

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Progressive Takeover**

Full Name (Last, First, Middle Initial)

**A. Skerritt, G Michael, , ,**

Mailing Address 12211 Coit Rd

City  
ClevelandState  
OHZip Code  
44108-1102Purpose of Disbursement  
refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2020

FEC Identification Number

**C****Transaction ID : VVAF9APRQ**

Amount of Each Disbursement this Period

494.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gabor, George, , ,**Mailing Address 900 NE 195th St  
Apt 708City  
MiamiState  
FLZip Code  
33179-3456Purpose of Disbursement  
actblue refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2020

FEC Identification Number

**C****Transaction ID : VVAF9APR9F**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Miller, Linda, , ,**

Mailing Address 400 San Luis Ave

City  
Los AltosState  
CAZip Code  
94024-4025Purpose of Disbursement  
refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2020

FEC Identification Number

**C****Transaction ID : VVAF9APRP**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2294.00