

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 16

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NAME OF COMMITTEE (in Full)

Delaware North Companies, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code Tennesseans for Thompson - 1996 1808 West End Avenue, Suite 901 Nashville, Tennessee 37203	Name of Employer Occupation Campaign Committee	Date (month, day, year) Made: 6/23/95 Refunded: 9/15/97	Amount of Each Receipt this Period \$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Refund of campaign contribution			
Aggregate Year-to-Date \$ 250.00			
B. Full Name, Mailing Address and ZIP Code CHECK DID NOT CLEAR Harry J. Olsen P.O. Box 254 Deland, Florida 32724	Name of Employer Daytona Beach Kennel Club Occupation General Manager	Date (month, day, year) 7/16/96	Amount of Each Receipt this Period (500.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date \$ 0.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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)

TOTAL This Period (last page this line number only)

(250.00)