

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED TO MAIL CENTER 2019 JUL 15 AM 10:35

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 NASHVILLE TN 37214

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C00183707 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, 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), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01/01/2019 through 06/30/2019

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 07/12/2019

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)

Page 2

Write or Type Committee Name

RYMAN HOSPITALITY PROPERTIES PAC

Report Covering the Period: From:

MM ' DD ' YYYY
01 ' 01 ' 2019

To:

MM ' DD ' YYYY
06 ' 30 ' 2019

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2019	5556539	5556539
(b) Cash on Hand at Beginning of Reporting Period.....	5556539	
(c) Total Receipts (from Line 19).....	570696	570696
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6127235	6127235
7. Total Disbursements (from Line 31).....	1512932	1512932
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4614303	4614303
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

NOTICE OF FINANCIAL DISBURSEMENT

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: **01** / **01** / **2019**

To: **06** / **30** / **2019**

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).....	548986	548986
(ii) Unitemized.....	3601	3601
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	552587	552587
(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).....▶	552587	552587
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.).....	18109	18109
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)).....▶	570696	570696
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	570696	570696

NON-FEDERAL ACCOUNT

**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	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	0.00	
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)	1512932	1512932	
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)) ..	1512932	1512932	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1512932	1512932	

NON-FEDERAL SHARE

DETAILED SUMMARY PAGE
of Disbursements

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)	5,525,87	5,525,87
34. Total Contribution Refunds (from Line 28(d))	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5,525,87	5,525,87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	000	000
37. Offsets to Operating Expenditures (from Line 15, page 3)	000	000
38. Net Operating Expenditures (subtract Line 37 from Line 36)	000	000

NON-FEDERAL CAMPAIGN FINANCING

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **6** OF **13**

(check only one)

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

RYMAN HOSPITALITY PROPERTIES PAC

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

A. REED, COLIN V.

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 PROP.

Occupation (for Individual)

CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

249990

Date of Receipt

06 / 30 / 2019

Amount of Each Receipt this Period

249990

Memo Item

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

B. FORAVANTI, 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 PROP.

Occupation (for Individual)

CFO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

52273

Date of Receipt

06 / 30 / 2019

Amount of Each Receipt this Period

52273

Memo Item

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

C. 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 PROP

Occupation (for Individual)

SVP, DESIGN

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

40268

Date of Receipt

06 / 30 / 2019

Amount of Each Receipt this Period

40268

Memo Item

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

342531

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

342531

**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 **13**

(check only one)

11a 11b 11c 12
13 14 15 16 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
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 PROP** Occupation (for Individual) **VP, TAX**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
477.47

Date of Receipt
06 / 30 / 2019

Amount of Each Receipt this Period
477.47

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 PROP** Occupation (for Individual) **PRES, HOTEL DIV.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
06 / 30 / 2019

Amount of Each Receipt this Period
260.00

Memo Item

C. 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 PROP** Occupation (for Individual) **SVP & CAO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
06 / 30 / 2019

Amount of Each Receipt this Period
260.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **997.47**

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

NOT TO BE FILED WITH OR BY THE COMMISSION

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 **13**

(check only one)

11a 11b 11c 12

13 14 15 16 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
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 PROP.** Occupation (for individual) **EVP & GC**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 30 / 2019**

Amount of Each Receipt this Period **260.00**

Memo Item

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

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 PROP.** Occupation (for individual) **DIR., COMPLIANCE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2462.6**

Date of Receipt **06 / 30 / 2019**

Amount of Each Receipt this Period **2462.6**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
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) Occupation (for individual)
ASST. DIR., EVENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1690.6**

Date of Receipt **06 / 30 / 2019**

Amount of Each Receipt this Period **1690.6**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **6753.2**

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

NOT TO BE FILED WITH CONCOMITANT

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **9** OF **13**

(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)

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 PROP.

Occupation (for Individual)

DIR. OF OPERATIONS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

14769

Date of Receipt

06 / 30 / 2019

Amount of Each Receipt this Period

14769

Memo Item

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

B. WESTBROOK, BENNETT

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 PROP.

Occupation (for Individual)

EVP, DEVELOPMENT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

13000

Date of Receipt

06 / 30 / 2019

Amount of Each Receipt this Period

13000

Memo Item

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

C. HANTON, JEFF

Mailing Address

ONE GAYLORD DRIVE

City

NASHVILLE

State

TN

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

RYMAN HOSPITALITY PROP

Occupation (for Individual)

SR. ANALYST

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

11407

Date of Receipt

06 / 30 / 2019

Amount of Each Receipt this Period

11407

Memo Item

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

39176

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

548986

NOTED ON THE OWNERSHIP

**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 10 OF 13

21b 22 23 26 27
 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

RYMAN HOSPITALITY PROPERTIES PAC

Full Name (Last, First, Middle Initial)

A. **FRIENDS OF JEFF SYRACUSE FOR METRO COUNCIL**

Mailing Address

222 GRAEME DRIVE

City

NASHVILLE

State

TN

Zip Code

37214

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Candidate Name

JEFF SYRACUSE

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **TN**

District:

DAVIDSON COUNTY COUNCIL

Date of Disbursement

02 / 26 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

8100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. **FRIENDS OF BOB MENDES**

Mailing Address

346 21ST AVE. N.

City

NASHVILLE

State

TN

Zip Code

37203

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Candidate Name

BOB MENDES

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **TN**

District:

DAVIDSON COUNTY COUNCIL

Date of Disbursement

03 / 18 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. **VERCHER FOR COUNCIL**

Mailing Address

PO BOX 196300

City

NASHVILLE

State

TN

Zip Code

37219

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Candidate Name

TANAKA VERCHER

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **TN**

District:

DAVIDSON COUNTY COUNCIL

Date of Disbursement

04 / 19 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....>

9350.00

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

**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

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NAME OF COMMITTEE (In Full)

RYMAN HOSPITALITY PROPERTIES PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIM SHULMAN

Mailing Address
PO Box 198136

City **NASHVILLE** State **TN** Zip Code **37219**

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
JIM SHULMAN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **DAVIDSON COUNTY VICE MAYOR**

State: **TN** District:

Date of Disbursement

04 / 09 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

1,000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. GLOVER FOR NASHVILLE

Mailing Address
4156 CENTRAL PIKE

City **HERMITAGE** State **TN** Zip Code **37076**

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
STEVE GLOVER

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **DAVIDSON COUNTY COUNCIL**

State: **TN** District:

Date of Disbursement

04 / 15 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SHERI WEINER

Mailing Address
PO BOX 218132

City **NASHVILLE** State **TN** Zip Code **37221**

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
SHERI WEINER

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **DAVIDSON COUNTY VICE-MAYOR**

State: **TN** District:

Date of Disbursement

05 / 08 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

1,000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

7,500.00

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

**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 12 OF 13		
	<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

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NAME OF COMMITTEE (In Full)
RYMAN HOSPITALITY PROPERTIES PAC

A. **TENNESSEE DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial)

Mailing Address: **319 PLVS PARK BLVD**

City: **NASHVILLE** State: **TN** Zip Code: **37217**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **NIA**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: _____ District: _____

Date of Disbursement: **05 / 08 / 2019**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **1,500.00**

Memo Item

B. **DAVID BRILEY FOR MAYOR**

Full Name (Last, First, Middle Initial)

Mailing Address: **4515 HARDING PIKE STE 110**

City: **NASHVILLE** State: **TN** Zip Code: **37205**

Purpose of Disbursement: _____ Category/Type: **011**

Candidate Name: **DAVID BRILEY**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **TN** District: **DAVIDSON COUNTY MAYOR**

Date of Disbursement: **06 / 25 / 2019**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **1,500.00**

Memo Item

C. **SUNTRUST BANK**

Full Name (Last, First, Middle Initial)

Mailing Address: **2503 LEBANON PKE**

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

Purpose of Disbursement: **BANK FEES** Category/Type: **001**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: _____ District: _____

Date of Disbursement: **06 / 30 / 2019**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **2187.2**

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... **3,218.72**

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

NOTED ON THIS DOCUMENT

**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

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NAME OF COMMITTEE (In Full)

RYMAN HOSPITALITY PROPERTIES PAC

Full Name (Last, First, Middle Initial)

A. RYMAN HOSPITALITY PROPERTIES

Mailing Address

ONE GAYLORD DRIVE

City

NASHVILLE

State

TN

Zip Code

37214

Purpose of Disbursement

ADMINISTRATIVE EXPENSES

Candidate Name

001

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

06 / 30 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

6060

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

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UNITED STATES US

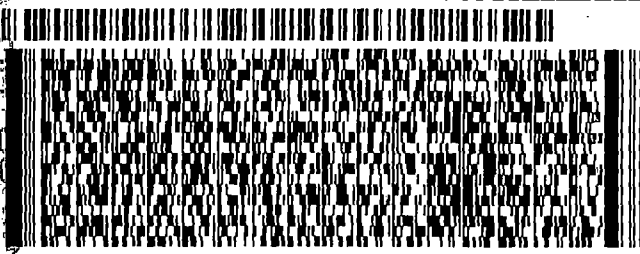
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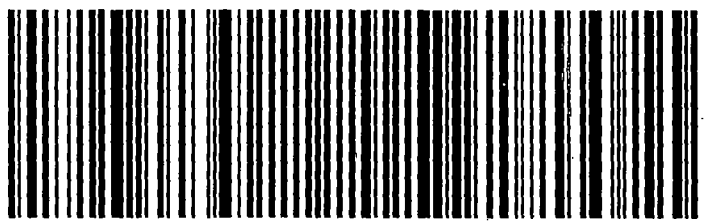
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