EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Due by the 20th of each month)

<table>
<thead>
<tr>
<th>Park: Homosassa Springs Wildlife State Park</th>
<th>Date: 2/20/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concessionaire Name: Cape Leisure Homosassa, LLC</td>
<td></td>
</tr>
<tr>
<td>Period Covered: From 1/1/2018 To 1/31/2018</td>
<td></td>
</tr>
</tbody>
</table>

**Gross Sales**

<table>
<thead>
<tr>
<th>Sales Location(s): Multiple</th>
<th>$74,242.15</th>
</tr>
</thead>
<tbody>
<tr>
<td>If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Subcontractor(s): None</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Taxes Collected:</th>
<th>$4,132.85</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Funds from Concessionaire Employee Food Consumption:</td>
<td>$0.00</td>
</tr>
<tr>
<td>Total Customer Refunds:</td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Total Gross Sales</strong></td>
<td>$70,109.30</td>
</tr>
</tbody>
</table>

**Monthly Compensation**

<table>
<thead>
<tr>
<th>Monthly Commission (14% rate x Total Gross Sales)</th>
<th>$9,815.30</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Use Tax (6% rate x Monthly Commission)</td>
<td>$588.92</td>
</tr>
<tr>
<td>State Use Tax Exempt Amount (enter $0.00 if not exempt)</td>
<td>$588.92</td>
</tr>
<tr>
<td>Monthly Vending Machine Fee: $30 # of Machines: 0</td>
<td>0</td>
</tr>
<tr>
<td>Monthly Utility Fee(s) to Park</td>
<td>$0.00</td>
</tr>
<tr>
<td>Pass through fee Pavilion rentals</td>
<td></td>
</tr>
<tr>
<td>Other Payments (identify)</td>
<td></td>
</tr>
<tr>
<td><strong>Total Monthly Compensation Due</strong></td>
<td>$9,815.30</td>
</tr>
</tbody>
</table>

**Capital Improvements Spending**

<table>
<thead>
<tr>
<th>Monthly Deposit Amount: 2% x Total Gross Sales</th>
<th>$1,402.19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly Spending</td>
<td>$0.00</td>
</tr>
<tr>
<td>Total Deposits, Year to Date</td>
<td>$22,477.67</td>
</tr>
</tbody>
</table>
Total Disbursements, Year to Date  $1,420.00
Current Balance  $21,057.87

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire  
Date  2/14/18

Signature of Preparer  
Date

Preparer Name

Return this form to the Department’s Agreement Manager

Sales Locations Detail
Catering Food  $613.21
Wildside Café  $20,981.45
Gator Bites  $6,111.05
Visitor Center Coffee  $0.00
Vending  $0.00
Popcorn  $0.00
Pretzel Cart  $1,519.44
Pepper Creek Terrace  $0.00
Catering Facility  $1,305.66
Nest of Treasures  $23,550.59
State of Elegance  $16,027.90
Total Sales  $70,109.30

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire’s Gross Sales
(Due by the 20th of each month)

<table>
<thead>
<tr>
<th>Park:</th>
<th>Homosassa Springs Wildlife State Park</th>
<th>Date: 3/20/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concessionaire Name:</td>
<td>Cape Leisure Homosassa, LLC</td>
<td></td>
</tr>
<tr>
<td>Period Covered:</td>
<td>From 2/1/2018</td>
<td>To 2/28/2018</td>
</tr>
</tbody>
</table>

**Gross Sales**

Sales Location(s): Multiple .......................... $135,737.60

*If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.*

Subcontractor(s): None .................................. + 0

*Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.*

<table>
<thead>
<tr>
<th>Total Taxes Collected:</th>
<th>- $7,317.78</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Funds from Concessionaire Employee Food Consumption:</td>
<td>- $0.00</td>
</tr>
<tr>
<td>Total Customer Refunds:</td>
<td>- $0.00</td>
</tr>
<tr>
<td><strong>Total Gross Sales</strong></td>
<td>= $128,419.82</td>
</tr>
</tbody>
</table>

**Monthly Compensation**

Monthly Commission (14% rate x Total Gross Sales) .................. $17,978.77

State Use Tax (6% rate x Monthly Commission) .................. + $1,078.73

State Use Tax Exempt Amount (enter $0.00 if not exempt) .................. - $1,078.73

Monthly Vending Machine Fee: $30  # of Machines: 0 .................. + $0.00

Monthly Utility Fee(s) to Park .................. + $0.00

Pass through fee Pavilion rentals .................. + 0

Other Payments (identify) .................. + 0

**Total Monthly Compensation Due** .................. = $17,978.77

**Capital Improvements Spending**

Monthly Deposit Amount: 2% x Total Gross Sales .................. $2,568.40

Monthly Spending .................. $0.00

Total Deposits, Year to Date .................. $25,046.06
Total Disbursements, Year to Date  
$3,979.00

Current Balance  
$21,067.06

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is 
based upon actual gross receipts for the period covered and recorded in the accounting records 
available for review/audit by the Department.

Signature of Concessionaire

[Signature]

Date  
31/1/18

Signature of Preparer

[Signature]

Date

Preparer Name

Return this form to the Department's Agreement Manager

---

Sales Locations Detail

<table>
<thead>
<tr>
<th>Location</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$1,905.70</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$32,822.99</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$16,285.64</td>
</tr>
<tr>
<td>Visitor Center Coffee</td>
<td>$0.00</td>
</tr>
<tr>
<td>Vending</td>
<td>$0.00</td>
</tr>
<tr>
<td>Popcorn</td>
<td>$0.00</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$7,488.04</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$980.00</td>
</tr>
<tr>
<td>Catering Facility</td>
<td>$0.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$40,273.68</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$28,683.77</td>
</tr>
<tr>
<td><strong>Total Sales</strong></td>
<td><strong>$128,419.82</strong></td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Required by the 20th of each month)

Park: Homosassa Springs Wildlife State Park

Concessionaire Name: Cape Leisure Homosassa, LLC

Period Covered: From 3/1/2018 To 3/31/2018

Gross Sales

Sales Location(s): Multiple

If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None + 0

Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: - $6,330.66

Total Funds from Concessionaire Employee Food Consumption: - $0.00

Total Customer Refunds: - $0.00

Total Gross Sales: = $171,716.45

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) = $24,040.30

State Use Tax (6% rate x Monthly Commission) = $1,442.42

State Use Tax Exempt Amount (enter $0.00 if not exempt) = $1,442.42

Monthly Vending Machine Fee: $30 # of Machines: 0 = $0.00

Monthly Utility Fee(s) to Park = $0.00

Pass through fee Pavilion rentals = $0.00

Other Payments (identify) = $0.00

Total Monthly Compensation Due = $24,040.30

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales = $3,434.33

Monthly Spending = $0.00

Total Deposits, Year to Date = $28,480.39
Total Disbursements, Year to Date

Current Balance

\[ \begin{array}{l}
\text{\$3,979.00} \\
\text{\$24,501.39}
\end{array} \]

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire

\[ \text{4/17/18} \]

Date

Signature of Preparer

Date

Preparer Name

Return this form to the Department's Agreement Manager

---

**Sales Locations Detail**

<table>
<thead>
<tr>
<th>Location</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$4,991.08</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$43,435.28</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$18,705.15</td>
</tr>
<tr>
<td>Visitor Center Coffee</td>
<td>$0.00</td>
</tr>
<tr>
<td>Vending</td>
<td>$0.00</td>
</tr>
<tr>
<td>Popcorn</td>
<td>$0.00</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$0.00</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$10,372.62</td>
</tr>
<tr>
<td>Catering Facility</td>
<td>$2,009.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$0.00</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$60,273.14</td>
</tr>
<tr>
<td><strong>Total Sales</strong></td>
<td><strong>$171,716.45</strong></td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park
Concessionaire Name: Cape Leisure Homosassa, LLC
Period Covered: From 4/1/2018 To 4/30/2018
Date: 5/20/2018

Gross Sales

Sales Location(s): Multiple $114,976.53
If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None + 0
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: - $6,262.66
Total Funds from Concessionaire Employee Food Consumption: - $0.00
Total Customer Refunds: # of Refunds: - $0.00
Total Gross Sales = $108,713.87

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) $15,219.94
State Use Tax (6% rate x Monthly Commission) + $913.20
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $913.20
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +
Total Monthly Compensation Due = $15,219.94

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales $2,174.28
Monthly Spending
Total Deposits, Year to Date $30,654.67
Total Disbursements, Year to Date

Current Balance

$3,979.00

$26,675.67

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire

[Signature]

Date

5/15/18

Signature of Preparer

[Signature]

Date

Preparer Name

Return this form to the Department's Agreement Manager

<table>
<thead>
<tr>
<th>Sales Locations Detail</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$4,127.46</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$30,685.04</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$12,512.32</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$4,463.21</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$2,800.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$34,658.76</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$18,842.08</td>
</tr>
<tr>
<td>Interactive Camp</td>
<td>$625.00</td>
</tr>
<tr>
<td><strong>Total Sales</strong></td>
<td><strong>$108,713.87</strong></td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park
Concessionaire Name: Cape Leisure Homosassa, LLC
Period Covered: From 5/1/2018
To 5/31/2018
Date: 6/20/2018

Gross Sales

Sales Location(s): Multiple $58,163.88
If there are multiple point of sale locations, please include the total sales for all locations on this
line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None + 0
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple
subcontractors, please include the total gross sales for all subcontractors on this line; and, list
the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: - $3,014.31
Total Funds from Concessionaire Employee Food Consumption: - $0.00
Total Customer Refunds: # of Refunds: $0.00
Total Gross Sales = $55,149.57

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) $7,720.94
State Use Tax (6% rate x Monthly Commission) + $463.26
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $463.26
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +
Total Monthly Compensation Due = $7,720.94

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales $1,102.99
Monthly Spending $0.00
Total Deposits, Year to Date $31,757.66
Total Disbursements, Year to Date
$17,004.00
Current Balance
$14,753.66

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire

Date

Signature of Preparer

Date

Preparer Name

Return this form to the Department's Agreement Manager

Sales Locations Detail
Catering Food $1,354.31
Wildside Café $15,332.83
Gator Bites $5,425.64
Pretzel Cart $0.00
Pepper Creek Terrace $1,500.00
Nest of Treasures $18,941.04
State of Elegance $10,745.75
Interactive Camp $1,850.00
Total Sales $55,149.57

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire’s Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park
Date: 7/20/2018

Concessionaire Name: Cape Leisure Homosassa, LLC

Period Covered: From 6/1/2018 To 6/30/2018

Gross Sales

Sales Location(s): Multiple $65,396.20
If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None + 0
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected:
Total Funds from Concessionaire Employee Food Consumption:
Total Customer Refunds: # of Refunds: 0
Total Gross Sales = $61,803.01

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) $8,652.42
State Use Tax (6% rate x Monthly Commission) + $519.15
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $519.15
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +
Total Monthly Compensation Due = $8,652.42

Capital Improvements Spending
Monthly Deposit Amount: 2% x Total Gross Sales $1,236.06
Monthly Spending $0.00
Total Deposits, Year to Date $32,993.72
Total Disbursements, Year to Date $17,004.00
Current Balance $15,989.72

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire

Date 7/17/18

Signature of Preparer

Date

Preparer Name

Return this form to the Department's Agreement Manager

Sales Locations Detail
Catering Food $4,105.44
Wildside Café $20,704.62
Gator Bites $7,513.46
Pretzel Cart $0.00
Pepper Creek Terrace -$1,974.30
Nest of Treasures $17,704.05
State of Elegance $11,749.74
Interactive Camp $2,000.00
Total Sales $61,803.01

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park
Concessionaire Name: Cape Leisure Homosassa, LLC
Period Covered: From 7/1/2018 To 7/31/2018

Date: 8/20/2018

Gross Sales
Sales Location(s): Multiple
$74,007.87
If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None
+ 0
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: $3,942.60
Total Funds from Concessionaire Employee Food Consumption: $0.00
Total Customer Refunds: # of Refunds: 0
Total Gross Sales = $70,065.27

Monthly Compensation
Monthly Commission (14% rate x Total Gross Sales) $9,809.14
State Use Tax (6% rate x Monthly Commission) + $588.55
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $588.55
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +
Total Monthly Compensation Due = $9,809.14

Capital Improvements Spending
Monthly Deposit Amount: 2% x Total Gross Sales $1,401.31
Monthly Spending $3,834.00
Total Deposits, Year to Date $34,395.02
Total Disbursements, Year to Date $20,838.00
Current Balance $13,557.02

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire

Date 8/16/18

Signature of Preparer

Date

Preparer Name

Return this form to the Department's Agreement Manager

Sales Locations Detail

<table>
<thead>
<tr>
<th>Location</th>
<th>Sales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$21,936.92</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$10,071.54</td>
</tr>
<tr>
<td>Gator Bites</td>
<td></td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$2,150.00</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$19,024.33</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$13,830.83</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$700.00</td>
</tr>
<tr>
<td>Total Sales</td>
<td>$70,065.27</td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire’s Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park           Date: 9/20/2018
Concessionaire Name: Cape Leisure Homosassa, LLC
Period Covered: From 8/1/2018   To 8/31/2018

Gross Sales

Sales Location(s): Multiple               $58,860.15
If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None                + 0
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: - $3,180.44
Total Funds from Concessionaire Employee Food Consumption: - $0.00
Total Customer Refunds: # of Refunds: - $0.00
Total Gross Sales = $55,679.71

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) $7,795.16
State Use Tax (6% rate x Monthly Commission) + $467.71
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $467.71
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +
Total Monthly Compensation Due = $7,795.16

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales $1,113.59
Monthly Spending + $0.00
Total Deposits, Year to Date = $35,508.62
Total Disbursements, Year to Date

$20,838.00

Current Balance

$14,670.62

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire  

Date  

Signature of Preparer

Date

Preparer Name

Return this form to the Department's Agreement Manager

Sales Locations Detail

<table>
<thead>
<tr>
<th>Location</th>
<th>Sales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$ 471.70</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$ 15,733.10</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$ 7,234.46</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$ 2,779.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$ 18,394.58</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$ 11,066.87</td>
</tr>
<tr>
<td>Interactive Camp</td>
<td>$</td>
</tr>
</tbody>
</table>

Total Sales

$55,679.71

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park          Date: 10/20/2018

Concessionaire Name: Cape Leisure Homosassa, LLC

Period Covered: From 9/1/2018              To 9/30/2018

Gross Sales

Sales Location(s): Multiple $48,845.51
If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None + 0
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: - $2,529.16
Total Funds from Concessionaire Employee Food Consumption: - $0.00
Total Customer Refunds: # of Refunds: - $0.00
Total Gross Sales = $46,316.35

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) $6,484.29
State Use Tax (6% rate x Monthly Commission) + $389.06
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $389.06
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +
Total Monthly Compensation Due = $6,484.29

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales $926.33
Monthly Spending $0.00
Total Deposits, Year to Date $36,434.95
Total Disbursements, Year to Date $20,838.00

Current Balance $15,596.95

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire

Date 10/18/17

Signature of Preparer

Date

Preparer Name

Return this form to the Department's Agreement Manager

Sales Locations Detail

<table>
<thead>
<tr>
<th>Location</th>
<th>Sales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$ 5,400.76</td>
</tr>
<tr>
<td>Catering Service Charges</td>
<td>$ 833.73</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$ 13,301.60</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$ 4,997.48</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$ -</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$ 350.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$ 12,966.41</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$ 8,466.37</td>
</tr>
<tr>
<td>Interactive Camp</td>
<td>$ -</td>
</tr>
<tr>
<td><strong>Total Sales</strong></td>
<td><strong>$46,316.35</strong></td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.
EXHIBIT D  
Monthly Report of Concessionaire’s Gross Sales  
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park  
Concessionaire Name: Cape Leisure Homosassa, LLC  
Date: 11/20/2018

Period Covered: From 10/1/2018 To 10/31/2018

Gross Sales

Sales Location(s): Multiple  
Total Gross Sales: $55,167.71

If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None  
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: $2,985.36
Total Funds from Concessionaire Employee Food Consumption: $0.00
Total Customer Refunds: $0.00
Total Gross Sales: $52,182.35

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales)  
$7,305.53
State Use Tax (6% rate x Monthly Commission)  
$438.33
State Use Tax Exempt Amount (enter $0.00 if not exempt)  
$438.33
Monthly Vending Machine Fee: $30 # of Machines: 0  
$0.00
Monthly Utility Fee(s) to Park  
$0.00
Pass through fee Pavilion rentals  
$0.00
Other Payments (identify)  
$0.00

Total Monthly Compensation Due: $7,305.53

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales  
$1,043.65
Monthly Spending  
$0.00
Total Deposits, Year to Date  
$37,478.60
Total Disbursements, Year to Date

Current Balance

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

Signature of Concessionaire

Date

Signature of Preparer

Date

Preparer Name

Return this form to the Department's Agreement Manager

Sales Locations Detail

<table>
<thead>
<tr>
<th>Location</th>
<th>Total Sales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$3,160.81</td>
</tr>
<tr>
<td>Catering Service Charges</td>
<td>$632.16</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$13,577.62</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$4,628.57</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$-</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$2,100.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$17,783.23</td>
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<tr>
<td>State of Elegance</td>
<td>$9,314.35</td>
</tr>
<tr>
<td>Interactive Camp</td>
<td>$-</td>
</tr>
<tr>
<td><strong>Total Sales</strong></td>
<td><strong>$52,182.35</strong></td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park
Date: 12/20/2018

Concessionaire Name: Cape Leisure Homosassa, LLC

Period Covered: From 11/1/2018 To 11/30/2018

Gross Sales

Sales Location(s): Multiple $75,466.36
If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None + 0
Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: - $4,122.65
Total Funds from Concessionaire Employee Food Consumption: - $0.00
Total Customer Refunds: # of Refunds: - $0.00

Total Gross Sales = $71,343.71

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) $9,988.12
State Use Tax (6% rate x Monthly Commission) + $599.29
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $599.29
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +

Total Monthly Compensation Due = $9,988.12

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales $1,426.87
Monthly Spending $0.00

Total Deposits, Year to Date $38,905.47
Total Disbursements, Year to Date

<table>
<thead>
<tr>
<th>Current Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>$20,838.00</td>
</tr>
<tr>
<td>$18,067.47</td>
</tr>
</tbody>
</table>

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

[Signature]

Date: 12/18/18

Preparer Name

Return this form to the Department's Agreement Manager

<table>
<thead>
<tr>
<th>Sales Locations Detail</th>
<th>Sales Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$ 5,972.44</td>
</tr>
<tr>
<td>Catering Service Charges</td>
<td>$ 970.05</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$ 19,167.94</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$ 6,360.95</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$ -</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$ 1,400.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$ 25,131.83</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$ 12,340.50</td>
</tr>
<tr>
<td>Interactive Camp</td>
<td>$ -</td>
</tr>
<tr>
<td><strong>Total Sales</strong></td>
<td><strong>$71,343.71</strong></td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.
EXHIBIT D
Monthly Report of Concessionaire's Gross Sales
(Due by the 20th of each month)

Park: Homosassa Springs Wildlife State Park

Date: 1/20/2019

Concessionaire Name: Cape Leisure Homosassa, LLC

Period Covered: From 12/1/2018 To 12/31/2018

Gross Sales

Sales Location(s): Multiple $89,549.12

If there are multiple point of sale locations, please include the total sales for all locations on this line; and, list the name and total sales of each location on an attached second sheet.

Subcontractor(s): None + 0

Subcontractor is defined in paragraph 11 of this Agreement. If there are multiple subcontractors, please include the total gross sales for all subcontractors on this line; and, list the name and total gross sales of each subcontractor on an attached second sheet.

Total Taxes Collected: - $4,926.87
Total Funds from Concessionaire Employee Food Consumption: - $0.00
Total Customer Refunds: # of Refunds: - $0.00

Total Gross Sales = $84,622.25

Monthly Compensation

Monthly Commission (14% rate x Total Gross Sales) $11,847.12
State Use Tax (6% rate x Monthly Commission) + $710.83
State Use Tax Exempt Amount (enter $0.00 if not exempt) - $710.83
Monthly Vending Machine Fee: $30 # of Machines: 0 + $0.00
Monthly Utility Fee(s) to Park + $0.00
Pass through fee Pavilion rentals +
Other Payments (identify) +

Total Monthly Compensation Due = $11,847.12

Capital Improvements Spending

Monthly Deposit Amount: 2% x Total Gross Sales $1,692.45
Monthly Spending $0.00
Total Deposits, Year to Date $40,597.92
Total Disbursements, Year to Date  $20,838.00
Current Balance  $19,759.92

CERTIFICATION: I certify that this monthly gross sales statement is true and correct and is based upon actual gross receipts for the period covered and recorded in the accounting records available for review/audit by the Department.

[Signature]
Signature of Concessionaire  1/15/19
Date

[Signature]
Signature of Preparer
Date

Preparer Name

Return this form to the Department’s Agreement Manager

<table>
<thead>
<tr>
<th>Sales Locations</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Food</td>
<td>$1,769.33</td>
</tr>
<tr>
<td>Catering Service Charges</td>
<td>$349.15</td>
</tr>
<tr>
<td>Wildside Café</td>
<td>$21,601.63</td>
</tr>
<tr>
<td>Gator Bites</td>
<td>$7,215.91</td>
</tr>
<tr>
<td>Popcorn</td>
<td>$4,463.20</td>
</tr>
<tr>
<td>Pretzel Cart</td>
<td>$4,858.93</td>
</tr>
<tr>
<td>Pepper Creek Terrace</td>
<td>$655.00</td>
</tr>
<tr>
<td>Nest of Treasures</td>
<td>$28,962.36</td>
</tr>
<tr>
<td>State of Elegance</td>
<td>$14,746.72</td>
</tr>
<tr>
<td><strong>Total Sales</strong></td>
<td><strong>$84,622.25</strong></td>
</tr>
</tbody>
</table>

Note: Totals do not include Sales Tax collected.