpose of Disbursement
Contribution

Candidate Name

LOIS J FRANKELOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2012

Transaction ID : SB23.4822

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MICHELLE GRISHAM

Mailing Address 601 MOUNTAIN ROAD NW

City	State	Zip Code
ALBUQUERQUE	NM	87102

Purpose of Disbursement
Contribution

Candidate Name

MICHELLE GRISHAMOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NM District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2012

Transaction ID : SB23.4807

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PAM GULLESON

Mailing Address PO BOX 215

City	State	Zip Code
RUTLAND	ND	58067

Purpose of Disbursement
Contribution

Candidate Name

PAM GULLESONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2012

Transaction ID : SB23.4798

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

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. JOYCE HEALY-ABRAMS

Mailing Address 2548 GLENMONT ROAD NW

City CANTON	State OH	Zip Code 44708
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

JOYCE HEALY-ABRAMS

Office Sought:	☒ House
	☐ Senate
	☐ President

State: OH District: 07

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2012

Transaction ID : SB23.4811

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. HEIDI HEITKAMP

Mailing Address 21 CAPTAIN LEACH DRIVE

City MANDAN	State ND	Zip Code 58554
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

HEIDI HEITKAMP

Office Sought:	☐ House
	☒ Senate
	☐ President

State: ND District: 00

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2012

Transaction ID : SB23.4792

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. HEIDI HEITKAMP

Mailing Address 21 CAPTAIN LEACH DRIVE

City MANDAN	State ND	Zip Code 58554
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

HEIDI HEITKAMP

Office Sought:	☐ House
	☒ Senate
	☐ President

State: ND District: 00

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2012

Transaction ID : SB23.4802

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

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**SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. NITA M LOWEY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2012

Mailing Address 188 EAST POST ROAD
SUITE 305

City WHITE PLAINS State NY Zip Code 10601

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.4796

Amount of Each Disbursement this Period

2500.00

Candidate Name

NITA M LOWEYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 17

Full Name (Last, First, Middle Initial)

B. NITA M LOWEY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2012

Mailing Address 188 EAST POST ROAD
SUITE 305

City WHITE PLAINS State NY Zip Code 10601

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.4830

Amount of Each Disbursement this Period

2500.00

Candidate Name

NITA M LOWEYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 17

Full Name (Last, First, Middle Initial)

C. CAROLYN MCCARTHY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2012

Mailing Address P.O. BOX 190

City MINEOLA State NY Zip Code 11501

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.4817

Amount of Each Disbursement this Period

2500.00

Candidate Name

CAROLYN MCCARTHYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 04

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

7500.00

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NAME OF COMMITTEE (In Full)

Tri-State Maxed-Out Women

Full Name (Last, First, Middle Initial)

A. CLAIRE MCCASKILL

Mailing Address 700 13TH STREET NW SUITE 600

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
Contribution

011

Candidate Name

CLAIRE MCCASKILL

Category/
Type

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2012

☒ Primary☐ General☐ Other (specify) ▼

State: MO

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2012

Transaction ID : SB23.4805

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. SHAREN SWARTZ NEUHARDT

Mailing Address 4625 U S ROUTE 68 NORTH

City
YELLOW SPRINGSState
OHZip Code
45387Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2012

☒ Primary☐ General☐ Other (specify) ▼

State: OH

District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2012

Transaction ID : SB23.5043

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CAROL SHEA-PORTER

Mailing Address PO BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
Contribution

011

Candidate Name

CAROL SHEA-PORTER

Category/
Type

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2012

☒ Primary☐ General☐ Other (specify) ▼

State: NH

District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2012

Transaction ID : SB23.4820

Amount of Each Disbursement this Period

2500.00

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7500.00

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Tri-State Maxed-Out Women

A. LOUISE M SLAUGHTER

011

2500.00

LOUISE M SLAUGHTER

Category/
Type☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 25

B. LOUISE M SLAUGHTER

06 / 20 / 2012

011

2500.00

LOUISE M SLAUGHTER

Category/
Type

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 25

C. BETTY S SUTTON

011

2500.00

BETTY S SUTTON

Category/
Type☒ Primary ☐ General
Other (specify) ▼

State: OH District: 16

7500.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Tri-State Maxed-Out Women

A. NYDIA M. VELAZQUEZ

Mailing Address 315 INSPIRATION LANE

City	State	Zip Code
GAITHERSBURG	MD	20878

Purpose of Disbursement	Contribution
1. To provide for the maintenance and repair of the building	£10,000
2. To provide for the maintenance and repair of the furniture and fixtures	£5,000
3. To provide for the maintenance and repair of the equipment	£3,000
4. To provide for the maintenance and repair of the vehicles	£2,000
5. To provide for the maintenance and repair of the other assets	£1,000
Total	£21,000

Candidate Name

NYDIA M. VELAZQUEZ

Office Sought:	☒	House
	☐	Senate
	☐	President
State:	NY	District: 07

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB23.4831

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

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

Purpose of Disbursement

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).....

2500.00

70000.00