

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)

PAGE 10967 OF 18094

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Turnout Project

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

A. Montgomery, Craig, , ,

Mailing Address PO Box 1219

City
Clackamas

State
OR

Zip Code
97015-1219

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 ▼

1975.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2020

Transaction ID : VR05RVPEM46

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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824805.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2020

Transaction ID : VR05RVPEM46E

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. Mendlein, Robert, , ,

Mailing Address 5010 Madison Rd

City
Cincinnati

State
OH

Zip Code
45227-1432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mr.

Occupation (for Individual)
Scheduler

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2020

Transaction ID : VR05RVPHK46

Amount of Each Receipt this Period

8.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

43.00