

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Aaron 4 FL 6

ADDRESS (number and street)

1180 Spring Centre South Blvd

Suite 320

Altamonte Springs

FL

32714

☐ Check if different
than previously
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00893289

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

STATE ▼ DISTRICT

FL

06

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)

☐

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:☒

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y
01 / 28 / 2025in the
State of

FL

(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2024

through

M M / D D / Y Y Y Y
01 / 08 / 2025*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

Baker, Aaron, , ,

Signature of Treasurer

Baker, Aaron, , ,

Date

M M / D D / Y Y Y Y
03 / 14 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Aaron 4 FL 6

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 01 / 2024

To:

M M / D D / Y Y Y Y
01 / 08 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	14677.26	14677.26
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	14677.26	14677.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16524.63	16524.63
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	16524.63	16524.63
8. Cash on Hand at Close of Reporting Period (from Line 27)	8152.63	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	10000.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Aaron 4 FL 6

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 01 / 2024

To:

M M / D D / Y Y Y Y
01 / 08 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

13640.00

13640.00

(ii) Unitemized

1037.26

1037.26

(iii) TOTAL of contributions
from individuals ▶

14677.26

14677.26

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

14677.26

14677.26

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

10000.00

10000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

10000.00

10000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

24677.26

24677.26

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16524.63	16524.63
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	16524.63	16524.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	24677.26
25. SUBTOTAL (add Line 23 and Line 24).....	24677.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16524.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8152.63

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 13

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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 4 FL 6

Full Name (Last, First, Middle Initial)

Gawne, Mary, , ,

A.

Mailing Address 504 Martingale Lane

City

Arnold

State

MD

Zip Code

21012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

260.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2024			

Transaction ID : SA11AI.4212

Amount of Each Receipt this Period

260.25

☐ Memo Item

Monetary

B.

Full Name (Last, First, Middle Initial)

Hood, Gary, , ,

Mailing Address 25 Oakview Circle

City

Ormond Beach

State

FL

Zip Code

32176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
01			04			2025			

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Monetary

C.

Full Name (Last, First, Middle Initial)

Hood, Sarah, Libbie, ,

Mailing Address 25 Oakview Circle

City

Ormond Beach

State

FL

Zip Code

32176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
01			04			2025			

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Monetary

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

4260.25

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 13

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Aaron 4 FL 6

Full Name (Last, First, Middle Initial)

Martineau, Jim, , ,

Mailing Address 5502 Graylog Street

City

Rancho Palos Verde

State

CA

Zip Code

90275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

1228.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 06 / 2025

06

2025

Transaction ID : SA11AI.4247

Amount of Each Receipt this Period

1228.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Martineau, Jim, , ,

Mailing Address 5502 Graylog Street

City

Rancho Palos Verde

State

CA

Zip Code

90275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

2228.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 06 / 2025

06

2025

Transaction ID : SA11AI.4249

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Smith, David, , ,

Mailing Address 7 Grackle Lane

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 23 / 2024

23

2024

Transaction ID : SA11AI.4225

Amount of Each Receipt this Period

300.00

☐ Memo Item
Donation

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

2528.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Aaron 4 FL 6

Full Name (Last, First, Middle Initial)

Smith, David, , ,

A.

Mailing Address 7 Grackle Lane

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

508.20

Date of Receipt

M M / D D / Y Y Y Y Y
01 05 2025

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period

208.20

☐ Memo Item
Monetary

B.

Full Name (Last, First, Middle Initial)

Tamargo, Tara, , ,

Mailing Address 2872 Centrum Place

City

Melbourne

State

FL

Zip Code

32940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y
01 01 2025

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period

260.25

☐ Memo Item
Monetary

C.

Full Name (Last, First, Middle Initial)

Turner, Thomas, , ,

Mailing Address 4024 Vermont Blvd

City

Elkton

State

FL

Zip Code

32033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 02 2025

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Donation

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

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

1468.45

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Aaron 4 FL 6

Full Name (Last, First, Middle Initial)

Walling, Annette, , ,

A. Mailing Address 3902 Laurel Branch Court

City
LakelandState
FLZip Code
33810FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

2134.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 22 2024

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

2082.03

☐ Memo Item
Monetary

Full Name (Last, First, Middle Initial)

Walling, Annette, , ,

B. Mailing Address 3902 Laurel Branch Court

City
LakelandState
FLZip Code
33810FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

3435.35

Date of Receipt

M M / D D / Y Y Y Y Y
01 02 2025

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

1301.27

☐ Memo Item
Monetary

Full Name (Last, First, Middle Initial)

We The People Elect Patriots

C. Mailing Address 216 Sea Island Drive

City
Ponte Vedra BeachState
FLZip Code
32082FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 23 2024

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Donation

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

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

4383.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 13

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Aaron 4 FL 6

Full Name (Last, First, Middle Initial)

Worcester, James, , ,

A. Mailing Address 3428 Farmingdale Road

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	5

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Monetary

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

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

1000.00

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

13640.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	

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NAME OF COMMITTEE (In Full)

Aaron 4 FL 6

Full Name (Last, First, Middle Initial)

Baker, Aaron, , ,

A.

Mailing Address 1180 Spring Centre South Blvd
Suite 320City
Altamonte SpringsState
FLZip Code
32714FEC ID number of contributing
federal political committee.

C H6FL06241

Name of Employer
Aaron Baker ConstructionOccupation
General Contractor

Receipt For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 18 2024

Transaction ID : SA13A.4345

Amount of Each Receipt this Period

10000.00

☐ Memo Item
Loan for Candidate Fee

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

10000.00

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

10000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Aaron 4 FL 6

Full Name (Last, First, Middle Initial)

A. AGE Graphics

Mailing Address 678 Collins Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2024

City
Little HockingState
OHZip Code
45742

FEC Identification Number

C	C00893289
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Purpose of Disbursement
Campaign Material

006

Amount of Each Disbursement this Period

2164.50

Transaction ID : SB17.4352

☐ Memo ItemCandidate Name
Aaron 4 FL 6Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2025
☐ Primary ☐ General
☒ Other (specify) ▼
Special-Primary

Full Name (Last, First, Middle Initial)

B. AGE Graphics

Mailing Address 678 Collins Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2025

City
Little HockingState
OHZip Code
45742

FEC Identification Number

C	C00893289
---	-----------

Purpose of Disbursement
Shirts

004

Amount of Each Disbursement this Period

95.00

Transaction ID : SB17.4263

☐ Memo ItemCandidate Name
Aaron 4 FL 6Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2025
☐ Primary ☐ General
☒ Other (specify) ▼
Special-Primary

Full Name (Last, First, Middle Initial)

C. Florida Dept of State

Mailing Address 500 South Bronough Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2024

City
TallahasseeState
FLZip Code
32399

FEC Identification Number

C	C00893289
---	-----------

Purpose of Disbursement
Qualifying Fee

001

Amount of Each Disbursement this Period

10440.00

Transaction ID : SB17.4338

☐ Memo ItemCandidate Name
Aaron 4 FL 6Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2025
☐ Primary ☐ General
☒ Other (specify) ▼
Special-Primary**SUBTOTAL** of Disbursements This Page (optional).....▶

12699.50

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Aaron 4 FL 6

Full Name (Last, First, Middle Initial)

A. In Print Political Advertising

Mailing Address 914 Railroad Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2025

City
TallahasseeState
FLZip Code
32310

FEC Identification Number

C	C00893289
---	-----------

Purpose of Disbursement
Print material

006

Amount of Each Disbursement this Period

840.29

Transaction ID : SB17.4260

☐ Memo ItemCandidate Name
Aaron 4 FL 6Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

State: FL

District: 06

Full Name (Last, First, Middle Initial)

B. Magic Printing Services

Mailing Address 7056 Stapoint Court

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2025

City
Winter ParkState
FLZip Code
32792

FEC Identification Number

C	C00893289
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Purpose of Disbursement
Campaign Materials

006

Amount of Each Disbursement this Period

1323.59

Transaction ID : SB17.4353

☐ Memo ItemCandidate Name
Aaron 4 FL 6Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

State: FL

District: 06

Full Name (Last, First, Middle Initial)

C. Salvo Political Consultant SoftwareMailing Address 150 S. Pine Island Road
Ste 530

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2025

City
PlantationState
FLZip Code
33324

FEC Identification Number

C	C00893289
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Purpose of Disbursement
Campaign Management Software

001

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17.4267

☐ Memo ItemCandidate Name
Aaron 4 FL 6Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2025

☐ Primary ☐ General
☒ Other (specify) ▼

Special-Primary

State: FL

District: 06

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

3363.88

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

16063.38

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 13

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4345

Aaron 4 FL 6

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2025

☐ Primary☐ General☒ Other (specify) ▼

Special-Primary

Mailing Address

1180 Spring Centre South Blvd
Suite 320

City

Altamonte Springs

State

FL

ZIP Code

32714

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 18 / 2024

M M / D D / Y Y Y Y

3/28/2025

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

10000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.