

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50743 OF 59082

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 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. Perkins, James, , ,**

Mailing Address 22 Mount Vernon St

City

North Reading

State

MA

Zip Code

01864-2546

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

H

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2018

**Transaction ID : VR05RRQ4FP8**

Amount of Each Receipt this Period

35.00

☐ 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

4097375.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2018

**Transaction ID : VR05RRQ4FP8E**

Amount of Each Receipt this Period

35.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Butler, Pamela, , ,**Mailing Address 115 Cabrini Blvd  
Apt B51

City

New York

State

NY

Zip Code

10033-3426

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Three Crows

Occupation (for Individual)

artistic director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2018

**Transaction ID : VR05RRQ4MP8**

Amount of Each Receipt this Period

30.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

65.00

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