

SCHEDULE A

ITEMIZED RECEIPTS

Any information reported 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 Rob McTealf 8348 Oakview Cir Shawnee Mission, KS 66215-5382 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation CPA Aggregate Year-to-Date -> \$740.00	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Jan Meyers 8408 W 90th Shawnee Mission, KS 66212- 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 -> \$750.00	Date (month, day, year) 10/19/2000	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code William C. Miller 7800 Hemlock Shawnee Mission, KS 66204- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer W R Miller Equipment Co. Occupation Executive Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code Susan Molinari 4004 Sharp Pl Alexandria, VA 22304- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fleischman & Hilliard Occupation Consultant Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period \$125.00
E. Full Name, Mailing Address and Zip Code James E. Monahan PO Box 22517 Kansas City, MO 64113- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Monahan & Associates Occupation Owner Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and Zip Code Michael Moore 5309 Round Prairie Shawnee Mission, KS 66226-3710 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Joe C. Morris 12448 Granada Shawnee Mission, KS 66209- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer First Bank of Kansas Occupation Executive Aggregate Year-to-Date -> \$550.00	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)	\$1250.00
TOTAL This Period (last page this line number only)	