

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

RYMAN HOSPITALITY PROPERTIES PAC

ADDRESS (number and street)

ONE GAYLORD DRIVE



Check if different than previously reported. (ACC)

NASHVILLE

TN

37214

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

000183707

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)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11) (Non-Election Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12) (Non-Election Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

____/____/____

In the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

____/____/____

In the State of

5. Covering Period

07 / 01 / 2020

through

09 / 30 / 2020

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 JENNIFER HUTCHESON

Signature of Treasurer

Jennifer Hutcherson

Date

10 / 01 / 2020

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

Office Use Only

FEC FORM 3X
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Report Covering the Period:

From:

07 / 01 / 2020

To:

09 / 30 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		3181639
(b) Cash on Hand at Beginning of Reporting Period.....	3534333	
(c) Total Receipts (from Line 19)	503864	1033172
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	4038197	4214811
7. Total Disbursements (from Line 31).....	14647	191261
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4023550	4023550
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	000	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	000	



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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

RYMAN HOSPITALITY PROPERTIES PAC

Report Covering the Period: From:

07 / 01 / 2020

To:

09 / 30 / 2020

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).....	457761	844772
(ii) Unitemized.....	46070	183633
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	503831	1028405
(b) Political Party Committees.....	000	000
(c) Other Political Committees (such as PACs).....	000	000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	503831	1028405
12. Transfers From Affiliated/Other Party Committees.....	000	000
13. All Loans Received.....	000	000
14. Loan Repayments Received.....	000	000
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	000	000
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	000	000
17. Other Federal Receipts (Dividends, Interest, etc.).....	031	4767
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	000	000
(b) Levin Funds (from Schedule H5).....	000	000
(c) Total Transfers (add 18(a) and 18(b))..	000	000
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	503864	1033172
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	503864	1033172

2020 NOV 10 10 00 AM '20

**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 05/2016)

Page 4

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	0 00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0 00	0 00
22. Transfers to Affiliated/Other Party Committees	0 00	0 00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0 00	1,500 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)	1,464 7	1,912 61
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)) ..	1,464 7	1,912 61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,464 7	1,912 61

UNIVERSITY MICROFILMS

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)	503831	1028405
34. Total Contribution Refunds (from Line 28(d))	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	000	000
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	503831	1028405
37. Offsets to Operating Expenditures (from Line 15, page 3)	000	000
38. Net Operating Expenditures (subtract Line 37 from Line 36)	000	000

REPRODUCED FROM THE FEDERAL ELECTION COMMISSION

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

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)
RYMAN HOSPITALITY PROPERTIES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BAILEY, SCOTT

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **PRESIDENT, DEG**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 30 / 2020**

Amount of Each Receipt this Period **200.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHAFFIN, PATRICK

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **EVP & COO**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 30 / 2020**

Amount of Each Receipt this Period **200.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHAMBLIN, JAMES

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **SVP, DESIGN & CONSTR.**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **593.44**

Date of Receipt **09 / 30 / 2020**

Amount of Each Receipt this Period **279.44**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **679.44**

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

MONO-TONER COMPANY

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 11	
	(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)
RYMAN HOSPITALITY PROPERTIES PAC

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

A. CHERRY, SIDNEY

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **VP, TAX**

Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **722.44**

Date of Receipt
09 / 30 / 2020

Amount of Each Receipt this Period
349.34

Memo Item

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

B. COLLIER, DAVID

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **ASST. DIR. - EVENTS**

Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **272.20**

Date of Receipt
09 / 30 / 2020

Amount of Each Receipt this Period
136.10

Memo Item

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

C. FIORAVANTE, MARK

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **PRESIDENT & CFO**

Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **769.20**

Date of Receipt
09 / 30 / 2020

Amount of Each Receipt this Period
384.60

Memo Item

SUBTOTAL of Receipts This Page (optional) **870.04**

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 8 OF 11	
	<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)
RYMAN HOSPITALITY PROPERTIES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRIMES, RON

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **DIRECTOR, SECURITY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 30 / 2020**

Amount of Each Receipt this Period **200.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUTCHESON, JENNIFER

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **EVP & CAO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 30 / 2020**

Amount of Each Receipt this Period **200.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LYNN, SCOTT

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **EVP & GC**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 30 / 2020**

Amount of Each Receipt this Period **200.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **600.00**

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

NONO: HO: TM: ON: COMPTON

**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 11	
	<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)
RYMAN HOSPITALITY PROPERTIES PAC

A. NAPIER, CRAIG

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

Date of Receipt: 09 / 30 / 2020

Mailing Address: ONE GAYLORD DRIVE

City: NASHVILLE State: TN Zip Code: 37214

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 189.50

Name of Employer (for Individual): RYMAN HOSPITALITY PROPERTIES Occupation (for Individual): DIRECTOR - COMPLIANCE

Receipt For: Primary General Other (specify) Memo Item

Aggregate Year-to-Date: 384.22

B. REED, COLIN

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

Date of Receipt: 09 / 30 / 2020

Mailing Address: ONE GAYLORD DRIVE

City: NASHVILLE State: TN Zip Code: 37214

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 1923.00

Name of Employer (for Individual): RYMAN HOSPITALITY PROPERTIES Occupation (for Individual): CHAIRMAN & CEO

Receipt For: Primary General Other (specify) Memo Item

Aggregate Year-to-Date: 3,846.00

C. WEIEN, PETER

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

Date of Receipt: 09 / 30 / 2020

Mailing Address: ONE GAYLORD DRIVE

City: NASHVILLE State: TN Zip Code: 37214

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 200.00

Name of Employer (for Individual): RYMAN HOSPITALITY PROPERTIES Occupation (for Individual): SVP, OPERATIONS

Receipt For: Primary General Other (specify) Memo Item

Aggregate Year-to-Date: 400.00

SUBTOTAL of Receipts This Page (optional).....▶ 2312.50

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

NON-PROFIT ORGANIZATION

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

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

FOR LINE NUMBER: PAGE 10 OF 11
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RYMAN HOSPITALITY PROPERTIES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SMITH, LAUREN

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

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

Name of Employer (for Individual) **RYMAN HOSPITALITY PROPERTIES** Occupation (for Individual) **DIR. OF FACILITIES**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.19**

Date of Receipt **09 / 30 / 2020**

Amount of Each Receipt this Period **115.63**

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **115.63**

TOTAL This Period (last page this line number only).....▶ **4577.61**

**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)

PAGE 11 OF 11

<input type="checkbox"/> 21b 28a	<input type="checkbox"/> 22 28b	<input checked="" type="checkbox"/> 23 28c	<input type="checkbox"/> 26 29	<input type="checkbox"/> 27 30b
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NAME OF COMMITTEE (In Full)

RYMAN HOSPITALITY PROPERTIES PAC

Full Name (Last, First, Middle Initial)

A.

BANK OF AMERICA

Mailing Address
2720 LEBANON PIKE

City **NASHVILLE** State **TN** Zip Code **37214**

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

09 / 30 / 2020

FEC Identification Number

C

Amount of Each Disbursement this Period

146.47

Memo Item

B.

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

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).....▶

146.47

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

146.47

Insert shipping document here

ORIGIN ID:BNAA (615) 316-6137
CAROLINE JONES
RYMAN HOSPITALITY PROPERTIES, INC.
ONE GAYLORD DRIVE

SHIP DATE: 06OCT20
ACTWGT: 0.50 LB
CAD: 1185386/NET4280

NASHVILLE, TN 37214
UNITED STATES US

BILL SENDER

TO PAC FILING DEPARTMENT
FEDERAL ELECTION COMMISSION
1050 FIRST STREET, NE

WASHINGTON DC 20002

(800) 424-9530
INV:
PO:

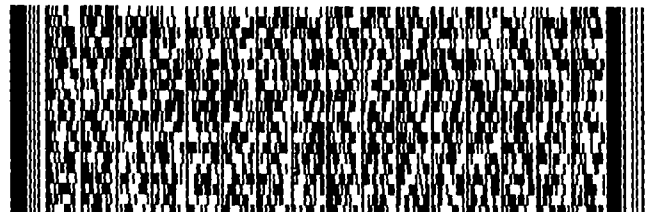
REF: 3207-1002-191801-621004

DEPT:

56B121A27E16766

RT 733
FZ
1
16:30
3533
10.07

FedEx Ship Manager - Print Your Labels(s)



FedEx Express



Extremely Urgent

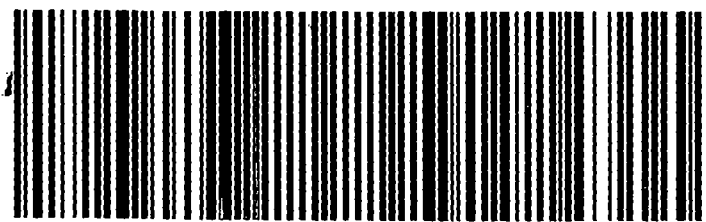
WED - 07 OCT 4:30P

STANDARD OVERNIGHT

TRK# 7717 2102 4268
0201

XC YKNA

20002
DC-US IAD



SSO



10/6/2020

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify) <i>Fed Ex</i>	Shipping Date <i>10/6/20</i>
Next Business Day Delivery	<input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify): <i>!</i>	Date of Receipt or Postmarked
PREPARER <i>SPM</i>	DATE PREPARED <i>10/13/20</i>

20201013 10:01:01 AM