

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
AARON'S, INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 309 East Paces Ferry Road, N.E.
Atlanta GA 30305
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00459933 3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2014 through 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert P Sinclair

Signature of Treasurer Robert P Sinclair [Electronically Filed] Date 03 / 19 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AARON'S, INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="171796.20"/>	<input type="text" value="171796.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="184644.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12263.00"/>	<input type="text" value="39748.73"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="196907.59"/>	<input type="text" value="211544.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18572.50"/>	<input type="text" value="33209.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="178335.09"/>	<input type="text" value="178335.09"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AARON'S, INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6935.00	13735.00
(ii) Unitemized	5328.00	26013.73
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12263.00	39748.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12263.00	39748.73
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12263.00	39748.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12263.00	39748.73

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	62.50	189.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	62.50	189.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	29500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	10.00	20.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	10.00	20.00
29. Other Disbursements	3500.00	3500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18572.50	33209.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18572.50	33209.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12263.00	39748.73
34. Total Contribution Refunds (from Line 28(d))	10.00	20.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12253.00	39728.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	62.50	189.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	62.50	189.84

**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 6 OF 84
<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

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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Gregory G Bellof

Mailing Address 11043 E Independence Blvd

City Matthews	State NC	Zip Code 28105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17516

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
B. Gregory G Bellof

Mailing Address 11043 E Independence Blvd

City Matthews	State NC	Zip Code 28105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17691

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
C. Gregory G Bellof

Mailing Address 11043 E Independence Blvd

City Matthews	State NC	Zip Code 28105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19427

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 7 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Gregory G Bellof

Mailing Address 11043 E Independence Blvd

City Matthews	State NC	Zip Code 28105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19601

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
B. Gregory G Bellof

Mailing Address 11043 E Independence Blvd

City Matthews	State NC	Zip Code 28105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19785

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
C. Gregory G Bellof

Mailing Address 11043 E Independence Blvd

City Matthews	State NC	Zip Code 28105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19955

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 8 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. David E Bird		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17490
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-Dir, Records Info Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. David E Bird		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17665
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-Dir, Records Info Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. David E Bird		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19401
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-Dir, Records Info Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 9 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. David E Bird
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta	State GA	Zip Code 30305
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-Dir, Records Info Mgmt
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19575

Amount of Each Receipt this Period

25.00

B. David E Bird
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta	State GA	Zip Code 30305
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-Dir, Records Info Mgmt
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19759

Amount of Each Receipt this Period

25.00

C. David E Bird
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta	State GA	Zip Code 30305
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-Dir, Records Info Mgmt
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19929

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 10 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. David A Boggan
Full Name (Last, First, Middle Initial)

Mailing Address 185 W Gause Blvd

City Slidell	State LA	Zip Code 70460
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17517

Amount of Each Receipt this Period

50.00

B. David A Boggan
Full Name (Last, First, Middle Initial)

Mailing Address 185 W Gause Blvd

City Slidell	State LA	Zip Code 70460
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17692

Amount of Each Receipt this Period

50.00

C. David A Boggan
Full Name (Last, First, Middle Initial)

Mailing Address 185 W Gause Blvd

City Slidell	State LA	Zip Code 70460
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19428

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. David A Boggan

Mailing Address 185 W Gause Blvd

City Slidell State LA Zip Code 70460

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11AI.19602

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. David A Boggan

Mailing Address 185 W Gause Blvd

City Slidell State LA Zip Code 70460

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.19786

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. David A Boggan

Mailing Address 185 W Gause Blvd

City Slidell State LA Zip Code 70460

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.19956

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

**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 12 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Joe G Borrego		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17491
Mailing Address 1210 COUNTY ROAD WEST		Amount of Each Receipt this Period 25.00
City ODESSA	State TX	Zip Code 79763
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Joe G Borrego		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17666
Mailing Address 1210 COUNTY ROAD WEST		Amount of Each Receipt this Period 25.00
City ODESSA	State TX	Zip Code 79763
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Joe G Borrego		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19402
Mailing Address 1210 COUNTY ROAD WEST		Amount of Each Receipt this Period 25.00
City ODESSA	State TX	Zip Code 79763
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 13 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Joe G Borrego		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19576
Mailing Address 1210 COUNTY ROAD WEST		Amount of Each Receipt this Period 25.00
City ODESSA	State TX	Zip Code 79763
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Joe G Borrego		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19760
Mailing Address 1210 COUNTY ROAD WEST		Amount of Each Receipt this Period 25.00
City ODESSA	State TX	Zip Code 79763
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Joe G Borrego		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19930
Mailing Address 1210 COUNTY ROAD WEST		Amount of Each Receipt this Period 25.00
City ODESSA	State TX	Zip Code 79763
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 14 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. David Buck		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17518
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-SVP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. David Buck		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17693
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-SVP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. David Buck		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19429
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-SVP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 15 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. David Buck
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-SVP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19603

Amount of Each Receipt this Period

50.00

B. David Buck
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-SVP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19787

Amount of Each Receipt this Period

50.00

C. David Buck
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-SVP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19957

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 16 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Gabriel D Buehler		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17492
Mailing Address 3298 N GLASSFORD HILL RD		Amount of Each Receipt this Period 25.00
City Prescott Valley	State AZ	Zip Code 86314
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Gabriel D Buehler		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17667
Mailing Address 3298 N GLASSFORD HILL RD		Amount of Each Receipt this Period 25.00
City Prescott Valley	State AZ	Zip Code 86314
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Gabriel D Buehler		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19403
Mailing Address 3298 N GLASSFORD HILL RD		Amount of Each Receipt this Period 25.00
City Prescott Valley	State AZ	Zip Code 86314
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 17 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Gabriel D Buehler		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19577
Mailing Address 3298 N GLASSFORD HILL RD		Amount of Each Receipt this Period 25.00
City Prescott Valley	State AZ	Zip Code 86314
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Gabriel D Buehler		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19761
Mailing Address 3298 N GLASSFORD HILL RD		Amount of Each Receipt this Period 25.00
City Prescott Valley	State AZ	Zip Code 86314
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Gabriel D Buehler		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19931
Mailing Address 3298 N GLASSFORD HILL RD		Amount of Each Receipt this Period 25.00
City Prescott Valley	State AZ	Zip Code 86314
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 18 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Thomas M Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 1156 E. Florence Blvd.

City Casa Grande	State AZ	Zip Code 85122
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation Regional Manager
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17493

Amount of Each Receipt this Period

25.00

B. Thomas M Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 1156 E. Florence Blvd.

City Casa Grande	State AZ	Zip Code 85122
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation Regional Manager
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17668

Amount of Each Receipt this Period

25.00

C. Thomas M Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 1156 E. Florence Blvd.

City Casa Grande	State AZ	Zip Code 85122
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation Regional Manager
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19404

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 84
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Thomas M Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 1156 E. Florence Blvd.

City	State	Zip Code
Casa Grande	AZ	85122

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19578

Amount of Each Receipt this Period

25.00

B. Thomas M Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 1156 E. Florence Blvd.

City	State	Zip Code
Casa Grande	AZ	85122

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19762

Amount of Each Receipt this Period

25.00

C. Thomas M Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 1156 E. Florence Blvd.

City	State	Zip Code
Casa Grande	AZ	85122

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19932

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 20 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. David Carter		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17494
Mailing Address 185 Gause Blvd. West		Amount of Each Receipt this Period 25.00
City Slidell	State LA	Zip Code 70458
FEC ID number of contributing federal political committee.	C	
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. David Carter		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17669
Mailing Address 185 Gause Blvd. West		Amount of Each Receipt this Period 25.00
City Slidell	State LA	Zip Code 70458
FEC ID number of contributing federal political committee.	C	
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. David Carter		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19405
Mailing Address 185 Gause Blvd. West		Amount of Each Receipt this Period 25.00
City Slidell	State LA	Zip Code 70458
FEC ID number of contributing federal political committee.	C	
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 84
(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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. David Carter

Mailing Address 185 Gause Blvd. West

City Slidell	State LA	Zip Code 70458
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19579

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
B. David Carter

Mailing Address 185 Gause Blvd. West

City Slidell	State LA	Zip Code 70458
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19763

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
C. David Carter

Mailing Address 185 Gause Blvd. West

City Slidell	State LA	Zip Code 70458
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19933

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 22 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Penny Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 2600 LOUISVILLE AVENUE

City MONROE	State LA	Zip Code 71201
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 094 - RCAM
---------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17495

Amount of Each Receipt this Period

25.00

B. Penny Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 2600 LOUISVILLE AVENUE

City MONROE	State LA	Zip Code 71201
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 094 - RCAM
---------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17670

Amount of Each Receipt this Period

25.00

C. Penny Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 2600 LOUISVILLE AVENUE

City MONROE	State LA	Zip Code 71201
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 094 - RCAM
---------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19406

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 23 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Penny Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 2600 LOUISVILLE AVENUE

City MONROE State LA Zip Code 71201

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 094 - RCAM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2014
Transaction ID : SA11AI.19580

Amount of Each Receipt this Period
 25.00

B. Penny Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 2600 LOUISVILLE AVENUE

City MONROE State LA Zip Code 71201

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 094 - RCAM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.19764

Amount of Each Receipt this Period
 25.00

C. Penny Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 2600 LOUISVILLE AVENUE

City MONROE State LA Zip Code 71201

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 094 - RCAM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.19934

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

**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 24 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Brent Duncan

Mailing Address 1313 N COLLINS BLVD

City COVINGTON	State LA	Zip Code 70433
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11Al.17496

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
B. Brent Duncan

Mailing Address 1313 N COLLINS BLVD

City COVINGTON	State LA	Zip Code 70433
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11Al.17671

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
C. Brent Duncan

Mailing Address 1313 N COLLINS BLVD

City COVINGTON	State LA	Zip Code 70433
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11Al.19407

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 25 OF 84
(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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Brent Duncan

Mailing Address 1313 N COLLINS BLVD

City COVINGTON	State LA	Zip Code 70433
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19581

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
B. Brent Duncan

Mailing Address 1313 N COLLINS BLVD

City COVINGTON	State LA	Zip Code 70433
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19765

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
C. Brent Duncan

Mailing Address 1313 N COLLINS BLVD

City COVINGTON	State LA	Zip Code 70433
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19935

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 26 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. William A Ervolina		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17497
Mailing Address 2670 E. GERMANN RD		Amount of Each Receipt this Period 25.00
City CHANDLER	State AZ	Zip Code 85286
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	
Occupation 051 - Regional Manager		Aggregate Year-to-Date ▼ 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William A Ervolina		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17672
Mailing Address 2670 E. GERMANN RD		Amount of Each Receipt this Period 25.00
City CHANDLER	State AZ	Zip Code 85286
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	
Occupation 051 - Regional Manager		Aggregate Year-to-Date ▼ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William A Ervolina		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19408
Mailing Address 2670 E. GERMANN RD		Amount of Each Receipt this Period 25.00
City CHANDLER	State AZ	Zip Code 85286
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	
Occupation 051 - Regional Manager		Aggregate Year-to-Date ▼ 375.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 27 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. William A Ervolina		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19582
Mailing Address 2670 E. GERMANN RD		Amount of Each Receipt this Period 25.00
City CHANDLER	State AZ	Zip Code 85286
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. William A Ervolina		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19766
Mailing Address 2670 E. GERMANN RD		Amount of Each Receipt this Period 25.00
City CHANDLER	State AZ	Zip Code 85286
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. William A Ervolina		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19936
Mailing Address 2670 E. GERMANN RD		Amount of Each Receipt this Period 25.00
City CHANDLER	State AZ	Zip Code 85286
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 28 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Frank G Evans

Mailing Address 1702 EAST CENTRAL EXPRESSWAY

City Killeen	State TX	Zip Code 76541
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 054 - General Manager
---------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17498

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
B. Frank G Evans

Mailing Address 1702 EAST CENTRAL EXPRESSWAY

City Killeen	State TX	Zip Code 76541
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 054 - General Manager
---------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17673

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
C. Frank G Evans

Mailing Address 1702 EAST CENTRAL EXPRESSWAY

City Killeen	State TX	Zip Code 76541
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 054 - General Manager
---------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19409

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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 29 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Frank G Evans

Mailing Address 1702 EAST CENTRAL EXPRESSWAY

City	State	Zip Code
Killeen	TX	76541

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19583

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
B. Frank G Evans

Mailing Address 1702 EAST CENTRAL EXPRESSWAY

City	State	Zip Code
Killeen	TX	76541

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19767

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
C. Frank G Evans

Mailing Address 1702 EAST CENTRAL EXPRESSWAY

City	State	Zip Code
Killeen	TX	76541

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19937

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 30 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Anthony P Flores			Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17499
Mailing Address 1110 N Gateway Drive			Amount of Each Receipt this Period 25.00
City Madera	State CA	Zip Code 93637	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 325.00
Name of Employer Aaron's Inc		Occupation HO-Franchise Consultant II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Anthony P Flores			Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17674
Mailing Address 1110 N Gateway Drive			Amount of Each Receipt this Period 25.00
City Madera	State CA	Zip Code 93637	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 350.00
Name of Employer Aaron's Inc		Occupation HO-Franchise Consultant II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Anthony P Flores			Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19410
Mailing Address 1110 N Gateway Drive			Amount of Each Receipt this Period 25.00
City Madera	State CA	Zip Code 93637	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 375.00
Name of Employer Aaron's Inc		Occupation HO-Franchise Consultant II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Anthony P Flores

Mailing Address 1110 N Gateway Drive

City State Zip Code
Madera CA 93637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc HO-Franchise Consultant II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2014
Transaction ID : SA11AI.19584

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Anthony P Flores

Mailing Address 1110 N Gateway Drive

City State Zip Code
Madera CA 93637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc HO-Franchise Consultant II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.19768

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Anthony P Flores

Mailing Address 1110 N Gateway Drive

City State Zip Code
Madera CA 93637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc HO-Franchise Consultant II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.19938

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

**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 32 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Donald R Harper		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17500
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Network Engineer, Sr
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Donald R Harper		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17675
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Network Engineer, Sr
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Donald R Harper		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19411
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Network Engineer, Sr
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 33 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Donald R Harper
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw	State GA	Zip Code 30144
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-Network Engineer, Sr
---------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19585

Amount of Each Receipt this Period

25.00

B. Donald R Harper
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw	State GA	Zip Code 30144
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-Network Engineer, Sr
---------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19769

Amount of Each Receipt this Period

25.00

C. Donald R Harper
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw	State GA	Zip Code 30144
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-Network Engineer, Sr
---------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19939

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Scott Lee Harvey

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Operational Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : SA11AI.17519

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Scott Lee Harvey

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Operational Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.17694

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Scott Lee Harvey

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Operational Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.19430

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

**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 35 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mark A Henderson		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17702
Mailing Address 7009 HIGHWAY 165 SOUTH		Amount of Each Receipt this Period 40.00
City COLUMBIA	State LA	Zip Code 71418
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.18	

Full Name (Last, First, Middle Initial) B. Mark A Henderson		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19610
Mailing Address 7009 HIGHWAY 165 SOUTH		Amount of Each Receipt this Period 50.00
City COLUMBIA	State LA	Zip Code 71418
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.18	

Full Name (Last, First, Middle Initial) C. Mark A Henderson		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19964
Mailing Address 7009 HIGHWAY 165 SOUTH		Amount of Each Receipt this Period 40.00
City COLUMBIA	State LA	Zip Code 71418
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 054 - General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.18	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**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 36 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Roger Hooker
Full Name (Last, First, Middle Initial)

Mailing Address 7041 BARKER CYPRESS ROAD

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11Al.17501

Amount of Each Receipt this Period

25.00

B. Roger Hooker
Full Name (Last, First, Middle Initial)

Mailing Address 7041 BARKER CYPRESS ROAD

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11Al.17676

Amount of Each Receipt this Period

25.00

C. Roger Hooker
Full Name (Last, First, Middle Initial)

Mailing Address 7041 BARKER CYPRESS ROAD

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11Al.19412

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 37 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Roger Hooker
Full Name (Last, First, Middle Initial)

Mailing Address 7041 BARKER CYPRESS ROAD

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19586

Amount of Each Receipt this Period
25.00

B. Roger Hooker
Full Name (Last, First, Middle Initial)

Mailing Address 7041 BARKER CYPRESS ROAD

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19770

Amount of Each Receipt this Period
25.00

C. Roger Hooker
Full Name (Last, First, Middle Initial)

Mailing Address 7041 BARKER CYPRESS ROAD

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19940

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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 38 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Kevin J Hrvatin		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17520
Mailing Address 212 S. 37th Avenue		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	Zip Code 85009
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-VP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Kevin J Hrvatin		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17695
Mailing Address 212 S. 37th Avenue		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	Zip Code 85009
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-VP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Kevin J Hrvatin		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19431
Mailing Address 212 S. 37th Avenue		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	Zip Code 85009
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-VP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 39 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Kevin J Hrvatin		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19604
Mailing Address 212 S. 37th Avenue		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	Zip Code 85009
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-VP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. Kevin J Hrvatin		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19788
Mailing Address 212 S. 37th Avenue		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	Zip Code 85009
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-VP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) C. Kevin J Hrvatin		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19958
Mailing Address 212 S. 37th Avenue		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	Zip Code 85009
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-VP, Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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 40 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Stephen R Kincanon		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17502
Mailing Address 2740 PASS RD		Amount of Each Receipt this Period 25.00
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Stephen R Kincanon		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17677
Mailing Address 2740 PASS RD		Amount of Each Receipt this Period 25.00
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Stephen R Kincanon		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19413
Mailing Address 2740 PASS RD		Amount of Each Receipt this Period 25.00
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 41 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Stephen R Kincanon		Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2014 Transaction ID : SA11AI.19587
Mailing Address 2740 PASS RD		Amount of Each Receipt this Period 25.00
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Stephen R Kincanon		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2014 Transaction ID : SA11AI.19771
Mailing Address 2740 PASS RD		Amount of Each Receipt this Period 25.00
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Stephen R Kincanon		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2014 Transaction ID : SA11AI.19941
Mailing Address 2740 PASS RD		Amount of Each Receipt this Period 25.00
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 42 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Vance S Lamb
Full Name (Last, First, Middle Initial)

Mailing Address 2713 N. Grandview Ave.

City Odessa	State TX	Zip Code 79762
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 054 - General Manager
---------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17503

Amount of Each Receipt this Period

25.00

B. Vance S Lamb
Full Name (Last, First, Middle Initial)

Mailing Address 2713 N. Grandview Ave.

City Odessa	State TX	Zip Code 79762
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 054 - General Manager
---------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17678

Amount of Each Receipt this Period

25.00

C. Vance S Lamb
Full Name (Last, First, Middle Initial)

Mailing Address 2713 N. Grandview Ave.

City Odessa	State TX	Zip Code 79762
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 054 - General Manager
---------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19414

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 43 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Vance S Lamb

Mailing Address 2713 N. Grandview Ave.

City Odessa State TX Zip Code 79762

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11AI.19588

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Vance S Lamb

Mailing Address 2713 N. Grandview Ave.

City Odessa State TX Zip Code 79762

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.19772

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Vance S Lamb

Mailing Address 2713 N. Grandview Ave.

City Odessa State TX Zip Code 79762

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.19942

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 44 OF 84
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Daniel Lowery

Mailing Address 6450 US HIGHWAY 90

City	State	Zip Code
SPANISH FORT	AL	36527

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11Al.17703

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
B. Daniel Lowery

Mailing Address 6450 US HIGHWAY 90

City	State	Zip Code
SPANISH FORT	AL	36527

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11Al.19611

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Daniel Lowery

Mailing Address 6450 US HIGHWAY 90

City	State	Zip Code
SPANISH FORT	AL	36527

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	054 - General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11Al.19965

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**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 45 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Richard J Lykins		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17504
Mailing Address 61 East Brent Lane		Amount of Each Receipt this Period 25.00
City PENSACOLA	State FL	Zip Code 32503
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Richard J Lykins		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17679
Mailing Address 61 East Brent Lane		Amount of Each Receipt this Period 25.00
City PENSACOLA	State FL	Zip Code 32503
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Richard J Lykins		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19415
Mailing Address 61 East Brent Lane		Amount of Each Receipt this Period 25.00
City PENSACOLA	State FL	Zip Code 32503
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 46 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Richard J Lykins		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19589
Mailing Address 61 East Brent Lane		Amount of Each Receipt this Period 25.00
City PENSACOLA	State FL	Zip Code 32503
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Richard J Lykins		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19773
Mailing Address 61 East Brent Lane		Amount of Each Receipt this Period 25.00
City PENSACOLA	State FL	Zip Code 32503
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Richard J Lykins		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19943
Mailing Address 61 East Brent Lane		Amount of Each Receipt this Period 25.00
City PENSACOLA	State FL	Zip Code 32503
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 47 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bradley S Martin		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17505
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Franchise Consultant II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Bradley S Martin		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17680
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Franchise Consultant II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Bradley S Martin		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19416
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Franchise Consultant II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 48 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Bradley S Martin

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-Franchise Consultant II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19590

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
B. Bradley S Martin

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-Franchise Consultant II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19774

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
C. Bradley S Martin

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-Franchise Consultant II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19944

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 OF 84
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Steven A Michaels		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17521
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Steven A Michaels		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17696
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Steven A Michaels		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19432
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 50 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Steven A Michaels
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta	State GA	Zip Code 30305
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Finance
---------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19605

Amount of Each Receipt this Period

50.00

B. Steven A Michaels
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta	State GA	Zip Code 30305
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Finance
---------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19789

Amount of Each Receipt this Period

50.00

C. Steven A Michaels
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta	State GA	Zip Code 30305
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Finance
---------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19959

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 51 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Tristan J Montanero

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-SVP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : SA11AI.17522

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Tristan J Montanero

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-SVP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.17697

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Tristan J Montanero

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-SVP, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.19433

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

**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 52 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Tristan J Montanero		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19606
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-SVP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. Tristan J Montanero		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19790
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-SVP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) C. Tristan J Montanero		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19960
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-SVP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 53 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ray T Muncy		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17506
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-Dir, Franchise Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Ray T Muncy		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17681
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-Dir, Franchise Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ray T Muncy		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19417
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-Dir, Franchise Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 54 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Ray T Muncy

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-Dir, Franchise Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11AI.19591

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ray T Muncy

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-Dir, Franchise Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.19775

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ray T Muncy

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-Dir, Franchise Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.19945

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

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

**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 55 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Gregory S Newton
Full Name (Last, First, Middle Initial)

Mailing Address 2625 F.M. 1960 RD W

City HOUSTON State TX Zip Code 77068

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : SA11AI.17507

Amount of Each Receipt this Period
25.00

B. Gregory S Newton
Full Name (Last, First, Middle Initial)

Mailing Address 2625 F.M. 1960 RD W

City HOUSTON State TX Zip Code 77068

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.17682

Amount of Each Receipt this Period
25.00

C. Gregory S Newton
Full Name (Last, First, Middle Initial)

Mailing Address 2625 F.M. 1960 RD W

City HOUSTON State TX Zip Code 77068

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.19418

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 56 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Gregory S Newton
Full Name (Last, First, Middle Initial)

Mailing Address 2625 F.M. 1960 RD W

City HOUSTON State TX Zip Code 77068

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2014

Transaction ID : SA11AI.19592

Amount of Each Receipt this Period
 25.00

B. Gregory S Newton
Full Name (Last, First, Middle Initial)

Mailing Address 2625 F.M. 1960 RD W

City HOUSTON State TX Zip Code 77068

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.19776

Amount of Each Receipt this Period
 25.00

C. Gregory S Newton
Full Name (Last, First, Middle Initial)

Mailing Address 2625 F.M. 1960 RD W

City HOUSTON State TX Zip Code 77068

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.19946

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 57 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Michael H Pokorny

Mailing Address 826 South Wheatley

City State Zip Code
Ridgeland MS 39157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2014
Transaction ID : SA11AI.17508

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Michael H Pokorny

Mailing Address 826 South Wheatley

City State Zip Code
Ridgeland MS 39157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.17683

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Michael H Pokorny

Mailing Address 826 South Wheatley

City State Zip Code
Ridgeland MS 39157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : SA11AI.19419

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

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

FOR LINE NUMBER: PAGE 58 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Michael H Pokorny

Mailing Address 826 South Wheatley

City State Zip Code
Ridgeland MS 39157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2014
Transaction ID : SA11AI.19593

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Michael H Pokorny

Mailing Address 826 South Wheatley

City State Zip Code
Ridgeland MS 39157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.19777

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Michael H Pokorny

Mailing Address 826 South Wheatley

City State Zip Code
Ridgeland MS 39157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aaron's Inc 051 - Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.19947

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

**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 59 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Jess Lee Rogers
Full Name (Last, First, Middle Initial)

Mailing Address 1739 S.W. LOOP 410 #601

City SAN ANTONIO	State TX	Zip Code 78227
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation Regional Manager
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : SA11AI.17509

Amount of Each Receipt this Period
25.00

B. Jess Lee Rogers
Full Name (Last, First, Middle Initial)

Mailing Address 1739 S.W. LOOP 410 #601

City SAN ANTONIO	State TX	Zip Code 78227
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation Regional Manager
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.17684

Amount of Each Receipt this Period
25.00

C. Jess Lee Rogers
Full Name (Last, First, Middle Initial)

Mailing Address 1739 S.W. LOOP 410 #601

City SAN ANTONIO	State TX	Zip Code 78227
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation Regional Manager
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.19420

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 60 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jess Lee Rogers		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19594
Mailing Address 1739 S.W. LOOP 410 #601		Amount of Each Receipt this Period 25.00
City SAN ANTONIO	State TX	Zip Code 78227
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Jess Lee Rogers		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19778
Mailing Address 1739 S.W. LOOP 410 #601		Amount of Each Receipt this Period 25.00
City SAN ANTONIO	State TX	Zip Code 78227
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Jess Lee Rogers		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19948
Mailing Address 1739 S.W. LOOP 410 #601		Amount of Each Receipt this Period 25.00
City SAN ANTONIO	State TX	Zip Code 78227
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 61 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Michael P Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 7030 E Main St

City Reynoldsburg	State OH	Zip Code 43068
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17523

Amount of Each Receipt this Period

50.00

B. Michael P Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 7030 E Main St

City Reynoldsburg	State OH	Zip Code 43068
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17698

Amount of Each Receipt this Period

50.00

C. Michael P Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 7030 E Main St

City Reynoldsburg	State OH	Zip Code 43068
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation HO-VP, Operations
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19434

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 62 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Julie Schmidt-Scott			Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17510
Mailing Address 309 E. Paces Ferry RD NE			Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 325.00
Name of Employer Aaron's Inc		Occupation HO-Dir, Franchise Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Julie Schmidt-Scott			Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17685
Mailing Address 309 E. Paces Ferry RD NE			Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 350.00
Name of Employer Aaron's Inc		Occupation HO-Dir, Franchise Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Julie Schmidt-Scott			Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19421
Mailing Address 309 E. Paces Ferry RD NE			Amount of Each Receipt this Period 25.00
City Atlanta	State GA	Zip Code 30305	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 375.00
Name of Employer Aaron's Inc		Occupation HO-Dir, Franchise Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 63 OF 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Julie Schmidt-Scott

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-Dir, Franchise Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11AI.19595

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Julie Schmidt-Scott

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-Dir, Franchise Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.19779

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
c. Julie Schmidt-Scott

Mailing Address 309 E. Paces Ferry RD NE

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-Dir, Franchise Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.19949

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

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

**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 64 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Buz Sease		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 15 / 2014 Transaction ID : SA11AI.17511
Mailing Address 6830 Hwy 6 S		Amount of Each Receipt this Period 25.00
City HOUSTON	State TX	Zip Code 77083
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Buz Sease		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2014 Transaction ID : SA11AI.17686
Mailing Address 6830 Hwy 6 S		Amount of Each Receipt this Period 25.00
City HOUSTON	State TX	Zip Code 77083
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Buz Sease		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 15 / 2014 Transaction ID : SA11AI.19422
Mailing Address 6830 Hwy 6 S		Amount of Each Receipt this Period 25.00
City HOUSTON	State TX	Zip Code 77083
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 65 OF 84
(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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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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Buz Sease

Mailing Address 6830 Hwy 6 S

City HOUSTON	State TX	Zip Code 77083
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2014
Transaction ID : SA11AI.19596

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Buz Sease

Mailing Address 6830 Hwy 6 S

City HOUSTON	State TX	Zip Code 77083
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014
Transaction ID : SA11AI.19780

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Buz Sease

Mailing Address 6830 Hwy 6 S

City HOUSTON	State TX	Zip Code 77083
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
---------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014
Transaction ID : SA11AI.19950

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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 66 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Robert P Sinclair
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Corporate Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **07 / 15 / 2014**

Transaction ID : SA11AI.17524

Amount of Each Receipt this Period **50.00**

B. Robert P Sinclair
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Corporate Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11AI.17699

Amount of Each Receipt this Period **50.00**

C. Robert P Sinclair
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Corporate Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **08 / 15 / 2014**

Transaction ID : SA11AI.19435

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

**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 67 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Robert P Sinclair
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Corporate Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11AI.19607

Amount of Each Receipt this Period
50.00

B. Robert P Sinclair
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Corporate Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.19791

Amount of Each Receipt this Period
50.00

C. Robert P Sinclair
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Cobb Place Blvd

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Corporate Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.19961

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

**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 68 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Keith Smith		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17513
Mailing Address 2921 PAT BOOKER RD.		Amount of Each Receipt this Period 25.00
City UNIVERSAL CITY	State TX	Zip Code 78148
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Keith Smith		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17688
Mailing Address 2921 PAT BOOKER RD.		Amount of Each Receipt this Period 25.00
City UNIVERSAL CITY	State TX	Zip Code 78148
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Keith Smith		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19424
Mailing Address 2921 PAT BOOKER RD.		Amount of Each Receipt this Period 25.00
City UNIVERSAL CITY	State TX	Zip Code 78148
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 69 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Keith Smith		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19598
Mailing Address 2921 PAT BOOKER RD.		Amount of Each Receipt this Period 25.00
City UNIVERSAL CITY	State TX	Zip Code 78148
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Keith Smith		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19782
Mailing Address 2921 PAT BOOKER RD.		Amount of Each Receipt this Period 25.00
City UNIVERSAL CITY	State TX	Zip Code 78148
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Keith Smith		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19952
Mailing Address 2921 PAT BOOKER RD.		Amount of Each Receipt this Period 25.00
City UNIVERSAL CITY	State TX	Zip Code 78148
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 70 OF 84
<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)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Paul M Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1906 HWY 15 N.

City Laurel	State MS	Zip Code 39440
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SA11AI.17512

Amount of Each Receipt this Period

25.00

B. Paul M Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1906 HWY 15 N.

City Laurel	State MS	Zip Code 39440
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17687

Amount of Each Receipt this Period

25.00

C. Paul M Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1906 HWY 15 N.

City Laurel	State MS	Zip Code 39440
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19423

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 71 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. Paul M Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1906 HWY 15 N.

City Laurel	State MS	Zip Code 39440
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19597

Amount of Each Receipt this Period

25.00

B. Paul M Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1906 HWY 15 N.

City Laurel	State MS	Zip Code 39440
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.19781

Amount of Each Receipt this Period

25.00

C. Paul M Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1906 HWY 15 N.

City Laurel	State MS	Zip Code 39440
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc	Occupation 026 - Senior Regional Manager
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SA11AI.19951

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 72 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. John T Trainor
Full Name (Last, First, Middle Initial)

Mailing Address 2800 Canton Rd
Suite D-1

City Marietta State GA Zip Code 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Chief Info Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
07 / 15 / 2014

Transaction ID : SA11AI.17525

Amount of Each Receipt this Period
50.00

B. John T Trainor
Full Name (Last, First, Middle Initial)

Mailing Address 2800 Canton Rd
Suite D-1

City Marietta State GA Zip Code 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Chief Info Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : SA11AI.17700

Amount of Each Receipt this Period
50.00

C. John T Trainor
Full Name (Last, First, Middle Initial)

Mailing Address 2800 Canton Rd
Suite D-1

City Marietta State GA Zip Code 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Chief Info Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
08 / 15 / 2014

Transaction ID : SA11AI.19436

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 73 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. John T Trainor
Full Name (Last, First, Middle Initial)

Mailing Address 2800 Canton Rd
Suite D-1

City Marietta State GA Zip Code 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Chief Info Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
08 / 31 / 2014

Transaction ID : SA11AI.19608

Amount of Each Receipt this Period
50.00

B. John T Trainor
Full Name (Last, First, Middle Initial)

Mailing Address 2800 Canton Rd
Suite D-1

City Marietta State GA Zip Code 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Chief Info Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
09 / 15 / 2014

Transaction ID : SA11AI.19792

Amount of Each Receipt this Period
50.00

C. John T Trainor
Full Name (Last, First, Middle Initial)

Mailing Address 2800 Canton Rd
Suite D-1

City Marietta State GA Zip Code 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer Aaron's Inc Occupation HO-VP, Chief Info Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
09 / 30 / 2014

Transaction ID : SA11AI.19962

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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 74 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Tracey Whiston		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17514
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Div Controller, SALO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Tracey Whiston		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17689
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Div Controller, SALO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Tracey Whiston		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19425
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Div Controller, SALO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 75 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Tracey Whiston		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19599
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Div Controller, SALO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Tracey Whiston		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19783
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Div Controller, SALO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Tracey Whiston		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19953
Mailing Address 1015 Cobb Place Blvd		Amount of Each Receipt this Period 25.00
City Kennesaw	State GA	Zip Code 30144
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation HO-VP, Div Controller, SALO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 76 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

A. David W Wolff
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-Dir, Mktg Strat & Cr Devel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.17664

Amount of Each Receipt this Period

15.00

B. David W Wolff
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-Dir, Mktg Strat & Cr Devel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11AI.19400

Amount of Each Receipt this Period

15.00

C. David W Wolff
Full Name (Last, First, Middle Initial)

Mailing Address 309 E. Paces Ferry RD NE

City	State	Zip Code
Atlanta	GA	30305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Aaron's Inc	HO-Dir, Mktg Strat & Cr Devel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : SA11AI.19574

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**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 77 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. David W Wolff		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.19758
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 15.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Dir, Mktg Strat & Cr Devel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) B. David W Wolff		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.19928
Mailing Address 309 E. Paces Ferry RD NE		Amount of Each Receipt this Period 15.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation HO-Dir, Mktg Strat & Cr Devel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Richard Woodley		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.17515
Mailing Address 5430 West Broadway		Amount of Each Receipt this Period 25.00
City Pearland	State TX	Zip Code 77581
FEC ID number of contributing federal political committee. C	Name of Employer Aaron's Inc	Occupation 051 - Regional Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

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 78 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Richard Woodley		Date of Receipt MM / DD / YYYY 07 / 31 / 2014 Transaction ID : SA11AI.17690
Mailing Address 5430 West Broadway		Amount of Each Receipt this Period 25.00
City Pearland	State TX	Zip Code 77581
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Richard Woodley		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 Transaction ID : SA11AI.19426
Mailing Address 5430 West Broadway		Amount of Each Receipt this Period 25.00
City Pearland	State TX	Zip Code 77581
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) C. Richard Woodley		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : SA11AI.19600
Mailing Address 5430 West Broadway		Amount of Each Receipt this Period 25.00
City Pearland	State TX	Zip Code 77581
FEC ID number of contributing federal political committee. C		
Name of Employer Aaron's Inc	Occupation 051 - Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AUSTIN SCOTT FOR CONGRESS INC

Mailing Address PO BOX 2530

City TIFTON State GA Zip Code 31793

Purpose of Disbursement
Contribution

011

Candidate Name

JAMES AUSTIN SCOTT

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : SB23.19251

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. BUDDY CARTER FOR CONGRESS

Mailing Address 200 E ST JULIAN ST SUITE 603

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement
Contribution

011

Candidate Name

EARL LEROY CARTER

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2014

Transaction ID : SB23.19615

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN BARROW

Mailing Address PO BOX 1001

City AUGUSTA State GA Zip Code 30903

Purpose of Disbursement
Contribution

011

Candidate Name

JOHN J. BARROW

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Transaction ID : SB23.19252

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MIKE LEE INC

Mailing Address 10 WEST BROADWAY
SUITE 500

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement
Contribution

011

Candidate Name
MIKE LEE

Category/
Type

Office Sought: House
 Senate
 President
State: UT District: 00

Disbursement For: 2016
 Primary General
 Other (specify) Convention

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Transaction ID : **SB23.19253**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. PERDUE FOR SENATE

Mailing Address 3110 MAPLE DRIVE NE
SUITE 400

City ATLANTA State GA Zip Code 30305

Purpose of Disbursement
Contribution

011

Candidate Name
DAVID PERDUE

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 11

Disbursement For: 2014
 Primary General
 Other (specify) Convention

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SB23.19244**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PERLMUTTER FOR CONGRESS

Mailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Contribution

011

Candidate Name
EDWIN G PERLMUTTER

Category/
Type

Office Sought: House
 Senate
 President
State: CO District: 07

Disbursement For: 2014
 Primary General
 Other (specify) Convention

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : **SB23.17346**

Amount of Each Disbursement this Period

1000.00

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

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. PETE SESSIONS FOR CONGRESS

Mailing Address PO BOX 823047

City DALLAS State TX Zip Code 75382

Purpose of Disbursement
Contribution

011

Candidate Name

PETE SESSIONS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 32

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2014

Transaction ID : SB23.17348

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. SCHOCK FOR CONGRESS

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement
Contribution

011

Candidate Name

AARON JON SCHOCK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SB23.19254

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. UDALL FOR COLORADO

Mailing Address PO BOX 40158

City DENVER State CO Zip Code 80204

Purpose of Disbursement
Contribution

011

Candidate Name

MARK E UDALL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 00

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Transaction ID : SB23.19242

Amount of Each Disbursement this Period

500.00

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

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. UDALL FOR US ALL

Mailing Address PO BOX 25766

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
TOM UDALL

Office Sought: House
 Senate
 President
State: NM District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23.19243

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Deal For Governor

Mailing Address P.O. Box 2495

City Gainesville State GA Zip Code 30503

Purpose of Disbursement
Contribution

011

Candidate Name
Nathan Deal

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 09 / 2014

Transaction ID : SB29.19259

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Olens For Attorney General

Mailing Address P.O. Box 7

City Marietta State GA Zip Code 30061

Purpose of Disbursement
Contribution

011

Candidate Name
Sam Olens

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 09 / 2014

Transaction ID : SB29.19261

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

3500.00

3500.00