

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

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

FOR LINE NUMBER: PAGE 1386 OF 12428

(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. Finn, Kathleen, , ,

Mailing Address PO Box 3364

City
Homer

State
AK

Zip Code
99603-3364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self/retired

Occupation (for Individual)

Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2018

Transaction ID : VR05RPSXB51

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 ▼

876639.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2018

Transaction ID : VR05RPSXB51E

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. Rice, William, , ,

Mailing Address 24331 Wilma Cir

City
Eagle River

State
AK

Zip Code
99577-9680

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

National Park Service

Occupation (for Individual)

Management Biologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2018

Transaction ID : VR05RPSXF51

Amount of Each Receipt this Period

10.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

25.00