

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

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

FOR LINE NUMBER: PAGE 3311 OF 8528

(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. Richmond-Covey, Radha Jill, Jill, ,**

Mailing Address 206 Roxbury Rd

City  
Niantic

State  
CT

Zip Code  
06357-1011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Richmond Covey Inc

Occupation (for Individual)

psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

05 / 14 / 2019

Transaction ID : VR05RSGXRX3

Amount of Each Receipt this Period

25.00

☐ 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 ▼

699904.24

Date of Receipt

05 / 15 / 2019

Transaction ID : VR05RSGXRX3E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Leifer, Lauren, , ,**

Mailing Address 2593 W Ellery Ave

City

Fresno

State

CA

Zip Code

93711-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

childrens hospital central caloif

Occupation (for Individual)

rn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

535.00

Date of Receipt

05 / 25 / 2019

Transaction ID : VR05RSJBEX3

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

50.00