

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 15104 OF 17094  
(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)

**Progressive Turnout Project**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nixon, Jonell, , ,**

Mailing Address 10677 Joann St

City  
WillisState  
TXZip Code  
77318-6428FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CCIOccupation (for Individual)  
Inspection

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
10		17		2018

Transaction ID : VR05RQWQE29

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Actblue**

Mailing Address 366 Summer St

City

Somerville

State

MA

Zip Code

02144-3132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600417.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
10		17		2018

Transaction ID : VR05RQWQE29E

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Davis, William, , ,**

Mailing Address 740 Gladstone Rd NW

City

Atlanta

State

GA

Zip Code

30318-1712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
10		17		2018

Transaction ID : VR05RQWR629

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

55.00