

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2003 JUL 19 P 3 26

1. NAME OF COMMITTEE (in full)		Friends of Phill dba Kline for Congress
ADDRESS (number and street) P.O. Box 3009	<input type="checkbox"/> Check if different than previously reported.	2. FEC IDENTIFICATION NUMBER C00348169
CITY, STATE and ZIP CODE Shawnee, KS 66203	STATE/DISTRICT	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
<input checked="" type="checkbox"/> July 15 Quarterly Report	election on _____ In the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____
<input type="checkbox"/> January 31 Year End Report	_____ In the State of _____
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for: Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
04/01/2000 through 08/30/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$95014.60	\$139955.31
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$95014.60	\$139955.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$58474.64	\$103091.01
(b) Total Offsets to Operating Expenditures (from Line 14)	\$271.38	\$271.38
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$58203.46	\$102819.63
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$108570.80	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$26958.88	

For further information:
Federal Election Commission
660 E Street, NW
Washington, DC 20463
Toll Free 800-424-9630
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jay F. Ketterling	Date 7/15/03
Signature of Treasurer <i>Jay F. Ketterling</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. §437g.

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FEC FORM 3
(Revised 4/87)

Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) Friends of Phill dba Kilne for Congress	Report Covering the Period: From: 04/01/2000 To: 06/30/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$57307.70	
(ii) Unitemized	\$28208.90	
(iii) Total of contributions from individual	\$85514.80	\$129081.31
(b) Political Party Committees	\$0.00	\$1394.00
(c) Other Political Committees (such as PACs)	\$9500.00	\$9500.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	\$95014.80	\$139955.31
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$271.38	\$271.38
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$380.08	\$695.22
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$95886.04	\$140921.91
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$58474.84	\$103091.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$58474.84	\$103091.01
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$71379.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$95886.04
25. SUBTOTAL (add Line 23 and Line 24)		\$167265.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$58474.84
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$108791.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for electoral 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 Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code Ernest M. Adair 19840 Floyd Stilwell, KS 66085-	Name of Employer Self-employed	Date (month, day, year) 04/26/2000	Amount of Each Receipt this Period \$500.00
	Occupation Nikken Distributor	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Patricia Adair 19840 Floyd Stilwell, KS 66085-	Name of Employer Self-employed	Date (month, day, year) 04/26/2000	Amount of Each Receipt this Period \$500.00
	Occupation Nikken Distributor	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code Lionel D Alford 1704 N Cypress Wichita, KS 67206-	Name of Employer Retired	Date (month, day, year) 04/10/2000	Amount of Each Receipt this Period \$200.00
	Occupation Retired	Aggregate Year-to-Date -> \$400.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code Donald Allman 11800 Winterway Lane Fairfax Station, VA 22039-	Name of Employer Earmarked	Date (month, day, year) 05/20/2000	Amount of Each Receipt this Period \$300.00
	Occupation Earmarked	Aggregate Year-to-Date -> \$300.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through Madison Project 119 "C" Street, SE Washington, DC 20003	Name of Employer Earmarked	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Earmarked	Aggregate Year-to-Date ->	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code Don Armacost, Jr. 3680 W 179th Stilwell, KS 66085-	Name of Employer Peterson Manufacturing	Date (month, day, year) 06/15/2000	Amount of Each Receipt this Period \$250.00
	Occupation Owner	Aggregate Year-to-Date -> \$250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code Dana J. Ator 6535 Belinder Shawnee Mission, KS 66208-	Name of Employer K U Medical Center	Date (month, day, year) 06/15/2000	Amount of Each Receipt this Period \$250.00
	Occupation Physician	Aggregate Year-to-Date -> \$750.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	\$2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting 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)
 Friends of Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code Dana J. Ator 6535 Belinder Shawnee Mission, KS 66208-	Name of Employer K U Medical Center	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$250.00
	Occupation Physician	Aggregate Year-to-Date -> \$1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Dana J. Ator 6535 Belinder Shawnee Mission, KS 66208-	Name of Employer K U Medical Center	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$50.00
	Occupation Physician	Aggregate Year-to-Date -> \$1050.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code Steve Beaumont 7003 Renner Rd Shawnee Mission, KS 66217-	Name of Employer Beaumont Real Estate	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period \$150.00
	Occupation Realtor	Aggregate Year-to-Date -> \$300.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code Sharon Becker 11642 Chestnut Olathe, KS 66061-	Name of Employer	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period \$250.00
	Occupation Homemaker	Aggregate Year-to-Date -> \$250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code Donald Bell 11599 N Ridgeview Olathe, KS 66061-	Name of Employer Security Savings	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$250.00
	Occupation Owner	Aggregate Year-to-Date -> \$750.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code Faith Bell 11599 N Ridgeview Olathe, KS 66061-	Name of Employer	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$250.00
	Occupation Homemaker	Aggregate Year-to-Date -> \$750.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code Ruth Bell 7438 Woodland Shawnee Mission, KS 66218-9700	Name of Employer	Date (month, day, year) 04/10/2000	Amount of Each Receipt this Period \$500.00
	Occupation Homemaker	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	\$1700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such reports and statements may not be sold or used by any person for the purpose of soliciting 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)
 Friends of Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code Clyde R. Berry 10230 Hemlock Shawnee Mission, KS 66212- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-employed	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Financial adviser		
	Aggregate Year-to-Date ->		\$1000.00
B. Full Name, Mailing Address and Zip Code James T. Blaufuss 7919 Westgate Ct Shawnee Mission, KS 66215-2660 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer ReMax	Date (month, day, year) 06/23/2000	Amount of Each Receipt this Period \$250.00
	Occupation Realtor		
	Aggregate Year-to-Date ->		\$350.00
C. Full Name, Mailing Address and Zip Code Shari J. Blue 10687 W 157th Ter Shawnee Mission, KS 66221- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/03/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Homemaker		
	Aggregate Year-to-Date ->		\$1000.00
D. Full Name, Mailing Address and Zip Code Barton Brown 8302 W 98th Ter Shawnee Mission, KS 66212-3498 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Via-Bancourier, Inc.	Date (month, day, year) 05/18/2000	Amount of Each Receipt this Period \$250.00
	Occupation Owner		
	Aggregate Year-to-Date ->		\$250.00
E. Full Name, Mailing Address and Zip Code Frank E. Brown 158 Terrace Trail, S. Shawnee Mission, KS 66217- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 05/20/2000	Amount of Each Receipt this Period \$500.00
	Occupation Earmarked		
	Aggregate Year-to-Date ->		\$500.00
F. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through Madison Project 119 "C" Street, SE Washington, DC 20003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code Walter Byers PO 6412 Shawnee Mission, KS 66206- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/23/2000	Amount of Each Receipt this Period \$300.00
	Occupation		
	Aggregate Year-to-Date ->		\$300.00

SUBTOTAL of Receipts This Page (optional)	\$3300.00
TOTAL This Period (last page this line number only)	

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 William L. Casassa 120 Terrace Trl S Kansas City, KS 66106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Date (month, day, year) 05/18/2000	Amount of Each Receipt this Period \$250.00
	Occupation Retired Aggregate Year-to-Date -> \$557.11	
B. Full Name, Mailing Address and Zip Code William L. Casassa 120 Terrace Trl S Kansas City, KS 66106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period \$157.13 Site rental, food and printing IN-KIND
	Occupation Retired Aggregate Year-to-Date -> \$714.24	
C. Full Name, Mailing Address and Zip Code Arthur Chartrand 130 N Cherry, Ste 202 Olathe, KS 66061- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-employed Date (month, day, year) 06/12/2000	Amount of Each Receipt this Period \$200.00
	Occupation Attorney Aggregate Year-to-Date -> \$200.00	
D. Full Name, Mailing Address and Zip Code Arthur Chartrand 130 N Cherry, Ste 202 Olathe, KS 66061- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-employed Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$30.00
	Occupation Attorney Aggregate Year-to-Date -> \$230.00	
E. Full Name, Mailing Address and Zip Code Edward F. Clark 9100 Lamar, Apt 201 Shawnee Mission, KS 66207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period \$500.00
	Occupation Retired Aggregate Year-to-Date -> \$500.00	
F. Full Name, Mailing Address and Zip Code Kent Cooper 1742 N Cypress Wichita, KS 67206- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period \$250.00
	Occupation Physician Aggregate Year-to-Date -> \$250.00	
G. Full Name, Mailing Address and Zip Code Robert D. Curtis 14501 W 86th St Shawnee Mission, KS 66215- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Miami County Mental Health Hos Date (month, day, year) 06/13/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Executive Director Aggregate Year-to-Date -> \$1000.00	

SUBTOTAL of Receipts This Page (optional)	\$2387.13
TOTAL This Period (last page this line number only)	

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 David W. Davies III 6405 Metcalf Ave Shawnee Mission, KS 66202-	Name of Employer Self-employed Occupation Attorney	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
B. Full Name, Mailing Address and Zip Code Lynn I. De Marco 9717 Cherokee Ln Shawnee Mission, KS 66206-	Name of Employer K U Medical Center Occupation Physician	Date (month, day, year) 04/10/2000	Amount of Each Receipt this Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$100.00		
C. Full Name, Mailing Address and Zip Code Lynn I. De Marco 9717 Cherokee Ln Shawnee Mission, KS 66206-	Name of Employer K U Medical Center Occupation Physician	Date (month, day, year) 06/13/2000	Amount of Each Receipt this Period \$400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
D. Full Name, Mailing Address and Zip Code Wesley R. Dixon 12016 Cherokee Ln Shawnee Mission, KS 66209-1061	Name of Employer Guardian Industries Occupation Vice President	Date (month, day, year) 04/17/2000	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
E. Full Name, Mailing Address and Zip Code Wesley R. Dixon 12016 Cherokee Ln Shawnee Mission, KS 66209-1061	Name of Employer Guardian Industries Occupation Vice President	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
F. Full Name, Mailing Address and Zip Code Thomas Dobski 2007 Palmer Dr Lawrence, KS 66047-	Name of Employer Self-employed Occupation McDonalds Franchise Owner	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
G. Full Name, Mailing Address and Zip Code Leslie Donovan 314 N Rainbowlake Wichita, KS 67235-	Name of Employer Donovan GM Occupation Owner	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		

SUBTOTAL of Receipts This Page (optional)	\$2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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

<p>A. Full Name, Mailing Address and Zip Code John M. Duggan 15401 Aberdeen Shawnee Mission, KS 66224- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Duggan, Shadwick & Doerr Occupation Attorney Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 05/08/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Karen L. Duggan 15401 Aberdeen Shawnee Mission, KS 66224- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 05/08/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code V. Dunsworth 12331 Granada Shawnee Mission, KS 66209- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Raymore Healthcare Occupation Owner Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 05/22/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Timothy L. Dylman 9020 W 169th St Stilwell, KS 66085- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Waddell and Reed Occupation Investment manager Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 04/10/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Martin Eby, Jr. PO Box 1679 Wichita, KS 67201- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Eby Corporation Occupation Chairman Aggregate Year-to-Date -> \$199.00</p>	<p>Date (month, day, year) 04/28/2000</p>	<p>Amount of Each Receipt this Period \$199.00</p>
<p>F. Full Name, Mailing Address and Zip Code Martin Eby, Jr. PO Box 1679 Wichita, KS 67201- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Eby Corporation Occupation Chairman Aggregate Year-to-Date -> \$699.00</p>	<p>Date (month, day, year) 05/12/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code John Esau 3609 Quail Creek Ct Lawrence, KS 66047- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Pennington & Co. Occupation President Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 06/06/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>

SUBTOTAL of Receipts This Page (optional)

\$4949.00

TOTAL This Period (last page this line number only)

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 Jan Exby 8218 W 97th Ter Shawnee Mission, KS 66212-3336 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Merrill Lynch	Date (month, day, year) 04/11/2000	Amount of Each Receipt this Period \$250.00
	Occupation Marketing Manager	Aggregate Year-to-Date -> \$250.00	
B. Full Name, Mailing Address and Zip Code Clifford D. Franklin 110 Towergate Pl Atlanta, GA 30350-2999 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Henwood Energy	Date (month, day, year) 05/18/2000	Amount of Each Receipt this Period \$300.00
	Occupation Energy Consultant	Aggregate Year-to-Date -> \$300.00	
C. Full Name, Mailing Address and Zip Code Clifford D. Franklin 110 Towergate Pl Atlanta, GA 30350-2999 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Henwood Energy	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$300.00
	Occupation Energy Consultant	Aggregate Year-to-Date -> \$600.00	
D. Full Name, Mailing Address and Zip Code John K. Garvey 301 N Main Sts 1300 Wichita, KS 67202- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Petroleum Inc.	Date (month, day, year) 04/10/2000	Amount of Each Receipt this Period \$1000.00
	Occupation CEO	Aggregate Year-to-Date -> \$1000.00	
E. Full Name, Mailing Address and Zip Code Julie Gilmore 12541 S Hagan Ln Olathe, KS 66062- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Homemaker	Aggregate Year-to-Date -> \$1000.00	
F. Full Name, Mailing Address and Zip Code Kevin P. Gilmore 12541 S Hagan Ln Olathe, KS 66062- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Security Savings	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Executive	Aggregate Year-to-Date -> \$1000.00	
G. Full Name, Mailing Address and Zip Code Joseph P. Gordon 4500 I Shell Sq New Orleans, LA 70139- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Adams & Reese	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$250.00
	Occupation Attorney	Aggregate Year-to-Date -> \$250.00	

SUBTOTAL of Receipts This Page (optional)	\$4100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting 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)
 Friends of Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code George V. Green 26802 W 108th Olathe, KS 66061- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and Zip Code Ruth Green 26802 W 108th St Olathe, KS 66061-7470 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer My Favorite Things Occupation Owner Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code Maureen Halpin 8501 Juniper St Shawnee Mission, KS 66207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 06/20/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code H C Halvorsen 26260 W 108th Olathe, KS 66061- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/14/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Elizabeth M. Hanicke 4811 Belinder Ct Shawnee Mission, KS 66205- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Alice V. Hansen 15150 England Shawnee Mission, KS 66221- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Carpenter & Co. Occupation Accountant Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/10/2000	Amount of Each Receipt this Period \$400.00
G. Full Name, Mailing Address and Zip Code Alice V. Hansen 15150 England Shawnee Mission, KS 66221- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Carpenter & Co. Occupation Accountant Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)	\$4000.00
TOTAL This Period (last page this line number only)	

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 Alice V. Hansen 15150 England Shawnee Mission, KS 66221-	Name of Employer Carpenter & Co.	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period \$100.00
	Occupation Accountant		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$600.00		
B. Full Name, Mailing Address and Zip Code Douglas R. Henkle 2613 Belmont Pl Garden City, KS 67846-	Name of Employer Henkle Distributing & Supply	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period \$150.00
	Occupation Owner		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$350.00		
C. Full Name, Mailing Address and Zip Code Douglas R. Henkle 2613 Belmont Pl Garden City, KS 67846-	Name of Employer Henkle Distributing & Supply	Date (month, day, year) 06/23/2000	Amount of Each Receipt this Period \$100.00
	Occupation Owner		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$450.00		
D. Full Name, Mailing Address and Zip Code Patrick Herrick 15301 W 144th Terr Olathe, KS 66062-	Name of Employer	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period \$200.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$400.00		
E. Full Name, Mailing Address and Zip Code Justin Hill, Jr. 735 Broadview Dr Lawrence, KS 66044-	Name of Employer Lawrence Paper Co.	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period \$500.00
	Occupation Secretary/Treasurer		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
F. Full Name, Mailing Address and Zip Code J.B. Hodgdon 6231 Robinson Shawnee Mission, KS 66201-	Name of Employer Hodgdon Powder	Date (month, day, year) 06/13/2000	Amount of Each Receipt this Period \$500.00
	Occupation Chairman		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
G. Full Name, Mailing Address and Zip Code J.B. Hodgdon 6231 Robinson Shawnee Mission, KS 66201-	Name of Employer Hodgdon Powder	Date (month, day, year) 06/13/2000	Amount of Each Receipt this Period \$500.00
	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00		

SUBTOTAL of Receipts This Page (optional)	\$2050.00
TOTAL This Period (last page this line number only)	

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 George K. Johnson 2322 Inwood Cir Wichita, KS 67226- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer _____ Date (month, day, year) 05/12/2000	Amount of Each Receipt this Period \$100.00
	Occupation Physician	Aggregate Year-to-Date -> \$200.00
	B. Full Name, Mailing Address and Zip Code George K. Johnson 2322 Inwood Cir Wichita, KS 67226- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	
Name of Employer _____ Date (month, day, year) 06/05/2000	Amount of Each Receipt this Period \$50.00	
	Occupation Physician	Aggregate Year-to-Date -> \$250.00
	C. Full Name, Mailing Address and Zip Code Judith Johnson 8513 Bradshaw St Shawnee Mission, KS 66215-2827 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	
Name of Employer _____ Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period \$1000.00	
	Occupation Homemaker	Aggregate Year-to-Date -> \$1000.00
	D. Full Name, Mailing Address and Zip Code Art Kaaz PO Box 207 Leavenworth, KS 66048- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Employer Kaaz Holding Co. Date (month, day, year) 06/01/2000	Amount of Each Receipt this Period \$1000.00	
	Occupation President	Aggregate Year-to-Date -> \$1000.00
	E. Full Name, Mailing Address and Zip Code Thomas E. Kalin 10605 W 61st St Shawnee Mission, KS 66203- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	
Name of Employer _____ Date (month, day, year) 05/18/2000	Amount of Each Receipt this Period \$500.00	
	Occupation Retired	Aggregate Year-to-Date -> \$500.00
	F. Full Name, Mailing Address and Zip Code Thomas E. Kalin 10605 W 61st St Shawnee Mission, KS 66203- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	
Name of Employer _____ Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period \$500.00	
	Occupation Retired	Aggregate Year-to-Date -> \$1000.00
	G. Full Name, Mailing Address and Zip Code Dustin Keaton 6825 Bell Rd Shawnee Mission, KS 66217- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	
Name of Employer Century Roofing Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00	
	Occupation Sales Representative	Aggregate Year-to-Date -> \$1000.00

SUBTOTAL of Receipts This Page (optional)	\$4150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting 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)
Friends of Phill 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
Gerald F. Karr 815 S Crawford Fort Scott, KS 66701- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		05/06/2000	\$200.00
	Occupation Retired		
	Aggregate Year-to-Date ->		\$400.00
B. Full Name, Mailing Address and Zip Code David Kiersznowski 16031 Overbrook Ln Stilwell, KS 66085- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer DemdaCo	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00
	Occupation President		
	Aggregate Year-to-Date ->		\$1000.00
C. Full Name, Mailing Address and Zip Code David Kiersznowski 16031 Overbrook Ln Stilwell, KS 66085- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer DemdaCo	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00
	Occupation President		
	Aggregate Year-to-Date ->		\$2000.00
D. Full Name, Mailing Address and Zip Code James R. Kline, Jr. 6015 N Cosby Ct Kansas City, MO 64151- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Donnelly, Meiners, et al	Date (month, day, year) 06/29/2000	Amount of Each Receipt this Period \$500.00
	Occupation CPA		
	Aggregate Year-to-Date ->		\$500.00
E. Full Name, Mailing Address and Zip Code Robert H. Kobler 17819 157th Ter Bonner Springs, KS 66012- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 05/06/2000	Amount of Each Receipt this Period \$50.00
	Occupation Retired		
	Aggregate Year-to-Date ->		\$100.00
F. Full Name, Mailing Address and Zip Code Robert H. Kobler 17819 157th Ter Bonner Springs, KS 66012- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 05/31/2000	Amount of Each Receipt this Period \$50.00
	Occupation Retired		
	Aggregate Year-to-Date ->		\$150.00
G. Full Name, Mailing Address and Zip Code Robert H. Kobler 17819 157th Ter Bonner Springs, KS 66012- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period \$100.00
	Occupation Retired		
	Aggregate Year-to-Date ->		\$250.00

SUBTOTAL of Receipts This Page (optional)

\$2900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Friends of Phill 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
Stan Kresge 11356 Bly Hwy Perrinton, MI 48871-	Retired	05/20/2000	\$800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Marked	
	Aggregate Year-to-Date ->	\$800.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James R. Leininger 8122 Datapoint Dr, No 900 San Antonio, TX 78229-	KCI, Inc.	06/16/2000	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John F. Maddock 10820 Horton Shawnee Mission, KS 66211-	Martan	06/30/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christina L. Matulis 9408 Hardy Shawnee Mission, KS 66212-	Sprint	06/06/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$250.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arlene Mc Mahan 5525 Neosho Lane Shawnee Mission, KS 66205-		06/30/2000	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pat McAnany 15320 Midland Dr Shawnee Mission, KS 66217-	McAnany Construction	06/29/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$250.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy A. McAnany 15320 Midland Dr Shawnee Mission, KS 66217-		06/29/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$250.00	

SUBTOTAL of Receipts This Page (optional)

\$3800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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

<p>A. Full Name, Mailing Address and Zip Code Cathleen A. McDonnell 12900 Canterbury Shawnee Mission, KS 66209-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Homemaker</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 05/06/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Paul McKie 8235 Mall Shawnee Mission, KS 66208-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Rancher</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 05/05/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code William McPheeters 5 Brookside Dr Paola, KS 66071-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Retired</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 04/23/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Danny Moore 15501 W 90th St Shawnee Mission, KS 66219-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Partner</p> <p>Aggregate Year-to-Date -> \$600.00</p>	<p>Date (month, day, year) 05/12/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Danny Moore 15501 W 90th St Shawnee Mission, KS 66219-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Partner</p> <p>Aggregate Year-to-Date -> \$900.00</p>	<p>Date (month, day, year) 06/06/2000</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>F. Full Name, Mailing Address and Zip Code David D. Morris 6125 Melrose Ln Shawnee Mission, KS 66203-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 04/17/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code James Mullins PO Box 3861 Lawrence, KS 66046-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Owner</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 04/10/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>

SUBTOTAL of Receipts This Page (optional)	\$2400.00
TOTAL This Period (last page this line number only)	

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 Mary P. Nachbar 13872 W 58th Ter Shawnee Mission, KS 66216-5408 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer _____ Occupation Homemaker	Date (month, day, year) 06/29/2000	Amount of Each Receipt this Period \$1000.00
	Aggregate Year-to-Date -> \$1000.00		
B. Full Name, Mailing Address and Zip Code Mrs. C.H. Nason 245 W Terrace Trl Kansas City, KS 66106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer _____ Occupation _____	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period \$250.00
	Aggregate Year-to-Date -> \$250.00		
C. Full Name, Mailing Address and Zip Code Tim N. Neff 8433 Huntington Wichita, KS 67206- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Timber Products Occupation President	Date (month, day, year) 05/31/2000	Amount of Each Receipt this Period \$500.00
	Aggregate Year-to-Date -> \$500.00		
D. Full Name, Mailing Address and Zip Code Barbara H. Oakes 10501 Cherokee Ln Shawnee Mission, KS 66206- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer _____ Occupation Retired	Date (month, day, year) 06/14/2000	Amount of Each Receipt this Period \$400.00
	Aggregate Year-to-Date -> \$400.00		
E. Full Name, Mailing Address and Zip Code David L. Parrish 6500 W 95th St Shawnee Mission, KS 66212- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-employed Occupation Dentist	Date (month, day, year) 05/30/2000	Amount of Each Receipt this Period \$500.00
	Aggregate Year-to-Date -> \$500.00		
F. Full Name, Mailing Address and Zip Code Jon Pollock 12509 Blackfoot Dr Olathe, KS 66062- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer _____ Occupation Retired	Date (month, day, year) 06/13/2000	Amount of Each Receipt this Period \$250.00
	Aggregate Year-to-Date -> \$250.00		
G. Full Name, Mailing Address and Zip Code John R. Potter 2130 SW Fillmore St Topeka, KS 66611-1291 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of Kansas Occupation Chief of Staff (Speaker Pro Tem)	Date (month, day, year) 06/29/2000	Amount of Each Receipt this Period \$250.00
	Aggregate Year-to-Date -> \$250.00		

SUBTOTAL of Receipts This Page (optional)	\$3150.00
TOTAL This Period (last page this line number only)	

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 Louis C. Rasmussen 10111 Howe Dr Shawnee Mission, KS 66206- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/06/2000	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Kenneth Riedemann 12414 Linden Ln Shawnee Mission, KS 66209- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Peterson Companies Occupation President Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 06/29/2000	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code Randall K. Rogers 19507 Copper Oaks Dr Tyler, TX 75703- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-employed Occupation TV Tree Productions Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/20/2000	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through Madison Project 119 "C" Street, SE Washington, DC 20003 Receipt For: <input type="checkbox"/> Primary <input 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. Full Name, Mailing Address and Zip Code Waverly Rose 4400 W 109th, Ste 300 Shawnee Mission, KS 66207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer New England Financial Occupation Insurance agent Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/30/2000	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Philip L. Rotert 10231 Granada Ln Shawnee Mission, KS 66207- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$25.00	Date (month, day, year) 04/23/2000	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Philip L. Rotert 10231 Granada Ln Shawnee Mission, KS 66207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$1025.00	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)	\$2775.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information supplied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting 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)
 Friends of Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code Karen Rowe 6014 Summit Shawnee Mission, KS 66215-	Name of Employer Self-employed	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period \$300.00
	Occupation Nikken Distributor		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$300.00		
B. Full Name, Mailing Address and Zip Code Michael J. Sanders P.O. Box 15502 Shawnee Mission, KS 66285-	Name of Employer Carlisle Corp.	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period \$300.00
	Occupation Controller		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$300.00		
C. Full Name, Mailing Address and Zip Code Patrick W. Shelley 9523 W 116th Pl Shawnee Mission, KS 66210-	Name of Employer Teague Electric	Date (month, day, year) 06/20/2000	Amount of Each Receipt this Period \$500.00
	Occupation Executive		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
D. Full Name, Mailing Address and Zip Code Rick Shepard 8809 W 115th Terr Shawnee Mission, KS 66210-	Name of Employer Medimmune	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period \$250.00
	Occupation Pharmaceutical Sales		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
E. Full Name, Mailing Address and Zip Code Rick Shepard 8809 W 115th Terr Shawnee Mission, KS 66210-	Name of Employer Medimmune	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period \$750.00
	Occupation Pharmaceutical Sales		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00		
F. Full Name, Mailing Address and Zip Code Sheryl K. Shockey 10700 W 101st St Shawnee Mission, KS 66214-	Name of Employer	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Homemaker		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00		
G. Full Name, Mailing Address and Zip Code Charles E. Shockey III 10700 W 101st St Shawnee Mission, KS 66214-	Name of Employer Software & Engineering Cons.	Date (month, day, year) 05/12/2000	Amount of Each Receipt this Period \$400.00
	Occupation Executive		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$400.00		

SUBTOTAL of Receipts This Page (optional)	\$3500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information copied from such reports and statements may not be sold or used by any person for the purpose of soliciting 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)
Friends of Phill dba Kline for Congress

<p>A. Full Name, Mailing Address and Zip Code Charles E. Shockey III 10700 W 101st St Shawnee Mission, KS 66214-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Software & Engineering Cons. Occupation Executive</p> <p>Date (month, day, year) 06/16/2000</p> <p>Aggregate Year-to-Date -> \$900.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Paula H. Silvey 12412 Flint Shawnee Mission, KS 66213-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Date (month, day, year) 06/06/2000</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>C. Full Name, Mailing Address and Zip Code Paula H. Silvey 12412 Flint Shawnee Mission, KS 66213-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Postage</p> <p>Date (month, day, year) 06/30/2000</p> <p>Aggregate Year-to-Date -> \$596.57</p>	<p>Amount of Each Receipt this Period \$546.57</p> <p>IN-KIND</p>
<p>D. Full Name, Mailing Address and Zip Code Sherwood Songer 11679 Grant Shawnee Mission, KS 66210-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Retired</p> <p>Date (month, day, year) 04/12/2000</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>E. Full Name, Mailing Address and Zip Code Ernest J. Straub III 5034 Arapaho Shawnee Mission, KS 66226-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Straub Construction Occupation CEO</p> <p>Date (month, day, year) 06/19/2000</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Barbara B. Sutherland 4000 Main St Kansas City, MO 64111-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Homemaker</p> <p>Date (month, day, year) 06/30/2000</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code John W. Sutherland 4000 Main St. Kansas City, MO 64111-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Sutherland Lumber Occupation Executive</p> <p>Date (month, day, year) 06/30/2000</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>

SUBTOTAL of Receipts This Page (optional)

\$2896.57

TOTAL This Period (last page this line number only)

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 John W. Sutherland, Jr. PO Box 164 Andover, KS 67002-	Name of Employer Osage Door Co., Inc.	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period \$250.00
	Occupation Division Manager	Aggregate Year-to-Date -> \$250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)			
B. Full Name, Mailing Address and Zip Code Beverly Trimmell 525 S Kansas Liberal, KS 67901-	Name of Employer B & J Supply	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Accountant	Aggregate Year-to-Date -> \$1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)			
C. Full Name, Mailing Address and Zip Code J.M. Vess 1715 Laurel Cove Wichita, KS 67206-3322	Name of Employer Self-employed	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period \$500.00
	Occupation Oil Producer	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)			
D. Full Name, Mailing Address and Zip Code John Waters 6615 Goode Dr Shawnee Mission, KS 66216-	Name of Employer Goldbank	Date (month, day, year) 06/09/2000	Amount of Each Receipt this Period \$250.00
	Occupation Banker	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)			
E. Full Name, Mailing Address and Zip Code Barbara Watkins 3511 W 73rd St Shawnee Mission, KS 66208-	Name of Employer	Date (month, day, year) 06/13/2000	Amount of Each Receipt this Period \$500.00
	Occupation Retired	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)			
F. Full Name, Mailing Address and Zip Code Barbara Watkins 3511 W 73rd St Shawnee Mission, KS 66208-	Name of Employer	Date (month, day, year) 06/28/2000	Amount of Each Receipt this Period \$500.00
	Occupation Retired	Aggregate Year-to-Date -> \$1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)			
G. Full Name, Mailing Address and Zip Code Daniel J. Watkins 3511 W 73rd Shawnee Mission, KS 66208-	Name of Employer	Date (month, day, year) 05/18/2000	Amount of Each Receipt this Period \$500.00
	Occupation Retired	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)			

SUBTOTAL of Receipts This Page (optional)	\$3500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

<p>A. Full Name, Mailing Address and Zip Code John Watkins 3606 Yale Road Lawrence, KS 66049-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lawrence Cable TV Devel</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 05/26/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Melissa Watkins 3606 Yale Road Lawrence, KS 66049-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 05/26/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)	\$1500.00
TOTAL This Period (last page this line number only)	\$57307.70

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 CAT PAC 400 Capitol Mall, Ste 1560 Sacramento, CA 95814- 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) 06/30/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$2000.00 \$2000.00
B. Full Name, Mailing Address and Zip Code Kansans for Life - Federal PAC 10976 W 74th Ter Shawnee Mission, KS 66203- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$4500.00 \$4500.00
C. Full Name, Mailing Address and Zip Code Kenney for Lt. Governor PO Box 291 Lees Summit, MO 64063- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/15/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 \$1000.00
D. Full Name, Mailing Address and Zip Code Kenney for Lt. Governor PO Box 291 Lees Summit, MO 64063- 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) 06/15/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 \$2000.00
E. Full Name, Mailing Address and Zip Code Snowbarger for Congress PO Box 3001 Olathe, KS 66063- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 \$1000.00
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$9500.00
TOTAL This Period (last page this line number only)	\$9500.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for electoral 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 Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code Sprint PCS PO Box 219718 Kansas City, MO 64121-9718	Name of Employer PHONE CHARGE REFUND	Date (month, day, year) 05/15/2000	Amount of Each Receipt this Period \$271.38
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$271.38		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$271.38
TOTAL This Period (last page this line number only)	\$271.38

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 First National Bank of Olathe 444 E Santa Fe Olathe, KS 66061-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	04/28/2000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$113.16
		\$428.32	
B. Full Name, Mailing Address and Zip Code First National Bank of Olathe 444 E Santa Fe Olathe, KS 66061-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/31/2000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$126.92
		\$555.24	
C. Full Name, Mailing Address and Zip Code First National Bank of Olathe 444 E Santa Fe Olathe, KS 66061-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/2000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$139.98
		\$695.22	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$380.06
TOTAL This Period (last page this line number only)	\$380.06

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting 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)
Friends of Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
James & Janet Barnett 816 Ann Ave Kansas City, KS 66101-	Office rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/13/2000	\$250.00
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	\$502.19
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/2000	\$502.19
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Event supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/2000	\$66.80
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/2000	\$502.19
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/2000	\$502.19
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Transcripts Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/2000	\$14.00

SUBTOTAL of Disbursements This Page (optional)	\$2339.56
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/15/2000	\$502.19
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/15/2000	\$502.19
Chad Bettis 11114 W 69th Ter Shawnee Mission, KS 66203-	Office expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/10/2000	\$19.73
Birch Telecom PO Box 219942 Kansas City, MO 64121-	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/26/2000	\$452.10
Birch Telecom PO Box 219942 Kansas City, MO 64121-	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	\$463.99
Birch Telecom PO Box 219942 Kansas City, MO 64121-	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/01/2000	\$1634.19
William L. Casassa 120 Terrace Trl S Kansas City, KS 66106-	Site rental, food and printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/22/2000	\$157.13 IN KIND

SUBTOTAL of Disbursements This Page (optional)	\$3731.52
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Conquest Communications	Polling services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/2000	\$250.00
Brad Dawdy	Computer software Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/11/2000	\$130.00 IN KIND
Election Store.com 103 Ardsley Run Canton, GA 30115-	Campaign supplies/advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/14/2000	\$223.74
Election Store.com 103 Ardsley Run Canton, GA 30115-	Advertising supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/07/2000	\$12.50
Rodger N. Elkins 39390W 295th St Paola, KS 66071-	Office supplies/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/19/2000	\$1285.34
Rodger N. Elkins 39390W 295th St Paola, KS 66071-	Office supplies/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/18/2000	\$323.14
Rodger N. Elkins 39390W 295th St Paola, KS 66071-	Office supplies/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/26/2000	\$2006.76

SUBTOTAL of Disbursements This Page (optional)	\$4231.48
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First National Bank of Olathe 444 E Santa Fe Olathe, KS 66061-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/15/2000	\$2175.42
First National Bank of Olathe 444 E Santa Fe Olathe, KS 66061-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/17/2000	\$776.84
First National Bank of Olathe 444 E Santa Fe Olathe, KS 66061-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/15/2000	\$1450.28
First National Bank of Olathe 444 E Santa Fe Olathe, KS 66061-	Office expense and postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/03/2000	\$180.00
Fun Services 12119 Johnson Dr Shawnee Mission, KS 66216-	Event supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/19/2000	\$136.68
Fun Services 12119 Johnson Dr Shawnee Mission, KS 66216-	Event supplies, paper goods Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/2000	\$103.65
Jeff Glendening 3109 SW Twilight Ct #201 Topeka, KS 66614-	Potty cash-office expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/13/2000	\$146.34

SUBTOTAL of Disbursements This Page (optional)	\$4969.21
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeff Glendening 3109 SW Twilight Ct #201 Topeka, KS 66614-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/13/2000	\$1783.00
Jeffrey K. Hinds 12220 S Strangline Ct Olathe, KS 66062-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	\$171.50
Jeffrey K. Hinds 12220 S Strangline Ct Olathe, KS 66062-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/15/2000	\$171.58
Jeffrey K. Hinds 12220 S Strangline Ct Olathe, KS 66062-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/2000	\$171.50
Jeffrey K. Hinds 12220 S Strangline Ct Olathe, KS 66062-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	\$171.50
Jeffrey K. Hinds 12220 S Strangline Ct Olathe, KS 66062-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/28/2000	\$171.50
Jeffrey K. Hinds 12220 S Strangline Ct Olathe, KS 66062-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/2000	\$171.50

SUBTOTAL of Disbursements This Page (optional)	\$2812.08
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/18/2000	\$298.22
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	\$298.22
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Postage reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/27/2000	\$1852.00
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/2000	\$298.22
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Petty Cash-Office expense/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/09/2000	\$119.76
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	\$298.22
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/2000	\$298.22

SUBTOTAL of Disbursements This Page (optional)	\$3462.86
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Petty cash-office/postage expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/27/2000	\$190.00
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/27/2000	\$7.68
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Petty cash-office expense/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/18/2000	\$192.38
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Petty cash-Office supplies/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/2000	\$198.00
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Petty cash - office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/22/2000	\$133.90
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Petty Cash-Office expense /postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/2000	\$140.15
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/2000	\$298.22

SUBTOTAL of Disbursements This Page (optional)	\$1160.33
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Office expense reimb. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/2000	\$19.50
Corrie A. Kangas 21800 Dempsey Rd Leavenworth, KS 66048-	Petty cash-Office expenses/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	\$162.09
Kansas Department of Revenue 915 SW Harrison St Topeka, KS 66612-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/25/2000	\$294.52
Kansas Employment Security Fund P.O. Box 400 Topeka, KS 66612-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/25/2000	\$266.52
Kansas Sec of State State Capitol Building Topeka, KS 66612-1594	Filing fee-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	\$1367.00
John Kerr 815 S Crawford Fort Scott, KS 66701-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/2000	\$1425.00
John Kerr 815 S Crawford Fort Scott, KS 66701-	Telephone/meals/office Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/23/2000	\$588.66

SUBTOTAL of Disbursements This Page (optional)	\$4123.29
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use appropriate schedule(s) for each category of the detailed Summary Page

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Kerr 815 S Crawford Fort Scott, KS 66701-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/2000	\$1425.00
John Kerr 815 S Crawford Fort Scott, KS 66701-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	\$1425.00
John Kerr 815 S Crawford Fort Scott, KS 66701-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	\$1425.00
John Kerr 815 S Crawford Fort Scott, KS 66701-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/2000	\$1425.00
John Kerr 815 S Crawford Fort Scott, KS 66701-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/15/2000	\$1425.00
Janet Kline 5921 Mastin Shawnee Mission, KS 66203-	Office rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/14/2000	\$600.00
Janet Kline 5921 Mastin Shawnee Mission, KS 66203-	Office rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/2000	\$300.00

SUBTOTAL of Disbursements This Page (optional)	\$8025.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Phill Kline 10624 W 61st St Shawnee Mission, KS 66203-	Event fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/07/2000	\$12.00
Nationwide Printing 122 North Cherry Olathe, KS 66061-	Printing services/supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/29/2000	\$3273.33
Nationwide Printing 122 North Cherry Olathe, KS 66061-	Printing services/supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/07/2000	\$1101.88
Office Depot 11225 W 64th St Shawnee Mission, KS 66203-	Office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/2000	\$98.81
Office Depot 11225 W 64th St Shawnee Mission, KS 66203-	Office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/2000	\$185.70
Office Max 5830 Antioch Rd Shawnee Mission, KS 66202-	Office expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/2000	\$98.28
Office Max 5830 Antioch Rd Shawnee Mission, KS 66202-	Office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	\$57.70

SUBTOTAL of Disbursements This Page (optional)	\$4827.70
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code Office Max 5830 Antioch Rd Shawnee Mission, KS 66202-	Purpose of Disbursement Office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/09/2000	Amount of Each Disbursement This Period \$211.58
B. Full Name, Mailing Address and Zip Code Old Shawnee Days Shawnee Mission, KS 66216-	Purpose of Disbursement Event fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/07/2000	Amount of Each Disbursement This Period \$250.00
C. Full Name, Mailing Address and Zip Code Praxair Distribution, Inc. 15555 S Keeler Olathe, KS 66062-	Purpose of Disbursement Event supplies/helium tanks Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/02/2000	Amount of Each Disbursement This Period \$300.00
D. Full Name, Mailing Address and Zip Code Praxair Distribution, Inc. 15555 S Keeler Olathe, KS 66062-	Purpose of Disbursement Event supplies/helium Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/02/2000	Amount of Each Disbursement This Period \$105.00
E. Full Name, Mailing Address and Zip Code RCR-Net 14904 W 87th Pkwy Shawnee Mission, KS 66215-	Purpose of Disbursement Printer expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/29/2000	Amount of Each Disbursement This Period \$138.58
F. Full Name, Mailing Address and Zip Code RCR-Net 14904 W 87th Pkwy Shawnee Mission, KS 66215-	Purpose of Disbursement Printer/computer expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/07/2000	Amount of Each Disbursement This Period \$138.88
G. Full Name, Mailing Address and Zip Code Paula H. Silvey 12412 Flint Shawnee Mission, KS 66213-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/30/2000	Amount of Each Disbursement This Period \$546.57 IN KIND

SUBTOTAL of Disbursements This Page (optional)	\$1690.61
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Southwestern Bell Telephone PO 1780 Houston, TX 77251-	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/28/2000	\$290.09
Southwestern Bell Telephone PO 1780 Houston, TX 77251-	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/2000	\$575.63
Sprint PCS PO Box 219718 Kansas City, MO 64121-9718	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/22/2000	\$972.50
Sprint PCS PO Box 219718 Kansas City, MO 64121-9718	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/14/2000	\$279.36
Sprint PCS PO Box 219718 Kansas City, MO 64121-9718	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/2000	\$594.15
The Source PO Box 2034 Topeka, KS 66601-2034	Mailing services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/2000	\$843.99
The Strategy Group 65 E State St, Ste 1000 Columbus, OH 43215-	Radio advertising/production Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/2000	\$11257.00

SUBTOTAL of Disbursements This Page (optional)	\$14812.72
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Truth on Tape PO Box 2929 Olathe, KS 66063-	Tape production Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/07/2000	\$139.54
B. Full Name, Mailing Address and Zip Code U. S. Postmaster Shawnee Branch Shawnee Mission, KS 66203-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period \$100.00
C. Full Name, Mailing Address and Zip Code U. S. Postmaster Shawnee Branch Shawnee Mission, KS 66203-	Purpose of Disbursement Business reply fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/16/2000	Amount of Each Disbursement This Period \$75.00
D. Full Name, Mailing Address and Zip Code U. S. Postmaster Shawnee Branch Shawnee Mission, KS 66203-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/27/2000	Amount of Each Disbursement This Period \$135.78
E. Full Name, Mailing Address and Zip Code U. S. Postmaster Shawnee Branch Shawnee Mission, KS 66203-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/12/2000	Amount of Each Disbursement This Period \$365.42
F. Full Name, Mailing Address and Zip Code U. S. Postmaster Shawnee Branch Shawnee Mission, KS 66203-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/16/2000	Amount of Each Disbursement This Period \$330.00
G. Full Name, Mailing Address and Zip Code U. S. Postmaster Shawnee Branch Shawnee Mission, KS 66203-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/15/2000	Amount of Each Disbursement This Period \$190.12

SUBTOTAL of Disbursements This Page (optional)	\$1335.96
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster Shawnee Branch Shawnee Mission, KS 66203-	Postage stamps Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/2000	\$99.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$99.00
TOTAL This Period (last page this line number only)	\$57621.32

SCHEDULE D
(Revised 3/80)DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)	Outstanding Balance Beginning This Period	AMOUNT Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Friends of Phill dba Kline for Congress				
Full Name, Mailing Address and Zip Code Nationwide Printing 122 North Cherry Olathe, KS 66061-		\$2389.29		\$2389.29
Nature of Debt (Purpose) Printing services				
Full Name, Mailing Address and Zip Code The Strategy Group 65 E State St, Ste 1000 Columbus, OH 43215-		\$13500.00		\$13500.00
Nature of Debt (Purpose) Video Production-Advertising				
Full Name, Mailing Address and Zip Code Arena Communications 515 South 700 East, Ste 2C Salt Lake City, UT 84102-		\$9963.75		\$9963.75
Nature of Debt (Purpose) Design, Layout and Printing				
Full Name, Mailing Address and Zip Code Ladicom 11316 W 80th St Shawnee Mission, KS 66214-		\$1103.84		\$1103.84
Nature of Debt (Purpose) Copier rental & supplies				

1) SUBTOTAL This Period (This Page optional)	
2) TOTAL This Period (Last page this line number only)	\$26956.88
3) TOTAL OUTSTANDING LOANS from Schedule C (Last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Worksheet Page only	\$26956.88

