

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

FOR LINE NUMBER: PAGE 3485 OF 6347

(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. Chauhan, Pradyumna, , ,

Mailing Address 240 Berkeley Rd

City
GlensideState
PAZip Code
19038-3304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arcadia UniversityOccupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M M M | / | D D D | / | Y Y Y Y Y Y Y |
| 04 | / | 28 | / | 2019 |

Transaction ID : VR05RSCJJE5

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
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 ▼

715862.73

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M M M | / | D D D | / | Y Y Y Y Y Y Y |
| 04 | / | 28 | / | 2019 |

Transaction ID : VR05RSCJJE5E

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. Blake, Suzanne, , ,

Mailing Address 7 Noonhill Rd

City
MedfieldState
MAZip Code
02052-3007FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
eClinicalWorksOccupation (for Individual)
Corporate Trainer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M M M | / | D D D | / | Y Y Y Y Y Y Y |
| 04 | / | 10 | / | 2019 |

Transaction ID : VR05RSD11F5

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

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

30.00

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