

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Frist 2000, Inc.

<p>A. Full Name, Mailing Address and Zip Code Lowell D. Blevins, DDS 1692 Ft. Campbell Boulevard Clarksville, TN 37042-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer self</p> <p>Occupation Dentist</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 04/09/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Mr. Jerome Blockman 5360 S. Angela Drive Memphis, TN 38120-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer self</p> <p>Occupation Real estate</p> <p>Aggregate Year-to-Date -> 250.00</p>	<p>Date (month, day, year) 04/05/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Mr. Robert B. Blow 6410 Poplar Avenue, Suite 395 Memphis, TN 38119-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Paridigm Capital</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Date (month, day, year) 06/26/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Mr. John W. Bode 431 NW 17th Street Oklahoma City, OK 73103-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Information Requested</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Date (month, day, year) 05/15/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Mr. Sumner Bouldin Bouldin & Bouldin 122 N. Church Street Murfreesboro, TN 37130-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Date (month, day, year) 04/26/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Mr. Jay S. Bowen 1906 West End Avenue Nashville, TN 37203-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self-employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> 250.00</p>	<p>Date (month, day, year) 04/02/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and Zip Code Mr. Richard Bracken 1106 Belle Meade Boulevard Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Columbia/HCA</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -> 250.00</p>	<p>Date (month, day, year) 04/26/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)