

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. Walker, Judith, , ,**

Mailing Address 5416 Halifax Ln

City  
Minneapolis

State  
MN

Zip Code  
55424-1437

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Allina health

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

**Transaction ID : VR05RVR7C55**

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 / 29 / 2020

**Transaction ID : VR05RVR7C55E**

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. Licklider, Janann, , ,**

Mailing Address 12 Ellery Sq

City  
Cambridge

State  
MA

Zip Code  
02138-4229

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 ▼

2763.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

**Transaction ID : VR05RVR9055**

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

20.00