Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project	
	C C00580068
Check if 24-hour report 48-hour report New report Amends re	eport filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Amazon	04 30 / Y Y Y Y Y
Mailing Address PO Box 81226	Amount
City State Zip Code	75.84
Seattle WA 98108-1300	Transaction ID : VQZ6GACWWQ0 Date of Disbursement or Obligation
Purpose of Expenditure supplies Category/ Type	04 / 30 / 2017
Name of Federal Candidate Support	t Office Sought: x House District: <u>06</u>
Ossoff, Jon, , , Oppose	- Toolson - Control
Calendar Year-To-Date Per Election for Office Sought 17228.64	Disbursement For: Primary General 2018 Special General Special General
Full Name of Payee	Date of Public Distribution/Dissemination
Amazon	04 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 81226	Amount
City State Zip Code	111.68
Seattle WA 98108-1300	Transaction ID : VQZ6GACWWS6 Date of Disbursement or Obligation
Purpose of Expenditure supplies Category/ Type	04 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	t Office Sought: House District: 00
Quist, Rob, , ,	
Calendar Year-To-Date Per Election for Office Sought 21671.51	Disbursement For: Primary General 2018 Special General Special General
(-) CURTOTAL of lancined lader and est Evenediture	
(a) SUBTOTAL of Itemized Independent Expenditures	187.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	•
Pascal, Harry, , , [Electronically Filed]	Date 05 01 2017
Signature	

		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project		C C00580068
Check if 24-hour report 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	Date	e of Public Distribution/Dissemination
American Airlines		04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4333 Amon Carter Blvd	Amo	punt
City State Z	ip Code	222.20
I *	6155-2664 Trar	nsaction ID : VQZ6GACWW58 e of Disbursement or Obligation
Purpose of Expenditure travel	Category/ Type	04 / 30 / 2017
Name of Federal Candidate	X Support Office Soug	ght: X House District: 06
Ossoff, Jon, , ,	Oppose Presi	
Calendar Year-To-Date Per Election for Office Sought	17228.64 Disburseme	ent For: Primary General Other (specify) ► Special General
Full Name of Payee		e of Public Distribution/Dissemination
American Airlines		04 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4333 Amon Carter Blvd	Amo	punt
City State Z	ip Code	106.20
Fort Worth TX		saction ID : VQZ6GACWW66 e of Disbursement or Obligation
Purpose of Expenditure travel	Category/ Type	04 / 30 / 2017
Name of Federal Candidate	✗ Support Office Sou	ght: 🗶 House District: <u>06</u>
Ossoff, Jon, , ,	Oppose Pres	ident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	17228.64 Disburseme 2018	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures		328.40
(b) SUBTOTAL of Unitemized Independent Expenditures		171171171
(c) TOTAL Independent Expenditures	· _	
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
Pascal, Harry, , , [Electronica	ally Filed] Date 05	01 2017
Signature		

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OF

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Schedule E)	NDENT EXILIND	HONES	PAC FOR	GE 3 OF 19 R SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENT	IFICATION NUMBER ▼
Progressive Turnout Project			C C005	580068
Check if 24-hour report X 48-hour rep	ort New rep	oort Amends repo	rt filed on	D / Y = Y = Y
Full Name of Payee Atlanta Marriott				tribution/Dissemination
Mailing Address 3405 Lenox Rd NE				30 2017
			Amount	
City	State	Zip Code		446.39
Atlanta	GA	30326-1308	Transaction ID : V Date of Disbursem	
Purpose of Expenditure travel		Category/ Type	04 / D	30 / 2017
Name of Federal Candidate		x Support	Office Sought:	ouse District: 06
Ossoff, Jon, , ,		Oppose	President Se	enate State: GA
Calendar Year-To-Date Per Election for Office Sought		17228.64	Disbursement For: 2018 MOther (specify)	Primary General Special General
Full Name of Payee			Date of Public Dis	tribution/Dissemination
Berger, Owen, , ,			M M / D	30 / 2017
Mailing Address 1001 26th St NW			Amount	
City	State	Zip Code		996.72
Washington	DC	20037-1602	Transaction ID : Vo	
Purpose of Expenditure payroll		Category/ Type	04 / D	30 / 2017
Name of Federal Candidate		x Support	Office Sought: X H	ouse District: 06
Ossoff, Jon, , ,		Oppose	President S	enate State: GA
Calendar Year-To-Date Per Election for Office Sought		17228.64	Disbursement For: 2018 Cother (specify)	Primary General Special General
(a) SUBTOTAL of Itemized Independent Ex	penditures			1443.11
				7 1 7 1
(b) SUBTOTAL of Unitemized Independent	Expenditures		>	7
(c) TOTAL Independent Expenditures			>	7
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Pascal, Harry, , ,	[Electron	nically Filed] Date	05 01	2017
oignatur e				

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project		C C00580068
Check if 24-hour report X 48-hour report New report	Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Rodinson Reverly		Date of Public Distribution/Dissemination
Bodinson, Beverly, , ,		04 30 2017
Mailing Address 18 Canborne Way		Amount
City State Zip Co	ode	1175.10
1 ·	3-3446	Transaction ID : VQZ6GACWVZ1 Date of Disbursement or Obligation
	gory/ Type	04 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	✗ Support Office	Sought: Mouse District: 06
Ossoff, Jon, , ,	Oppose	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	28.64 Disbu 2018	rsement For: Primary General ✓ Other (specify) ► Special General
Full Name of Payee	<u> </u>	Date of Public Distribution/Dissemination
BP		04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5418 Chamblee		Amount
City State Zip C	ode	24.55
Dunwoody GA		Transaction ID : VQZ6GACWWN4 Date of Disbursement or Obligation
	gory/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	✗ Support Office	e Sought:
Ossoff, Jon, , ,	Oppose	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	Disbu 228.64 2018	rrsement For: Primary General ✓ Other (specify) ► Special General
	l l	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	1199.65
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized commparty committee) any political party committee or its agent.		
Pascal, Harry, , , [Electronically F	Ciled] Date 0.	5 01 2017
Signature		

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project	C C00580068
Check if 24-hour report 48-hour report New report Amends report	ort filed on
Full Name of Payee Cadwallader, Katherine, , ,	Date of Public Distribution/Dissemination
	04 30 7 2017
Mailing Address 1037 Ileagnes Rd	Amount
City State Zip Code	1025.71
Raleigh NC 27603-2379	Transaction ID : VQZ6GACWW09 Date of Disbursement or Obligation
Purpose of Expenditure payroll Category/ Type	04 / 30 / 2017
Name of Federal Candidate Support	Office Sought: M House District: 06
Ossoff, Jon, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 17228.64	Disbursement For: ☐ Primary ☐ General 2018 ☐ Special General
Full Name of Payee	Date of Public Distribution/Dissemination
CVS	04 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5764 Peachtree Industrial Blvd	Amount
City State Zip Code	9.60
Chamblee GA 30341-1908	Transaction ID : VQZ6GACWWR8 Date of Disbursement or Obligation
Purpose of Expenditure supplies Category/ Type	04 / 30 / 2017
Name of Federal Candidate Support	Office Sought: House District: 06
Ossoff, Jon, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 17228.64	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	·
Pascal, Harry, , , [Electronically Filed] Date	e 05 01 2017
Signature	

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project		C C00580068
		J 333333
Check if 24-hour report 48-hour report New report	Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Delta Airlines		04
Mailing Address PO Box 20706		Amount
City State Zip	o Code	546.60
	0320-6001	Transaction ID : VQZ6GACWW74 Date of Disbursement or Obligation
Purpose of Expenditure travel	Category/ Type	04 / 30 / 2017
Name of Federal Candidate	✗ Support Office	e Sought: House District: 00
Quist, Rob, , ,	Oppose	President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	21671.51 Disbu 2018	rrsement For: Primary General ✓ Other (specify) ► Special General
Full Name of Payee	'	Date of Public Distribution/Dissemination
Delta Airlines		04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 20706		Amount
City State Zip	p Code	471.60
Atlanta GA 30	0320-6001	Transaction ID: VQZ6GACWW82 Date of Disbursement or Obligation
Purpose of Expenditure travel	Category/ Type	04 30 2017
Name of Federal Candidate	✗ Support Office	e Sought: 🗶 House District:00
Quist, Rob, , ,	Oppose	President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	Disbu 21671.51 2018	ursement For: Primary General
		Office (specify) P
(a) SUBTOTAL of Itemized Independent Expenditures	·····	1018.20
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures rep with, or at the request or suggestion of, any candidate or authorized co party committee) any political party committee or its agent.		•
Pascal, Harry, , , [Electronical	lly Filed] Date 0	5 01 2017
Signature		

Schedule E)	PAGE 7 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project	C C00580068
Check if 24-hour report	lew report Amends report filed on Amends report
Full Name of Payee Delta Airlines	Date of Public Distribution/Dissemination
Mailing Address 3330 Piedmont Rd NE	04 30 2017
	Amount
City State	Zip Code 400.00
Atlanta GA	30305-1726 Transaction ID : VQZ6GACWWK9 Date of Disbursement or Obligation
Purpose of Expenditure gas cards	Category/ Type 04 / 30 / Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: X House District: 06
Ossoff, Jon, , ,	Oppose President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2018 ✓ Other (specify) ► Special General
Full Name of Payee	Date of Public Distribution/Dissemination
Exxon Mailing Address	04 / 30 / 2017
Mailing Address 10800 US-287 #1	Amount
City State	Zip Code 300.00
Three Forks MT	Transaction ID : VQZ6GACWWV2 Date of Disbursement or Obligation
Purpose of Expenditure gas cards	Category/ Type 04 04 7 30 7 2017
Name of Federal Candidate	Support Office Sought: M House District: 00
Quist, Rob, , ,	Oppose President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2018
(a) SUBTOTAL of Itemized Independent Expenditures	700.00
(b) SUBTOTAL of Unitemized Independent Expenditures)
(c) TOTAL Independent Expenditures	>
	nditures reported herein were not made in cooperation, consultation, or concert thorized committee or agent of either, or (if the reporting entity is not a political
	Electronically Filed] Date 05 01 2017
Signature	

Schedule E)	LINDITOTIES	PAGE 8 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project		C C00580068
Check if 24-hour report 🗶 48-hour report	New report Amends report fi	iled on DD / YTYTY
Full Name of Payee Fretheim, Arthur, , ,		Date of Public Distribution/Dissemination
Mailing Address 240 9th St E		04 30 2017 Amount
Apt 201		
City State Kalispell MT	Zip Code 59901-5455	1308.14 Transaction ID : VQZ6GACWVR5
Purpose of Expenditure payroll	Category/ Type	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	✗ Support Of	ffice Sought:
Quist, Rob, , ,	Oppose [President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General Other (specify) Special General
Full Name of Payee Granite Management Mailing Address 45 W Park St		Date of Public Distribution/Dissemination M M M M M M M M M M M M M M M M M M M
City State	Zip Code	1950.00
Butte MT	59701-1713	Transaction ID : VQZ6GACWWJ1 Date of Disbursement or Obligation
Purpose of Expenditure rent	Category/ Type	M 04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	🗶 Support O	ffice Sought: House District: 00
Quist, Rob, , ,	Oppose	President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General O18 Other (specify) ► Special General
(a) SUBTOTAL of Itemized Independent Expenditures	·····	3258.14
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	>	
Under penalty of perjury I certify that the independent experience with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.		
	[Electronically Filed] Date	05 01 <u>Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y</u>
Signature		

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NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project	C C00580068
Check if 24-hour report 48-hour report New report Amends report	filed on M M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Joyce, Louis, , ,	04 04 30 7 2017
Mailing Address 107 S 38th St	Amount
City State Zip Code	2187.19
Council Bluffs IA 51501-3388	Transaction ID : VQZ6GACWVP0 Date of Disbursement or Obligation
Purpose of Expenditure payroll Category/ Type	04 30 7 2017
Name of Federal Candidate	Office Sought: House District: 00
Quist, Rob, , ,	President Senate State: MT
Calcidal Ical lo Date	oisbursement For: Primary General O18 ✓ Other (specify) ► Special General
Full Name of Payee Joyce, Louis, , ,	Date of Public Distribution/Dissemination 04 30 2017
Mailing Address 107 S 38th St	Amount
City State Zip Code	1292.72
Council Bluffs IA 51501-3388	Transaction ID : VQZ6GACWVS3 Date of Disbursement or Obligation
Purpose of Expenditure payroll Category/ Type	04 / 30 / 2017
Name of Federal Candidate	Office Sought: House District: 00
Quist, Rob, , ,	President Senate State: MT
	Disbursement For: Primary General 2018 ✓ Other (specify) Special General
(a) SUBTOTAL of Itemized Independent Expenditures	3479.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Pascal, Harry, , , [Electronically Filed] Date	05 01 2017
Signature	

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OF

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Schedule E)			PAGE 10 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project			C C00580068
Check if 24-hour report X 48-hour report	report New report	ort Amends repo	ort filed on
Full Name of Payee Ndukwe, Ucha, , ,			Date of Public Distribution/Dissemination
Mailing Address 644 Leighton Way			04 30 2017 Amount
City	State	Zip Code	1360.23
Stone Mountain	GA	30088-1829	Transaction ID : VQZ6GACWW16 Date of Disbursement or Obligation
Purpose of Expenditure payroll		Category/ Type	04 / 30 / 2017
Name of Federal Candidate		x Support	Office Sought:
Ossoff, Jon, , ,		Oppose	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	,,	17228.64	Disbursement For: Primary General 2018 Special General Special General
Full Name of Payee NGP Van			Date of Public Distribution/Dissemination 04 04 04 04 04 05 07 07 07 07 07 07 07 07 07
Mailing Address 1101 15th St NW			Amount
City	State	Zip Code	4600.00
Washington	DC	20005-5002	Transaction ID : VQZ6GACWWE9 Date of Disbursement or Obligation
Purpose of Expenditure software rental		Category/ Type	04 / 30 / 2017
Name of Federal Candidate Ossoff, Jon, , ,		✗ Support	Office Sought: House District: 06 President Sense State: GA
- Coon, con, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, ,	17228.64	Disbursement For:
(a) SUBTOTAL of Itemized Independent I	Expenditures		▶ 5960.23
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		
(c) TOTAL Independent Expenditures			•
	ny candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Pascal, Harry, , , Signature	[Electron	ically Filed] Date	9 05 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

ooneddie Ej	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project	C C00580068
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Da	ate of Public Distribution/Dissemination
NGP Van	04 / 30 / Y Y Y Y Y Y Y
Mailing Address 1101 15th St NW	nount
City State Zip Code	3840.00
Washington DC 20005-5002 Tra	ansaction ID: VQZ6GACWWF7 ate of Disbursement or Obligation
Purpose of Expenditure software rental Category/ Type	04 30 7 2017
Name of Federal Candidate X Support Office Sol	ought: House District: 00
Quist, Rob, , ,	esident Senate State: MT
Calendar Year-To-Date Per Election for Office Sought Disbursen 2018	
Full Name of Payee Da	ate of Public Distribution/Dissemination
North Shore Printers	04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 535 S Sheridan Rd	mount
City State Zip Code	600.00
Da	insaction ID : VQZ6GACWWG5 ate of Disbursement or Obligation
Purpose of Expenditure printing Category/ Type	04 / 30 / Y Y Y Y Y Y
Name of Federal Candidate	ought: X House District: <u>06</u>
Ossoff, Jon, , ,	esident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disburser 2018	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	4440.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Pascal, Harry, , , [Electronically Filed] Date 05	01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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OF

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Schedule E)	I EXI END	TOTILO		PAGE 12 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project				C C00580068
Check if 24-hour report 🗶 48-hour report	X New repo	ort Amends repo		M / D = D / Y = Y = Y
Full Name of Payee North Shore Printers			M	of Public Distribution/Dissemination
Mailing Address 535 S Sheridan Rd			Amour	04 30 2017 nt
City	State	Zip Code		354.06
Waukegan	IL	60085-7538		action ID : VQZ6GACWWH3 of Disbursement or Obligation
Purpose of Expenditure printing		Category/ Type	М	04 30 / 2017
Name of Federal Candidate		x Support	Office Sought	: X House District: 00
Quist, Rob, , ,		Oppose	Preside	MT
Calendar Year-To-Date Per Election for Office Sought	, , ,	21671.51	Disbursement 2018 🗶 Ot	For: Primary General her (specify) ► Special General
Full Name of Payee North Shore Printers Mailing Address 535 S Sheridan Rd				of Public Distribution/Dissemination
Mailing Address 535 S Sheridan Rd			Amou	nt
City	State	Zip Code		793.93
Waukegan Purpose of Expenditure	IL	60085-7538	Transa Date of	ction ID : VQZ6GACWX43 of Disbursement or Obligation
printing		Category/ Type		04 30 2017
Name of Federal Candidate		x Support	Office Sough	t: X House District: <u>06</u>
Ossoff, Jon, , ,		Oppose	Preside	ent Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	, , ,	17228.64	Disbursement 2018	t For: Primary General ther (specify) ▶ Special General
(a) SUBTOTAL of Itemized Independent Expenditure	S			1147.99
(b) SUBTOTAL of Unitemized Independent Expendit	ures		. —	
(a) GOD TO THE OF CHIMOHIESE MESOPONEOUS Experience			· •	7 7
(c) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Pascal, Harry, , ,	[Electron	ically Filed] Date	e 05	01 2017
Signature				

Schedule E)	ENT EXITEND	HONES		PAGE 13 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project				C C00580068
Check if 24-hour report X 48-hour report	X New rep	oort Amends repo		M / D = D / Y = Y = Y
Full Name of Payee			Date o	f Public Distribution/Dissemination
North Shore Printers				04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 535 S Sheridan Rd			Amoun	nt
City	State	Zip Code		396.97
Waukegan	IL	60085-7538		action ID : VQZ6GACWX51 f Disbursement or Obligation
Purpose of Expenditure printing		Category/ Type		04 30 2017
Name of Federal Candidate		✗ Support	Office Sought	: X House District: 00
Quist, Rob, , ,		Oppose	Preside	MT
Calendar Year-To-Date Per Election for Office Sought		21671.51	Disbursement 2018	For: Primary General her (specify) ▶ Special General
Full Name of Payee			Date o	of Public Distribution/Dissemination
Paychex				04 30 / Y Y Y Y Y Y Y
Mailing Address 911 Panorama Trl S			Amour	nt
City	State	Zip Code		1371.45
Rochester	NY	14625-2311		ction ID : VQZ6GACWVQ7 If Disbursement or Obligation
Purpose of Expenditure payroll taxes		Category/ Type		04 30 2017
Name of Federal Candidate		✗ Support	Office Sought	: X House District: 00
Quist, Rob, , ,		Oppose	Preside	senate State: MT
Calendar Year-To-Date Per Election for Office Sought	, ,	21671.51	Disbursement 2018 X Ot	For: Primary General her (specify) ► Special General
(a) SUBTOTAL of Itemized Independent Expendent	ditures			1768.42
(b) SUPTOTAL of Uniterprized Independent Eve	anditura a		_	
(b) SUBTOTAL of Unitemized Independent Exp	enaltures		• -	4 4
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorized			
Pascal, Harry, , ,	[Electron	nically Filed] Date	05	01 2017
Signaturo				

Schedule E)	EXI END	TOTILO		PAGE 14 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project				C C00580068
Check if 24-hour report × 48-hour report	X New repo	ort Amends repo		= M / D = D / Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Paychex				04 30 / 2017
Mailing Address 911 Panorama Trl S			Amou	nt
City	State	Zip Code	— L.	2711.04
Rochester	NY	14625-2311		action ID : VQZ6GACWVX5 of Disbursement or Obligation
Purpose of Expenditure payroll taxes		Category/ Type		04 30 / 2017
Name of Federal Candidate		x Support	Office Sough	it: X House District: 00
Quist, Rob, , ,		Oppose	Preside	MT
Calendar Year-To-Date Per Election for Office Sought	, , , ,	21671.51	Disbursemen 2018	ther (specify) ► Special General
Full Name of Payee Paychex				of Public Distribution/Dissemination
Mailing Address 911 Panorama Trl S			L	04 30 2017
911 Panorama 111 S			Amou	int
City	State	Zip Code		2250.43
Rochester	NY	14625-2311		action ID : VQZ6GACWW40 of Disbursement or Obligation
Purpose of Expenditure payroll taxes		Category/ Type		04 / 30 / 2017
Name of Federal Candidate		x Support	Office Sough	nt: X House District:06
Ossoff, Jon, , ,		Oppose	Presid	ent Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	, , ,	17228.64	Disbursemer 2018	nt For:
(a) SUBTOTAL of Itemized Independent Expenditure:	2			4004 47
(a) SOBTOTAL OF REMIZED INDEPENDENT EXPENDITURE.	3		•	4961.47
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•	7 1 7 1 7
(c) TOTAL Independent Expenditures			· -	7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized			
Pascal, Harry, , , Signature	[Electron	ically Filed] Date	05 /	01 2017
orginature				

Schedu	le E)	ENDENT EXPEND	TONES			AGE 15 OR SE OF	OF 19 FORM 24/48
	COMMITTEE (In Full)				FEC IDEN	NTIFICATIO	N NUMBER ▼
Progre	essive Turnout Project				C CO	0580068	
Check if	24-hour report 🗶 48-hour re	eport New repo	ort Amends repo		M = M /	D D /	Y Y Y
Full N	ame of Payee			Date	of Public D)istribution/l	Dissemination
	chti, Andrew, , ,				M M / 04	30	2017
Mailin	g Address 425 Stephens Ave			Amo	unt		
City	3F	State	Zip Code				1293.89
Misso	pula	MT	59801-3876		saction ID :		CWVT1
Purpo	se of Expenditure		Category/		of Disburse	ement or O	bligation 2017
Name	of Fordered Constitute		Турс				
	of Federal Candidate		✗ Support	Office Soug		House [District: 00
Quist	, 100, , ,		Oppose	Presid		Senate	State: MT
	Calendar Year-To-Date Per Election for Office Sought	7 7	21671.51	Disburseme 2018	ont For:	_ Primary ify) ▶S _I	General Decial General
	lame of Payee			Date	of Public D	Distribution/	Dissemination
	red Space				M M /	30	2017
Mailin	g Address 4470 Chamblee Dunw	oody Rd		Amo	ount		
City		State	Zip Code	$\dashv \sqcap$			1292.06
Atlan		GA	30338-6280		saction ID:		
rent	se of Expenditure		Category/ Type		04 /	30	2017
Name	of Federal Candidate		x Support	Office Soug	ght:	House	District: 06
Osso	ff, Jon, , ,		Oppose	Presid	dent	Senate	State: GA
	Calendar Year-To-Date Per Election for Office Sought		17228.64	Disburseme 2018	ent For:	Primary if(v) ▶ S	General General
					(0,000		
(a) SU	BTOTAL of Itemized Independent E	xpenditures		•	7	7	2585.95
(b) SU	BTOTAL of Unitemized Independen	t Expenditures		· •	-	-	
(c) TO	TAL Independent Expenditures			•	7	-7-	
with, or	penalty of perjury I certify that the rat the request or suggestion of, arommittee) any political party commi	ny candidate or authorized					
	Pascal, Harry, , ,	[Electron	ically Filed] Date	9 05	01	201	
Sigr	nature						

Schedule E)	IN EXILID	HONES		PAGE 16 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			ı	FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project				C C00580068
Check if 24-hour report 🗶 48-hour report	X New rep	port Amends repo		M / D = D / Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
Sperry, David, , ,				04 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2525 Anthony Ln			Amoun	t
City	State	Zip Code		529.80
Racine	WI	53404-1768		ction ID : VQZ6GACWW24 f Disbursement or Obligation
Purpose of Expenditure payroll		Category/ Type		04 30 7 2017
Name of Federal Candidate		x Support	Office Sought:	✗ House District:06
Ossoff, Jon, , ,		Oppose	Presider	nt Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		17228.64	Disbursement 2018 X Oth	For: Primary General ner (specify) ► Special General
Full Name of Payee			Date o	f Public Distribution/Dissemination
Stokes, Adriel, , ,				04 30 / 2017
Mailing Address 109 S 8th Ave			Amoun	t
City	State	Zip Code		1248.01
Bozeman	MT	59715-4460		tion ID : VQZ6GACWVV9 f Disbursement or Obligation
Purpose of Expenditure payroll		Category/ Type		04 / 30 / 2017
Name of Federal Candidate		x Support	Office Sought	: X House District: 00
Quist, Rob, , ,		Oppose	Preside	nt Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	7	21671.51	Disbursement 2018 X Ot	For: Primary General her (specify) ► Special General
(a) SUBTOTAL of Itemized Independent Expendit	ures			1777.81
(I) OUDTOTAL (III II I	19			7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1
(b) SUBTOTAL of Unitemized Independent Exper	iditures		• •	4 4
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or	idate or authorize			
Pascal, Harry, , , Signature	[Electron	nically Filed] Date	05	01 2017
Olynatul C				

Schedule E)	NI EXPEND	TONES		PAGE 17 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project				C C00580068
Check if 24-hour report 48-hour report	X New repo	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee United Airlines				of Public Distribution/Dissemination
Mailing Address PO Box 6649			Amou	04 30 2017 unt
Cit.	Otata	Zin Code		040.00
City Chicago	State IL	Zip Code 60606-0649	Trans	612.60 saction ID : VQZ6GACWWD1
Purpose of Expenditure				of Disbursement or Obligation
travel		Category/ Type		04 / 30 / 2017
Name of Federal Candidate		x Support	Office Sough	ht: X House District: 00
Quist, Rob, , ,		Oppose	Presid	dent Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	7 7	21671.51	Disbursemer 2018	nt For:
Full Name of Payee				of Public Distribution/Dissemination
UPS				04 30 2017
Mailing Address 1189 Wilmette Ave			Amou	unt
City	State	Zip Code		337.20
Wilmette	IL	60091-2719		action ID : VQZ6GACWWB5 of Disbursement or Obligation
Purpose of Expenditure shipping		Category/ Type		04 / 30 / 2017
Name of Federal Candidate		x Support	Office Soug	ht: 🗶 House District: 00
Quist, Rob, , ,		Oppose	Presid	dent Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	7 7	21671.51	Disburseme 2018	ont For:
<u> </u>				(0,000)
(a) SUBTOTAL of Itemized Independent Expenditu	res		•	949.80
(b) SUBTOTAL of Unitemized Independent Expendent	itures		•	7
(c) TOTAL Independent Expenditures			•	4 1 4 1 4
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	late or authorized			
Pascal, Harry, , ,	[Electron	ically Filed] Date	M M /	01 2017
Signature				

Schedule E)	LFENDENT EXPEND	ITORES	PAGE 18 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project			C C00580068
Check if 24-hour report X 48-ho	our report X New rep	ort Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
UPS			04 30 7 2017
Mailing Address 1189 Wilmette Ave			Amount
City	State	Zip Code	251.17
Wilmette	IL	60091-2719	Transaction ID : VQZ6GACWWC3 Date of Disbursement or Obligation
Purpose of Expenditure shipping		Category/ Type	04 / 30 / 2017
Name of Federal Candidate		✗ Support	Office Sought: X House District: 06
Ossoff, Jon, , ,		Oppose	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7	17228.64	Disbursement For: ☐ Primary ☐ General 2018 ☐ Other (specify) ▶ Special General
Full Name of Payee			Date of Public Distribution/Dissemination
walmart Butte MT			04 / 30 / 2017
Mailing Address 3901 Harrison Ave	3		Amount
City	State	Zip Code	120.41
Butte	MT	59701-6802	Transaction ID : VQZ6GACWWT4 Date of Disbursement or Obligation
Purpose of Expenditure supplies		Category/ Type	04 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		✗ Support	Office Sought: House District: 00
Quist, Rob, , ,		Oppose	President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought		21671.51	Disbursement For: Primary General 2018 Special General Special General
(a) SUBTOTAL of Itemized Independent	ent Expenditures		▶ 371.58
(,,	,		on nee
(b) SUBTOTAL of Unitemized Indepen	ndent Expenditures		·· >
(c) TOTAL Independent Expenditures.			· · · · · · · · · · · · · · · · · · ·
	f, any candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Pascal, Harry, , ,	[Electron	ically Filed] Date	e 05 01 2017
Oignature			

Schedule E)	NI EXPEND			PAGE 19 OF 19 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Progressive Turnout Project				C C00580068
Check if 24-hour report × 48-hour report	X New rep	port Amends repo	ort filed on	*M / D = D / Y = Y = Y
Full Name of Payee Westbrook, Stacy, , ,				of Public Distribution/Dissemination
Mailing Address 3830 Lakeheath Dr			Amour	04 30 2017
City Cumming	State GA	Zip Code 30041-8329		1068.71 action ID: VQZ6GACWW32 of Disbursement or Obligation
Purpose of Expenditure payroll		Category/ Type		04 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		x Support	Office Sough	t: X House District: 06
Ossoff, Jon, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	17228.64	Disbursement 2018	t For:
Full Name of Payee Whiting, Sean, , ,				of Public Distribution/Dissemination
Mailing Address 3343 NE 17th Ave			Amou	
City	State	Zip Code		1217.95
Portland	OR	97212-2380		ction ID : VQZ6GACWVW7 If Disbursement or Obligation
Purpose of Expenditure payroll		Category/ Type	М	04 30 7 2017
Name of Federal Candidate		x Support	Office Sough	t: X House District: 00
Quist, Rob, , ,		Oppose	Preside	ent Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	7 7	21671.51	Disbursemen 2018	t For:
(a) SUBTOTAL of Itemized Independent Expenditu	ıres			2286.66
(b) SUBTOTAL of Unitemized Independent Expen	ditures			
(c) TOTAL Independent Expenditures			· [38900.15
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or it	date or authorize			
Pascal, Harry, , , Signature	[Electron	nically Filed] Date	05	01 2017