



In-State Event Disclosure

Lobbyists and employers of lobbyist are required to report the costs of in-state events permissible under T.C.A. § 3-6-305(b)(8) where the entire membership of the General Assembly is invited. (A copy of the invitation must be delivered to the Tennessee Ethics Commission at least seven (7) days prior to the event.) Disclosure statements of the event costs must be filed within thirty (30) days following the event.

If two (2) or more employers of lobbyists or lobbyists pay for the costs, the costs may be consolidated on one form, provided that specification is made as to the allocation of the costs among the employers or lobbyists. Employers of lobbyists and lobbyists shall remain individually accountable for the timeliness and accuracy of the consolidated form. In-state event disclosures will be posted on the Commission's website.

If two (2) or more employers of lobbyists or lobbyists pay for the costs, each **must** sign the disclosure. *If the disclosure is not accurate or completed in its entirety, it will be returned for correction.*

You may mail the disclosure to the Bureau of Ethics & Campaign Finance, 404 James Robertson Parkway, Suite 104, Nashville, TN 37243, or email to emily.alexander@tn.gov.

1. List each employer of lobbyist and/or each lobbyist who contributed to sponsorship of the event (attached additional pages as necessary).

National Association of Mutual Insurance Companies; American Property Casualty Insurance Assoc.; State Farm Mutual Auto Ins Co; Tennessee Farmers Insurance Co.; Nationwide General Ins. Co Assoc. of TN Life Insurance Companies (ATLIC); Independent Insurance Agents of Tn, Inc.

2. Date of event

February 4, 2020

3. Description of event

insurance industry legislative reception

4. Total aggregate cost paid for the event

19,874

5. Per person contractual cost for the event based on the number of persons invited (excluding sales tax and gratuity)

\$39.40

6. List the names, person submitting report, and allocation of costs for each employer of lobbyist or lobbyist who contributed to the cost of the event. (Attach additional pages as needed.)

| Name of Employer or Lobbyist | Person Submitting Report | Employer or Lobbyist Cost |
|--|--------------------------|---------------------------|
| National Assoc. of Mutual Ins. Cos. | Liz Reynolds | \$2,839.17 |
| American Property Casualty Ins. Assoc. | Mandy Young | \$2,839.17 |
| State Farm Mutual Auto Ins. Co | Scott White | \$2,839.17 |
| Tennessee Farmers Ins. Co. | Ben Sanders | \$2,839.17 |
| Nationwide General Ins. Co. | Robert L. McCutchan | \$2,839.17 |

TOTAL COST OF EVENT: 19,874.20

7. To be signed by each employer of lobbyist or lobbyist contributing to event

I certify that the information contained in this disclosure is true and that it is a complete and accurate report was required by TCA § 3-6-305(b)(8).

| | | |
|---------------------|--|-------------|
| Liz Reynolds | DocuSigned by: <i>Liz Reynolds</i> <small>1CA7E8E32040407...</small> | 2/18/2020 |
| Print Name | Signature | Date |
| Mandy Young | DocuSigned by: <i>Mandy Young</i> <small>855F98B7908D4FA...</small> | 2/18/2020 |
| Print Name | Signature | Date |
| Scott White | DocuSigned by: <i>Scott White</i> <small>DE18070428684F8...</small> | 2/18/2020 |
| Print Name | Signature | Date |
| Ben Sanders | DocuSigned by: <i>Ben Sanders</i> <small>0C2943B76C38421...</small> | 2/18/2020 |
| Print Name | Signature | Date |
| Robert L. McCutchan | DocuSigned by: <i>Robert L. McCutchan</i> <small>79E244351B3014E7...</small> | 2/21/2020 |
| Print Name | Signature | Date |

6. List the names, person submitting report, and allocation of costs for each employer of lobbyist or lobbyist who contributed to the cost of the event. (Attach additional pages as needed.)

| Name of Employer or Lobbyist | Person Submitting Report | Employer or Lobbyist Cost |
|--|--------------------------|---------------------------|
| Assoc of TN Life Insurance Cos (ATLIC) | Dick Williams | \$2,839.17 |
| Independent Insurance Agents of Tn, Inc. | Jim Layman | \$2,839.17 |
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TOTAL COST OF EVENT: 19,874.20

7. To be signed by each employer of lobbyist or lobbyist contributing to event

I certify that the information contained in this disclosure is true and that it is a complete and accurate report was required by TCA § 3-6-305(b)(8).

| | | |
|-------------------|---|-------------|
| Dick Williams | DocuSigned by: <i>Dick Williams</i> <small>561D4604590C41E...</small> | 2/18/2020 |
| Print Name | Signature | Date |
| Jim Layman | DocuSigned by: <i>Jim Layman</i> <small>5C44DC7AF932415...</small> | 2/18/2020 |
| Print Name | Signature | Date |
| Print Name | Signature | Date |
| Print Name | Signature | Date |
| Print Name | Signature | Date |