

SCHEDULE A

ITEMIZED RECEIPTS

Any information required from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for pecuniary purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Friends of Phil dba Kline for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rob Metcalf 8348 Oakview Cir Shawnee Mission, KS 66215-5382 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation CPA Aggregate Year-to-Date -> \$365.00	09/20/2000	\$125.00
B. Full Name, Mailing Address and Zip Code David R. Meyer 29511 E Moreland School Rd Blue Springs, MO 64014- Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$250.00	09/21/2000	\$250.00
C. Full Name, Mailing Address and Zip Code Jan Meyers 8408 W 90th Shawnee Mission, KS 66212- Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	09/05/2000	\$500.00
D. Full Name, Mailing Address and Zip Code J. Brett Milbourn 13107 Kessler Shawnee Mission, KS 66213- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) PRIMARY	Name of Employer Walters, Bender, Strohsho Occupation Attorney Aggregate Year-to-Date -> \$250.00	07/20/2000	\$250.00
E. Full Name, Mailing Address and Zip Code Chris Miller PO Box 1201 Lawrence, KS 66044- Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Little & Miller, Chtd. Occupation Attorney Aggregate Year-to-Date -> \$250.00	08/16/2000	\$250.00
F. Full Name, Mailing Address and Zip Code John R. Miller 9545 Vista Dr Shawnee Mission, KS 66220-3631 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) PRIMARY	Name of Employer Self-employed Occupation Consulting Actuary Aggregate Year-to-Date -> \$300.00	07/26/2000	\$100.00
G. Full Name, Mailing Address and Zip Code John R. Miller 9545 Vista Dr Shawnee Mission, KS 66220-3631 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-employed Occupation Consulting Actuary Aggregate Year-to-Date -> \$400.00	09/07/2000	\$100.00

SUBTOTAL of Receipts This Page (optional)	\$1575.00
TOTAL This Period (last page this line number only)	