

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Progressive Turnout Project</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00580068                 </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>City Donuts</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 23 / 2018
Mailing Address <b>746 Peoria St</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     12.64                 </div>
City <b>Aurora</b> State <b>CO</b> Zip Code <b>80011-8231</b>	
Purpose of Expenditure <b>Field Event</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: <b>CROW, JASON, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> <b>39197.91</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Elessawy, Hager, , ,</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 23 / 2018
Mailing Address <b>36 Martin Rd</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     523.05                 </div>
City <b>Verona</b> State <b>NJ</b> Zip Code <b>07044-2824</b>	
Purpose of Expenditure <b>Payroll</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: <b>SHERRILL, REBECCA MICHELLE, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>NJ</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> <b>28247.85</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 535.69             </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                               </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                               </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Pascal, Harry, , ,*  
Signature

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
11 / 11 / 2018