

SCHEDULE A

ITEMIZED RECEIPTS

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

A. Full Name, Mailing Address and Zip Code Jack D. Paradise 15205 S Keeler St Olathe, KS 66062-2714 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jayhawk Plastics, Inc. Occupation Owner Date (month, day, year) 10/13/2000 Aggregate Year-to-Date -> \$2000.00	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and Zip Code Cliff Pash PO Box 3321 Lawrence, KS 66046- Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Century, Inc. Occupation Sales Representative Date (month, day, year) 10/06/2000 Aggregate Year-to-Date -> \$300.00	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Gerald H. Patrick 10009 Howe Dr Shawnee Mission, KS 66206- Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jayhawk Plastics, Inc. Occupation Retired Date (month, day, year) 10/06/2000 Aggregate Year-to-Date -> \$1250.00	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code Donald R. Pearce 10424 W 131st St Shawnee Mission, KS 66213- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer Pearce Construction Occupation President Date (month, day, year) 10/02/2000 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code Eugene Pearce 6335 Robin Hood Ln Shawnee Mission, KS 66203- Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jayhawk Plastics, Inc. Occupation Physician Date (month, day, year) 10/11/2000 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Linda S. Pearce 10424 W 131st St Shawnee Mission, KS 66213- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer Jayhawk Plastics, Inc. Occupation Homemaker Date (month, day, year) 10/02/2000 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and Zip Code Carmiletta Penny 643 Tennessee St Lawrence, KS 66044- Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jayhawk Plastics, Inc. Occupation Homemaker Date (month, day, year) 10/09/2000 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)	\$4700.00
TOTAL This Period (last page this line number only)	

2025 RELEASE UNDER E.O. 14176