

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAILCENTER  
2024 JAN 24 AM 11:50

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 ▲

C00183707

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 MM / DD / YYYYYY in the State of  

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

General (30G)  Runoff (30R)  Special (30S)

Election on MM / DD / YYYYYY in the State of  

5. Covering Period MM 07 / DD 01 / YYYYYY 2023 through MM 12 / DD 31 / YYYYYY 2023

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 MM 01 / DD 18 / YYYYYY 2024

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

NON-DISBURSED

**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: **07 / 01 / 2023** To: **12 / 31 / 2023**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2023</b>		443,770.5
(b) Cash on Hand at Beginning of Reporting Period.....	473,528.1	
(c) Total Receipts (from Line 19).....	884,930	155,029.1
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	562,021.1	59,879.6
7. Total Disbursements (from Line 31).....	127,153.0	163,931.5
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	43,486.81	43,486.81
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)

NON-PROFIT ORGANIZATION

**DETAILED SUMMARY PAGE**

of Receipts

Write or Type Committee Name

**RYMAN HOSPITALITY PROPERTIES PAC**

Report Covering the Period: From:

**07 / 01 / 2023**

To:

**12 / 31 / 2023**

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

6,686.12

123,679.7

1,087.8

272.02

6,794.90

126,399.99

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0.00

0.00

0.00

0.00

6,794.90

126,399.99

12. Transfers From Affiliated/Other Party Committees.....

0.00

0.00

13. All Loans Received.....

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

1,000.00

1,000.00

17. Other Federal Receipts (Dividends, Interest, etc.).....

1,054.40

1862.92

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

0.00

0.00

0.00

0.00

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

8,849.30

15,502.91

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

8,849.30

15,502.91

NON-FEDERAL RECEIPTS

**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).....	12,715.30	16,393.15
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))..	12,715.30	16,393.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12,715.85	16,393.15

NON-FEDERAL DONATIONS

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	679490	1263999
34. Total Contribution Refunds (from Line 28(d)) .....	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	679490	1263999
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

DONOR INFORMATION CONTINUED

**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 15  
 (check only one)  
 11a  11b  11c  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. 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 **520.00**

Date of Receipt  
**12 / 29 / 2023**  
 Amount of Each Receipt this Period  
**280.00**  
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. 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 **939.56**

Date of Receipt  
**12 / 29 / 2023**  
 Amount of Each Receipt this Period  
**510.44**  
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. 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) **SVP, TAX & TREAS. OPS.**  
 Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date **1295.95**

Date of Receipt  
**12 / 29 / 2023**  
 Amount of Each Receipt this Period  
**713.44**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **1,503.88**  
**TOTAL** This Period (last page this line number only).....

2024-01-24 03:00:58 PM

**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 15  
 (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  
**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) **DIR., EVENT SERVICES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **41228**

Date of Receipt  
**12 / 29 / 2023**

Amount of Each Receipt this Period  
**224.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**FIORAVANTI, 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 & CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **9995.2**

Date of Receipt  
**12 / 29 / 2023**

Amount of Each Receipt this Period  
**538.44**

Memo Item

C. 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) **DIR., SAFETY & SECURITY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
**12 / 29 / 2023**

Amount of Each Receipt this Period  
**280.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ **1042.44**

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

2024-01-24-03-00458732

**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 15	
	<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  
**HANTON, JEFF**

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) **MGR. CORP. ACCTG.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**29606**

Date of Receipt  
**12 / 29 / 2023**

Amount of Each Receipt this Period  
**161.00**

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 & CFO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5200.0**

Date of Receipt  
**12 / 29 / 2023**

Amount of Each Receipt this Period  
**280.00**

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 ▼  
**520.00**

Date of Receipt  
**12 / 29 / 2023**

Amount of Each Receipt this Period  
**280.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ **721.00**

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

2025-01-11 09:48:00 AM



**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 15

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)

**RYMAN HOSPITALITY PROPERTIES**

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

**A. MCBRIDE, MICHAEL**

Mailing Address

**ONE GAYLORD DRIVE**

City

**NASHVILLE**

State

**TN**

Zip Code

**37214**

FEC ID number of contributing federal political committee.

**C**

Date of Receipt

**12 / 29 / 2023**

Amount of Each Receipt this Period

**14000**

Memo Item

Name of Employer (for Individual)

**RYMAN HOSPITALITY PROPERTIES SVP ASSET MGT.**

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**26000**

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

**B. NAPIER, CRAIG**

Mailing Address

**ONE GAYLORD DRIVE**

City

**NASHVILLE**

State

**TN**

Zip Code

**37214**

FEC ID number of contributing federal political committee.

**C**

Date of Receipt

**12 / 29 / 2023**

Amount of Each Receipt this Period

**30660**

Memo Item

Name of Employer (for Individual)

**RYMAN HOSPITALITY PROPERTIES SR. DIR., COMPLIANCE**

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**56436**

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

**C. REED, COLIN**

Mailing Address

**ONE GAYLORD DRIVE**

City

**NASHVILLE**

State

**TN**

Zip Code

**37214**

FEC ID number of contributing federal political committee.

**C**

Date of Receipt

**12 / 29 / 2023**

Amount of Each Receipt this Period

**269220**

Memo Item

Name of Employer (for Individual)

**RYMAN HOSPITALITY PROPERTIES EXECUTIVE CHAIRMAN**

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

**499980**

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

**313880**

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

**313880**

2024-01-24-03-00458734

**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 15  
 (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  
**WEIEN, PETER**

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- OEG**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
**12 / 29 / 2023**

Amount of Each Receipt this Period  
**280.00**

Memo Item

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

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

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

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).....▶ **280.00**

**TOTAL** This Period (last page this line number only).....▶ **6,686.12**

2024-01-24 03:00:45

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. BANK OF AMERICA**

Mailing Address: **2720 LEBANON PIKE**

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

Purpose of Disbursement: **BANK FEES** Category/Type: **023**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **12 / 29 / 2023**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **815.30**

Memo Item

**B. SEXTON FOR STATE REPRESENTATIVE**

Mailing Address: **186 HOMESTEAD DRIVE**

City: **CROSSVILLE** State: **TN** Zip Code: **38555**

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

Candidate Name: **CAMERON SEXTON**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **TN** District: \_\_\_\_\_

Date of Disbursement: **09 / 25 / 2023**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **2,500.00**

Memo Item

**C. ANTHONY DAVIS FOR TENNESSEE**

Mailing Address: **320 E. TRINITY LANE**

City: **NASHVILLE** State: **TN** Zip Code: **37207**

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

Candidate Name: **ANTHONY DAVIS**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **TN** District: **51**

Date of Disbursement: **07 / 17 / 2023**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

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

**4,315.30**

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

\_\_\_\_\_

2025-10-10-09:00:00

**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 15		
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**RYMAN HOSPITALITY PROPERTIES PAC**

A. Full Name (Last, First, Middle Initial)  
**FRIENDS OF BURKLEY ALLEN**

Date of Disbursement  
MM / DD / YYYY  
**07 / 17 / 2023**

Mailing Address  
**PO BOX 961**

City  
**MADISON** State **TN** Zip Code **37116**

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

Candidate Name  
**BURKLEY ALLEN**

Office Sought:  House  Senate  President  
**METRO NASHVILLE COUNCIL**

Disbursement For:  Primary  General  Other (specify) ▼

State: **TN** District: **AT LARGE**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**1,000.00**

Memo Item

B. Full Name (Last, First, Middle Initial)  
**PULLEY, RUSS**

Date of Disbursement  
MM / DD / YYYY  
**07 / 17 / 2023**

Mailing Address  
**2804 MCNAIRY LANE**

City  
**NASHVILLE** State **TN** Zip Code **37204**

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

Candidate Name  
**RUSS PULLEY**

Office Sought:  House  Senate  President  
**METRO COUNCIL (NASHVILLE)**

Disbursement For:  Primary  General  Other (specify) ▼

State: **TN** District: **AT LARGE**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**1,000.00**

Memo Item

C. Full Name (Last, First, Middle Initial)  
**SUARA, ZULFAT**

Date of Disbursement  
MM / DD / YYYY  
**07 / 17 / 2023**

Mailing Address  
**73 WHITE BRIDGE RD # 103-333**

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

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

Candidate Name  
**ZULFAT SUARA**

Office Sought:  House  Senate  President  
**METRO COUNCIL (NASHVILLE)**

Disbursement For:  Primary  General  Other (specify) ▼

State: **TN** District: **AT LARGE**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**1,000.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **3,000.00**

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

NON 2023 07 17 08 58 7 AM

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. SYRACUSE, JEFF**

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:

**METRO COUNCIL  
(NASHVILLE)**

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: **TN**

District: **ATLARGE**

Date of Disbursement

**07 / 17 / 2023**

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**1,000.00**

Memo Item

Full Name (Last, First, Middle Initial)

**B. GREGG, JEFF**

Mailing Address

**126 PELLROSE DRIVE**

City

**NASHVILLE**

State

**TN**

Zip Code

**37214**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION**

**011**

Candidate Name

**JEFF GREGG**

Category/  
Type

Office Sought:

**METRO COUNCIL  
(NASHVILLE)**

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: **TN**

District: **15**

Date of Disbursement

**07 / 17 / 2023**

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**1,000.00**

Memo Item

Full Name (Last, First, Middle Initial)

**C. YOUNG, ZACH**

Mailing Address

**93 FRENCH ST**

City

**GOODLETTSVILLE**

State

**TN**

Zip Code

**37072**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION**

**011**

Candidate Name

**ZACH YOUNG**

Category/  
Type

Office Sought:

**METRO COUNCIL  
(NASHVILLE)**

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: **TN**

District: **15**

Date of Disbursement

**07 / 17 / 2023**

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**500.00**

Memo Item

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

**2,500.00**

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)

Date of Disbursement

MM / DD / YYYY  
07 / 17 / 2023

A.

**KUPIN JACOB**

Mailing Address

**73 WHITE BRIDGE ROAD #103-353**

City

**NASHVILLE**

State

**TN**

Zip Code

**37205**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION**

**011**

FEC Identification Number

C

Candidate Name

**JACOB KUPIN**

Category/  
Type

Amount of Each Disbursement this Period

500.00

Office Sought:  
**METRO COUNCIL  
(NASHVILLE)**

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **TN**

District: **19**

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2023

B.

**COFFMAN FOR MAYOR**

Mailing Address

**PO Box 472704**

City

**AURORA**

State

**CO**

Zip Code

**80047**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION**

**011**

FEC Identification Number

C

Candidate Name

**MIKE COFFMAN**

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:  
**MAYOR OF  
AURORA**

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CO**

District:

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2024

C.

**LAWSON FOR AURORA CITY COUNCIL**

Mailing Address

**PO Box 460702**

City

**AURORA**

State

**CO**

Zip Code

**80046**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION**

**011**

FEC Identification Number

C

Candidate Name

**ANGELA LAWSON**

Category/  
Type

Amount of Each Disbursement this Period

400.00

Office Sought:  
**CITY COUNCIL  
OF AURORA**

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CO**

District:

Memo Item

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

1900.00

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

1900.00

1104011243000458730

**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 15 OF 15			
<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 checked="" 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) <b>HANCOCK, TONYA</b>			Date of Disbursement MM / DD / YYYY <b>07 / 17 / 2023</b>		
Mailing Address <b>500 MENEES LANE</b>			FEC Identification Number <b>C</b>		
City <b>MADISON</b>	State <b>TN</b>	Zip Code <b>37115</b>	Amount of Each Disbursement this Period <b>500.00</b>		
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>			Category/Type <b>011</b>		
Candidate Name <b>TONYA HANCOCK</b>			Memo Item <input type="checkbox"/>		
Office Sought: <b>METRO COUNCIL (NASHVILLE)</b>	House <input type="checkbox"/>	Senate <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>TN</b>	District: <b>9</b>				

Full Name (Last, First, Middle Initial) <b>FRIENDS OF JASPER HENRICKS</b>			Date of Disbursement MM / DD / YYYY <b>07 / 17 / 2023</b>		
Mailing Address <b>908 DIVISION ST., STE 1414</b>			FEC Identification Number <b>C</b>		
City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37203</b>	Amount of Each Disbursement this Period <b>500.00</b>		
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>			Category/Type <b>011</b>		
Candidate Name <b>JASPER HENRICKS</b>			Memo Item <input type="checkbox"/>		
Office Sought: <b>METRO COUNCIL (NASHVILLE)</b>	House <input type="checkbox"/>	Senate <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>TN</b>	District: <b>19</b>				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]		
Mailing Address			FEC Identification Number <b>C</b>		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement			Category/Type		
Candidate Name			Memo Item <input type="checkbox"/>		
Office Sought:	House	Senate	Disbursement For:		
State:	President		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
District:					

SUBTOTAL of Disbursements This Page (optional).....▶	<b>100.00</b>
TOTAL This Period (last page this line number only).....▶	<b>127153.0</b>

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CAD: 256173235/NET4700

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BILL SENDER

NASHVILLE, TN 37214  
UNITED STATES US

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**FEDERAL ELECTION COMMISSION**  
**1050 FIRST STREET, NE**

**WASHINGTON DC 20002**

(202) 694-1100

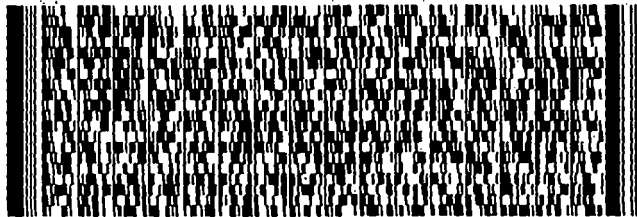
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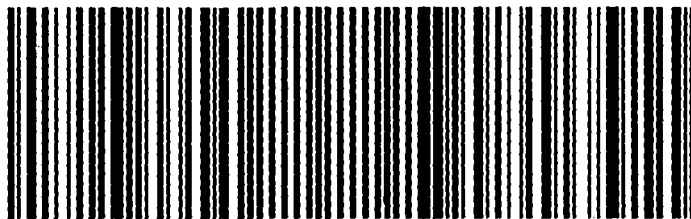
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2 11:00  
7182 01:24





2024 NOV 14 10 11 AM EST

Federal Election Commission  
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 The FEC added this page to the end of this filing to indicate how it was received.

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<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): <div style="margin-left: 20px;"><i>FEDEx</i></div>	Shipping Date <i>1/23/24</i> Date of Receipt <i>1/24/24</i> Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received via FAX	Date of Receipt
<input type="checkbox"/> Received via Email	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<div style="font-size: 2em; font-family: cursive;"><i>WDC</i></div> PREPARER (4/2023)	<div style="font-size: 2em; font-family: cursive;"><i>1/24/24</i></div> DATE PREPARED