

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 <u>must</u> 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, WRS Tennessee Tower, 26th Floor, 312 Rosa L. Parks Avenue, 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).

Tennessee Bar Association

2. Date of event

March 19, 2025

3. Description of event

"Big Shrimp" Reception

4. Total aggregate cost paid for the event

\$22,747.77

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

\$1.15 - based on 14,049 people invited

Name of Employ or Lobbyist	ver Person Su Repo	2
Tennessee Bar Associa	Employer	\$22,747.77
	TOTAL COST	Γ OF EVENT: \$22,747.77
I certify that the inform	<u>th</u> employer of lobbyist or lobbyist contained in this disclosure ired by TCA § 3-6-305(b)(8).	contributing to event is true and that it is a complete an
Sheree Wright	Sheree Wright Signature	04/18/25
Print Name	Signature	Date
Print Name	Signature	Date
	Signature Signature	Date Date
Print Name Print Name Print Name		