

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

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

FOR LINE NUMBER: PAGE 84 / 194

(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)  
Boehner for Speaker

**A.**

Full Name (Last, First, Middle Initial)  
MR. PETER C. LA ROSE

Mailing Address 6745 SOUTHPOINTE PKWY.

City State Zip Code  
BRECKSVILLE OH 44141-3267

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

Name of Employer Occupation  
HOUSE OF LA ROSE OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11.598

Amount of Each Receipt this Period

1600.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. THOMAS C. LA ROSE

Mailing Address 6745 SOUTHPOINT PKWY.

City State Zip Code  
BRECKSVILLE OH 44141-3267

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

Name of Employer Occupation  
HOUSE OF LA ROSE CEO AND CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11.599

Amount of Each Receipt this Period

900.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. ANDRE B. LACY

Mailing Address 54 MONUMENT CIRCLE  
STE. 800

City State Zip Code  
INDIANAPOLIS IN 46204-2949

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

Name of Employer Occupation  
LDI, LTD. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11.677

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

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

12500.00

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