

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

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

FOR LINE NUMBER: PAGE 29459 OF 58132

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Krosnick, Aaron, , ,

Mailing Address 13734 Bermuda Cay Ct

City
Jacksonville

State
FL

Zip Code
32225-5426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
self

Occupation (for Individual)
not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2017

Transaction ID : VR05RMAWJ35

Amount of Each Receipt this Period

15.00

☐ 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 ▼

3855009.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2017

Transaction ID : VR05RMAWJ35E

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Smith, Amy, , ,

Mailing Address 838 W End Ave

City
New York

State
NY

Zip Code
10025-5351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TVI

Occupation (for Individual)
psychotherapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2017

Transaction ID : VR05RMAXR35

Amount of Each Receipt this Period

500.00

☒ Memo Item

* Sec 527 contribution-memoed

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

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

15.00