

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**

Delaware North

ADDRESS (number and street) 250 Delaware Ave

Check if different than previously reported. (ACC) Buffalo NY 14202

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00532887 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on [MM] / [DD] / [YYYY] in the State of []

(d) 30-Day **POST-Election** Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 10 / 01 / 2023 through [MM] / [DD] / [YYYY] 12 / 31 / 2023

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 McNeill, John, H.,

Signature of Treasurer McNeill, John, H., Date [MM] / [DD] / [YYYY] 01 / 11 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Delaware North

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		<input type="text" value="336384.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="402751.68"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="21913.43"/>	<input type="text" value="108635.53"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="424665.11"/>	<input type="text" value="445020.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6400.00"/>	<input type="text" value="26755.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="418265.11"/>	<input type="text" value="418265.11"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Delaware North

Report Covering the Period: From: MM / DD / YYYY 10 / 01 / 2023 To: MM / DD / YYYY 12 / 31 / 2023

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).....	20913.43	107435.53
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii).....▶	20913.43	107635.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs).....	1000.00	1000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	21913.43	108635.53
▶		
12. Transfers From Affiliated/Other		
Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5).....	0.00	0.00
▶		
16. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees.....	0.00	0.00
17. Other Federal Receipts		
(Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
▶		
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	21913.43	108635.53
▶		
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)	21913.43	108635.53
▶		

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	105.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	105.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5400.00	20500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1000.00	6150.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6400.00	26755.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6400.00	26755.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	21913.43	108635.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21913.43	108635.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	105.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	105.40

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 6 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Anderson, Darius, , ,

Mailing Address 1215 K St
Ste 1150

City Sacramento	State CA	Zip Code 95814-3955
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Platinum Advisors	Occupation (for Individual) lobbyist
--	---

Receipt For: 2024
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2023

Transaction ID : 7589878

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Axt, Renee, , ,

Mailing Address 407 E Fort St

City Detroit	State MI	Zip Code 48226-2940
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RCP Associates, LLC	Occupation (for Individual) consultant
--	---

Receipt For: 2024
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2023

Transaction ID : 7630787

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Baker, Mark, , ,

Mailing Address PO Box 6383

City Helena	State MT	Zip Code 59604-6383
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ABS Legal	Occupation (for Individual) consultant
--	---

Receipt For: 2024
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2023

Transaction ID : 7630714

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Blandford Group LLC

Mailing Address 5716 N Kings Hwy

City Alexandria	State VA	Zip Code 22303-1414
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For: 2024
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2023

Transaction ID : 7662587

Amount of Each Receipt this Period
1000.00

Memo Item

Please note this is a sole proprietorship.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Carruthers, Michael, , ,

Mailing Address 1105 Delta Ln

City Covington	State LA	Zip Code 70433-7267
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP - Gaming Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2023

Transaction ID : 7528447

Amount of Each Receipt this Period
76.92

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Carruthers, Michael, , ,

Mailing Address 1105 Delta Ln

City Covington	State LA	Zip Code 70433-7267
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP - Gaming Operations
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
692.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2023

Transaction ID : 7545428

Amount of Each Receipt this Period
76.92

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1153.84
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 35
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Carruthers, Michael, , ,

Mailing Address 1105 Delta Ln

City Covington	State LA	Zip Code 70433-7267
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP - Gaming Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
769.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2023

Transaction ID : 7564287

Amount of Each Receipt this Period
76.92

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Carruthers, Michael, , ,

Mailing Address 1105 Delta Ln

City Covington	State LA	Zip Code 70433-7267
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP - Gaming Operations
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
846.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2023

Transaction ID : 7630934

Amount of Each Receipt this Period
76.92

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Carruthers, Michael, , ,

Mailing Address 1105 Delta Ln

City Covington	State LA	Zip Code 70433-7267
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP - Gaming Operations
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
923.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2023

Transaction ID : 7630993

Amount of Each Receipt this Period
76.92

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	230.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Delaware North

A. Carruthers, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1105 Delta Ln
 City Covington State LA Zip Code 70433-7267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) VP - Gaming Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2023
Transaction ID : 7630976
 Amount of Each Receipt this Period 76.92
 Memo Item

B. Crisafulli, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 the Capitol Rm 420
 City Tallahassee State FL Zip Code 32399-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) State Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2023
Transaction ID : 7589879
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Feeney, Christopher, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9734 Cobblestone Dr
 City Clarence State NY Zip Code 14031-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Vice President & Chief Financial Offic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1538.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023
Transaction ID : 7528448
 Amount of Each Receipt this Period 192.31
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1269.23
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Delaware North

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Feeney, Christopher, J, ,

Mailing Address 9734 Cobblestone Dr

City Clarence	State NY	Zip Code 14031-2443
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Vice President & Chief Financial Officer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1730.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2023

Transaction ID : 7545429

Amount of Each Receipt this Period
192.31

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Feeney, Christopher, J, ,

Mailing Address 9734 Cobblestone Dr

City Clarence	State NY	Zip Code 14031-2443
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Vice President & Chief Financial Officer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1923.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2023

Transaction ID : 7564290

Amount of Each Receipt this Period
192.31

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Feeney, Christopher, J, ,

Mailing Address 9734 Cobblestone Dr

City Clarence	State NY	Zip Code 14031-2443
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Vice President & Chief Financial Officer
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2115.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2023

Transaction ID : 7630938

Amount of Each Receipt this Period
192.31

Memo Item

SUBTOTAL of Receipts This Page (optional).....	576.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Delaware North

A. Feeney, Christopher, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9734 Cobblestone Dr
 City Clarence State NY Zip Code 14031-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Vice President & Chief Financial Office
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2307.72

Date of Receipt 12 / 15 / 2023
Transaction ID : 7630995
 Amount of Each Receipt this Period 192.31
 Memo Item

B. Feeney, Christopher, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9734 Cobblestone Dr
 City Clarence State NY Zip Code 14031-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Vice President & Chief Financial Office
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 31 / 2023
Transaction ID : 7630980
 Amount of Each Receipt this Period 192.28
 Memo Item

C. Frankhouser, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Briarhill Rd
 City Williamsville State NY Zip Code 14221-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) COO - Gaming
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 10 / 15 / 2023
Transaction ID : 7528449
 Amount of Each Receipt this Period 76.92
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	461.51
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Delaware North

A. Frankhouser, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Briarhill Rd
 City Williamsville State NY Zip Code 14221-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) COO - Gaming
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.28

Date of Receipt **10 / 31 / 2023**
Transaction ID : 7545431
 Amount of Each Receipt this Period 76.92
 Memo Item

B. Frankhouser, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Briarhill Rd
 City Williamsville State NY Zip Code 14221-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) COO - Gaming
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.20

Date of Receipt **11 / 15 / 2023**
Transaction ID : 7564285
 Amount of Each Receipt this Period 76.92
 Memo Item

C. Frankhouser, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Briarhill Rd
 City Williamsville State NY Zip Code 14221-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) COO - Gaming
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt **11 / 30 / 2023**
Transaction ID : 7630932
 Amount of Each Receipt this Period 76.92
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.76
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

A. Frankhouser, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Briarhill Rd
 City Williamsville State NY Zip Code 14221-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) COO - Gaming
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 923.04

Date of Receipt **12 / 15 / 2023**
Transaction ID : 7630991
 Amount of Each Receipt this Period 76.92
 Memo Item

B. Frankhouser, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Briarhill Rd
 City Williamsville State NY Zip Code 14221-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) COO - Gaming
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.96

Date of Receipt **12 / 31 / 2023**
Transaction ID : 7630975
 Amount of Each Receipt this Period 76.92
 Memo Item

C. Friedman, Bernard, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5619 Brookfield Cir E
 City Fort Lauderdale State FL Zip Code 33312-6256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Becker Lawyers Occupation (for Individual) consultant
 Receipt For: 2024 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 23 / 2023**
Transaction ID : 7630798
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1153.84
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 14 OF 35	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Delaware North

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harrington, Stephen, , ,

Mailing Address 9 Mourning Dove Ct

City Orchard Park	State NY	Zip Code 14127-3000
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Chief Procurement Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023

Transaction ID : 7528452

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harrington, Stephen, , ,

Mailing Address 9 Mourning Dove Ct

City Orchard Park	State NY	Zip Code 14127-3000
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Chief Procurement Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2023

Transaction ID : 7545432

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harrington, Stephen, , ,

Mailing Address 9 Mourning Dove Ct

City Orchard Park	State NY	Zip Code 14127-3000
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Chief Procurement Officer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2023

Transaction ID : 7564296

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Harrington, Stephen, , ,

Mailing Address **9 Mourning Dove Ct**

City Orchard Park	State NY	Zip Code 14127-3000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Chief Procurement Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
11 / 30 / 2023

Transaction ID : 7630963

Amount of Each Receipt this Period
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Harrington, Stephen, , ,

Mailing Address **9 Mourning Dove Ct**

City Orchard Park	State NY	Zip Code 14127-3000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Chief Procurement Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
12 / 15 / 2023

Transaction ID : 7631000

Amount of Each Receipt this Period
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Harrington, Stephen, , ,

Mailing Address **9 Mourning Dove Ct**

City Orchard Park	State NY	Zip Code 14127-3000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Chief Procurement Officer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
12 / 31 / 2023

Transaction ID : 7630983

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

A. Hawkins, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 E Church St
 City Morrilton State AR Zip Code 72110-3419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DBH Management Consultants, LLC Occupation (for Individual) consultant
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2023
Transaction ID : 7630743
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Latimer, Amy, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 High St
 City Topsfield State MA Zip Code 01983-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023
Transaction ID : 7528453
 Amount of Each Receipt this Period
 384.62
 Memo Item

C. Latimer, Amy, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 High St
 City Topsfield State MA Zip Code 01983-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) President
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 3461.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2023
Transaction ID : 7545433
 Amount of Each Receipt this Period
 384.62
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	769.24
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Latimer, Amy, A, ,		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2023 Transaction ID : 7564297
Mailing Address 14 High St		Amount of Each Receipt this Period 384.62
City Topsfield	State MA	Zip Code 01983-1404
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Delaware North	Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3846.20	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Latimer, Amy, A, ,		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2023 Transaction ID : 7630965
Mailing Address 14 High St		Amount of Each Receipt this Period 384.62
City Topsfield	State MA	Zip Code 01983-1404
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Delaware North	Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Latimer, Amy, A, ,		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2023 Transaction ID : 7631001
Mailing Address 14 High St		Amount of Each Receipt this Period 384.62
City Topsfield	State MA	Zip Code 01983-1404
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Delaware North	Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4615.44	

SUBTOTAL of Receipts This Page (optional).....▶	1153.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

A. Latimer, Amy, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 High St
 City Topsfield State MA Zip Code 01983-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2023
Transaction ID : 7630984
 Amount of Each Receipt this Period
 384.56
 Memo Item

B. McCabe, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 Morris Ave
 City Buffalo State NY Zip Code 14214-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) VP, Chief Compliance Office
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023
Transaction ID : 7531060
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. McCabe, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 Morris Ave
 City Buffalo State NY Zip Code 14214-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) VP, Chief Compliance Office
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2023
Transaction ID : 7545434
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	484.56
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 35
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. McCabe, Michael, , ,

Mailing Address **81 Morris Ave**

City Buffalo	State NY	Zip Code 14214-1607
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP, Chief Compliance Office
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2023

Transaction ID : 7564282

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McCabe, Michael, , ,

Mailing Address **81 Morris Ave**

City Buffalo	State NY	Zip Code 14214-1607
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP, Chief Compliance Office
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2023

Transaction ID : 7630928

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. McCabe, Michael, , ,

Mailing Address **81 Morris Ave**

City Buffalo	State NY	Zip Code 14214-1607
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) VP, Chief Compliance Office
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2023

Transaction ID : 7630988

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. McCabe, Michael, , ,

Mailing Address **81 Morris Ave**

City **Buffalo** State **NY** Zip Code **14214-1607**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **Delaware North** Occupation (for Individual) **VP, Chief Compliance Office**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **12 / 31 / 2023**

Transaction ID : 7630972

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McCormack, Michael, , ,

Mailing Address **100 Cambridge St Ste 1400**

City **Boston** State **MA** Zip Code **02114-2545**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MJM Consulting** Occupation (for Individual) **consultant**

Receipt For: 2024 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **12 / 15 / 2023**

Transaction ID : 7630697

Amount of Each Receipt this Period **1000.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. McEvoy, Timothy, G., ,

Mailing Address **190 Depew Ave**

City **Buffalo** State **NY** Zip Code **14214-1620**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **Delaware North** Occupation (for Individual) **Deputy General Counsel**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ **1363.62**

Date of Receipt **10 / 15 / 2023**

Transaction ID : 7528456

Amount of Each Receipt this Period **227.27**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **277.27**

TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

A. McEvoy, Timothy, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Depew Ave
 City Buffalo State NY Zip Code 14214-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1590.89

Date of Receipt 10 / 31 / 2023
Transaction ID : 7545435
 Amount of Each Receipt this Period 227.27
 Memo Item

B. McEvoy, Timothy, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Depew Ave
 City Buffalo State NY Zip Code 14214-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1818.16

Date of Receipt 11 / 15 / 2023
Transaction ID : 7564294
 Amount of Each Receipt this Period 227.27
 Memo Item

C. McEvoy, Timothy, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Depew Ave
 City Buffalo State NY Zip Code 14214-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Deputy General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2045.43

Date of Receipt 11 / 30 / 2023
Transaction ID : 7630961
 Amount of Each Receipt this Period 227.27
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	681.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Delaware North

A. McEvoy, Timothy, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Depew Ave
 City Buffalo State NY Zip Code 14214-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2272.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2023
Transaction ID : 7630999
 Amount of Each Receipt this Period
 227.27
 Memo Item

B. McEvoy, Timothy, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Depew Ave
 City Buffalo State NY Zip Code 14214-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2023
Transaction ID : 7630982
 Amount of Each Receipt this Period
 227.27
 Memo Item

C. McNeill III, John Henderson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Sandpiper Ct
 City Orchard Park State NY Zip Code 14127-3076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) SVP of Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3076.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023
Transaction ID : 7528457
 Amount of Each Receipt this Period
 384.62
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	839.16
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McNeill III, John Henderson, , ,

Mailing Address 5 Sandpiper Ct

City Orchard Park	State NY	Zip Code 14127-3076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) SVP of Government Affairs
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3461.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2023

Transaction ID : 7545436

Amount of Each Receipt this Period
384.62

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McNeill III, John Henderson, , ,

Mailing Address 5 Sandpiper Ct

City Orchard Park	State NY	Zip Code 14127-3076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) SVP of Government Affairs
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3846.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2023

Transaction ID : 7564302

Amount of Each Receipt this Period
384.62

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McNeill III, John Henderson, , ,

Mailing Address 5 Sandpiper Ct

City Orchard Park	State NY	Zip Code 14127-3076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) SVP of Government Affairs
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4230.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2023

Transaction ID : 7630968

Amount of Each Receipt this Period
384.62

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1153.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. McNeill III, John Henderson, , ,

Mailing Address 5 Sandpiper Ct

City Orchard Park	State NY	Zip Code 14127-3076
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) SVP of Government Affairs
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4615.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2023

Transaction ID : 7631003

Amount of Each Receipt this Period
384.62

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McNeill III, John Henderson, , ,

Mailing Address 5 Sandpiper Ct

City Orchard Park	State NY	Zip Code 14127-3076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) SVP of Government Affairs
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2023

Transaction ID : 7630987

Amount of Each Receipt this Period
384.56

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Merry, Todd, , ,

Mailing Address 180 Curley Dr

City Orchard Park	State NY	Zip Code 14127-3447
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Vice President & Chief Marketing Offic
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3076.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023

Transaction ID : 7528459

Amount of Each Receipt this Period
384.62

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1153.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Merry, Todd, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023 Transaction ID : 7545437
Mailing Address 180 Curley Dr		Amount of Each Receipt this Period 384.62
City Orchard Park	State NY	Zip Code 14127-3447
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Delaware North	Occupation (for Individual) Vice President & Chief Marketing Office	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3461.58	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Merry, Todd, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2023 Transaction ID : 7564300
Mailing Address 180 Curley Dr		Amount of Each Receipt this Period 384.62
City Orchard Park	State NY	Zip Code 14127-3447
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Delaware North	Occupation (for Individual) Vice President & Chief Marketing Office	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3846.20	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Merry, Todd, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2023 Transaction ID : 7630966
Mailing Address 180 Curley Dr		Amount of Each Receipt this Period 384.62
City Orchard Park	State NY	Zip Code 14127-3447
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Delaware North	Occupation (for Individual) Vice President & Chief Marketing Office	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4230.82	

SUBTOTAL of Receipts This Page (optional).....▶	1153.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Delaware North

A. Merry, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 Curley Dr
 City Orchard Park State NY Zip Code 14127-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Vice President & Chief Marketing Office
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4615.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2023
Transaction ID : 7631002
 Amount of Each Receipt this Period
 384.62
 Memo Item

B. Merry, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 Curley Dr
 City Orchard Park State NY Zip Code 14127-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Vice President & Chief Marketing Office
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2023
Transaction ID : 7630985
 Amount of Each Receipt this Period
 384.56
 Memo Item

C. Miles, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Meadowlark Dr
 City Fairport State NY Zip Code 14450-2823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) General Manager - Hamburg Gaming
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 642.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023
Transaction ID : 7528461
 Amount of Each Receipt this Period
 71.43
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	840.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Miles, Michael, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023
Mailing Address 15 Meadowlark Dr		Transaction ID : 7545438
City Fairport	State NY	Zip Code 14450-2823
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 71.43
Name of Employer (for Individual) Delaware North	Occupation (for Individual) General Manager - Hamburg Gaming	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 714.30	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Miles, Michael, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2023
Mailing Address 15 Meadowlark Dr		Transaction ID : 7564284
City Fairport	State NY	Zip Code 14450-2823
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 71.43
Name of Employer (for Individual) Delaware North	Occupation (for Individual) General Manager - Hamburg Gaming	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 785.73	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Miles, Michael, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2023
Mailing Address 15 Meadowlark Dr		Transaction ID : 7630930
City Fairport	State NY	Zip Code 14450-2823
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 71.43
Name of Employer (for Individual) Delaware North	Occupation (for Individual) General Manager - Hamburg Gaming	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 857.16	

SUBTOTAL of Receipts This Page (optional).....▶	214.29
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Miles, Michael, , ,

Mailing Address 15 Meadowlark Dr

City Fairport	State NY	Zip Code 14450-2823
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) General Manager - Hamburg Gaming
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
928.59

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2023

Transaction ID : 7630989

Amount of Each Receipt this Period
71.43

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Miles, Michael, , ,

Mailing Address 15 Meadowlark Dr

City Fairport	State NY	Zip Code 14450-2823
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) General Manager - Hamburg Gaming
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2023

Transaction ID : 7630974

Amount of Each Receipt this Period
71.41

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Riegle, Christian, M., ,

Mailing Address 688 Brownsville Rd

City Victor	State NY	Zip Code 14564-9340
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Information Requested
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1607.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2023

Transaction ID : 7528464

Amount of Each Receipt this Period
178.57

Memo Item

SUBTOTAL of Receipts This Page (optional).....	321.41
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Delaware North

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Riegler, Christian, M., ,

Mailing Address 688 Brownsville Rd

City Victor	State NY	Zip Code 14564-9340
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Information Requested
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1785.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2023

Transaction ID : 7545439

Amount of Each Receipt this Period
178.57

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Riegler, Christian, M., ,

Mailing Address 688 Brownsville Rd

City Victor	State NY	Zip Code 14564-9340
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Information Requested
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1964.27

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2023

Transaction ID : 7564288

Amount of Each Receipt this Period
178.57

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Riegler, Christian, M., ,

Mailing Address 688 Brownsville Rd

City Victor	State NY	Zip Code 14564-9340
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) Information Requested
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2142.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2023

Transaction ID : 7630935

Amount of Each Receipt this Period
178.57

Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

A. Riegler, Christian, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 688 Brownsville Rd
 City Victor State NY Zip Code 14564-9340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2321.41

Date of Receipt 12 / 15 / 2023
Transaction ID : 7630994
 Amount of Each Receipt this Period 178.57
 Memo Item

B. Riegler, Christian, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 688 Brownsville Rd
 City Victor State NY Zip Code 14564-9340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Delaware North Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.98

Date of Receipt 12 / 31 / 2023
Transaction ID : 7630977
 Amount of Each Receipt this Period 178.57
 Memo Item

C. Rosenthal, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5318 32nd St N
 City Arlington State VA Zip Code 22207-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spirt Rock LLC Occupation (for Individual) Consultant
 Receipt For: 2024 Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 16 / 2023
Transaction ID : 7630784
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1357.14
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Socha, Scott, P., ,

Mailing Address 871 Knox Rd

City Orchard Park	State NY	Zip Code 14127
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) President, Parks & Resorts
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1458.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2023

Transaction ID : 7528465

Amount of Each Receipt this Period
208.33

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Socha, Scott, P., ,

Mailing Address 871 Knox Rd

City Orchard Park	State NY	Zip Code 14127
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) President, Parks & Resorts
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1666.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2023

Transaction ID : 7545440

Amount of Each Receipt this Period
208.33

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Socha, Scott, P., ,

Mailing Address 871 Knox Rd

City Orchard Park	State NY	Zip Code 14127
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Delaware North	Occupation (for Individual) President, Parks & Resorts
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1874.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2023

Transaction ID : 7564293

Amount of Each Receipt this Period
208.33

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	624.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Delaware North

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Socha, Scott, P., ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2023
Mailing Address 871 Knox Rd		Transaction ID : 7630956
City Orchard Park	State NY	Zip Code 14127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer (for Individual) Delaware North	Occupation (for Individual) President, Parks & Resorts	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2083.30	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Socha, Scott, P., ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2023
Mailing Address 871 Knox Rd		Transaction ID : 7630996
City Orchard Park	State NY	Zip Code 14127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer (for Individual) Delaware North	Occupation (for Individual) President, Parks & Resorts	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2291.63	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Socha, Scott, P., ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023
Mailing Address 871 Knox Rd		Transaction ID : 7630981
City Orchard Park	State NY	Zip Code 14127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer (for Individual) Delaware North	Occupation (for Individual) President, Parks & Resorts	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2499.96	

SUBTOTAL of Receipts This Page (optional).....▶	624.99
TOTAL This Period (last page this line number only).....▶	20913.43

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Delaware North

A. TOGETHER FOR OUR MAJORITY POLITICAL ACTION COMMITTEE (TOMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8261 Old Post Rd E

City East Amherst	State NY	Zip Code 14051-1584
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00364174

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2023

Transaction ID : 7630791

Amount of Each Receipt this Period
1000.00

Memo Item

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Delaware North

A. Joe Morelle For Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 90914

City Rochester State NY Zip Code 14609-0914

Purpose of Disbursement
Political Contribution

Candidate Name
D, Joseph, Morelle, ,

Office Sought: House Senate President

Disbursement For: 2024
 Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 07 / 2023

FEC Identification Number
C C00675108
Transaction ID : 501343162

Amount of Each Disbursement this Period
2500.00

Memo Item

B. McHenry For Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2165

City Gastonia State NC Zip Code 28053-2165

Purpose of Disbursement
Political Contribution

Candidate Name
T., Patrick, McHenry, ,

Office Sought: House Senate President

Disbursement For: 2024
 Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 13 / 2023

FEC Identification Number
C C00393629
Transaction ID : 501343161

Amount of Each Disbursement this Period
2900.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5400.00
TOTAL This Period (last page this line number only).....▶	5400.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Delaware North

A. Full Name (Last, First, Middle Initial)
Zinke, Ryan, K., ,

Date of Disbursement
MM / DD / YYYY
10 / 01 / 2023

Mailing Address US HOUSE OF REPRESENTATIVES 1419 L
Ofc BLDG

City Washington State DC Zip Code 20515-0001

Purpose of Disbursement Political contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2024
 Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Transaction ID : 501278033

Amount of Each Disbursement this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00