

SCHEDULE A

ITEMIZED RECEIPTS

FROM INDIVIDUALS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

JUDY HANDEK FOR CONGRESS COMMITTEE - 1996

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
E L Brenda Berg P.O. Box 38038 Houston, TX 77238	Jensen, Inc. Executive > \$ 250.00	10/31/96	250.00
E L Doris Bergen 642 Shultz Rd. Hamilton, OH 45013	Miami University Professor > \$ 300.00 (100.00-P; 200.00-G)	10/24/96	200.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Berkowitz 5218 W. 121st Street Overland Park, KS. 66209	Yellow Corp. Retired > \$ 600.00 (500.00-P; 100.00-G)	10/21/96	100.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joan Dolan Biblo 6810 W. 52nd Place Mission, KS. 66202	Prime Health Foundation Executive > \$ 650.00 (300.00-P; 350.00-G)	10/31/96	50.00
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Edward M. Boyle 6530 Indian Lane Shawnee Mission, KS. 66208	Payner Jones, Chfd. Farmer > \$ 450.00 (350.00-P; 100.00-G)	10/31/96	100.00
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Stanley Brand 3909 Cedar Lane Prairie Village, KS 66207	Stollard Clinic Physician > \$ 400.00 (200.00-P; 200.00-G)	10/29/96	200.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Kenda Brown 18170 Metcalf Stillwell, KS. 66805	None Homemaker > \$ 1000.00	10/25/96	1000.00

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)