

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

Other Disbursements

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

NAME OF COMMITTEE (in Full)

**Jim Ryan For Congress**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kansas Republican Party 2025 SW Gage Blvd Topeka, KS 66604	Contribution	17-Oct-00	5000
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
Kline for Congress PO Box 3009 Shawnee Mission, Ks 66203	Contribution	12-Oct-00	900
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
Nat'l Hep Congl Comm. 320 First Street SE Washington, DC 20003	Contribution	12-Oct-00	5800
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, Day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify)		
SUBTOTAL of Disbursements This Page (optional).....			\$11,700.
TOTAL This Period (last page this line number only) .....			\$11,700.

2000-01-01 10:00 AM