

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)

Rent-A-Center, Inc. Good Government Political Action Committee

Full Name (Last, First, Middle Initial)

A. ANN WAGNER FOR CONGRESS

Mailing Address PO BOX 50

City **BALLWIN** State **MO** Zip Code **63022**

Purpose of Disbursement
PAC Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: **MO** District: **02**

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB23.15157**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ASSOCIATION OF PROGRESSIVE RENTAL ORGANIZATIONS POLITICAL ACTION COMMITTEE

Mailing Address 1504 ROBIN HOOD TRAIL

City **AUSTIN** State **TX** Zip Code **78703**

Purpose of Disbursement
PAC Contribution to Federal Trade Association PAC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB23.15165**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FRIENDS FOR HARRY REID

Mailing Address P.O. BOX 19163

City **LAS VEGAS** State **NV** Zip Code **89132**

Purpose of Disbursement
PAC Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: **NV** District: **00**

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB23.15173**

Amount of Each Disbursement this Period

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

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