

**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 498
	<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)
Boehner for Speaker

A. MR. S. JAVAID ANWAR
Full Name (Last, First, Middle Initial)

Mailing Address 110 NORTH MARIENFELD SUITE 290

City MIDLAND State TX Zip Code 79701-4412

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

Name of Employer MIDLAND ENERGY INC. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 47400.00

Date of Receipt 06 / 30 / 2014
Transaction ID : SA11.582746B

Amount of Each Receipt this Period -2600.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. MRS. VICKY L. ANWAR
Full Name (Last, First, Middle Initial)

Mailing Address 110 N. MARIENFELD STE. 290

City MIDLAND State TX Zip Code 79701-4412

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 06 / 30 / 2014
Transaction ID : SA11.589463

Amount of Each Receipt this Period 2600.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REATTRIBUTION FROM SPOUSE

C. MR. JAMES P. ARGIRES
Full Name (Last, First, Middle Initial)

Mailing Address 2150 HARRISBURG PIKE SUITE 200

City LANCASTER State PA Zip Code 17601-2644

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

Name of Employer BRAIN ORTHOPEDIC SPINE SPECIALISTS Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 23 / 2014
Transaction ID : SA11.584005

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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