

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7041 OF 16835

(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. Hendricks, Kathy, , ,

Mailing Address PO Box 2161

City
CodyState
WYZip Code
82414-2161FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
self employedOccupation (for Individual)
self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2019

Transaction ID : VR05RT0XW54

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 ▼

1128317.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2019

Transaction ID : VR05RT0XW54E

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. Crandell, Allen, , ,

Mailing Address W14480 County Road C

City

Melrose

State

WI

Zip Code

54642-6102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VA HospitalOccupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1115.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2019

Transaction ID : VR05RT0Y154

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

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

30.00

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