

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

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

FOR LINE NUMBER: PAGE 17 / 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TAFF FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Larry D. Evans		Date of Receipt M / D / Y 11 / 16 / 2003
Mailing Address 113 Terrace Trail S		Transaction ID: SA11A1.12522
City Lake Quivira	State KS	Zip Code 66217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Evans Oral Surgery	Occupation Oral Surgeon	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Larry D. Evans		Date of Receipt M / D / Y 12 / 31 / 2003
Mailing Address 113 Terrace Trail S		Transaction ID: SA11A1.12523
City Lake Quivira	State KS	Zip Code 66217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Evans Oral Surgery	Occupation Oral Surgeon	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Daniel Feagans		Date of Receipt M / D / Y 10 / 18 / 2003
Mailing Address 9908 W. 121st Terr.		Transaction ID: SA11A1.12828
City Overland Park	State KS	Zip Code 66213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 510.00
Name of Employer Stinson, Morrison, Hecker	Occupation Attorney	In-kind - Food & Beverage Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 510.00	

SUBTOTAL of Receipts This Page (optional)	▶	910.00
TOTAL This Period (last page this line number only)	▶	