

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 307 OF 3716

(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. Birnberg, Barb, , ,

Mailing Address 724 Apple Tree Ln

City
GlencoeState
ILZip Code
60022-1004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfOccupation (for Individual)
social worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : VR05RKYAF64

Amount of Each Receipt this Period

100.00

☐ 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
SomervilleState
MAZip Code
02144-3132FEC 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 ▼

520467.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2017

Transaction ID : VR05RKYAF64E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Black, Perry, , ,

Mailing Address 22 Summit St

City
PhiladelphiaState
PAZip Code
19118-2833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Drexel Univ. College of Med.Occupation (for Individual)
Neurosurgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : VR05RKYJ379

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

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

200.00

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