

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

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

FOR LINE NUMBER: PAGE 3899 OF 18094

(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. Corcoran, Kevin, , ,

Mailing Address 46 Lavender Dr

City
Princeton

State
NJ

Zip Code
08540-9448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2020

Transaction ID : VR05RVHCZ52

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 ▼

1824805.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2020

Transaction ID : VR05RVHCZ52E

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. Samuels, Barbara, , ,

Mailing Address 6150 Canoga Ave
Apt 123

City
Woodland Hills

State
CA

Zip Code
91367-3706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

self

Occupation (for Individual)

speech-language pathologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2020

Transaction ID : VR05RVHDQ52

Amount of Each Receipt this Period

3.00

☐ Memo Item

* Earmarked Contribution: See Below

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

18.00

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