



## 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, WRS Tennessee Tower, 2nd Floor, 312 Rosa L. Parks Avenue, Nashville, TN 37243, or email to [Mackenzie.Uselton@tn.gov](mailto:Mackenzie.Uselton@tn.gov).

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

Tennessee Health Care Association

2. **Date of event**

03/18/2026

3. **Description of event**

Legislative Reception for conference attendees and legislators.

4. **Total aggregate cost paid for the event**

\$10,983.66

5. **Per person contractual cost for the event based on the number of persons invited (excluding sales tax and gratuity \$36.61**

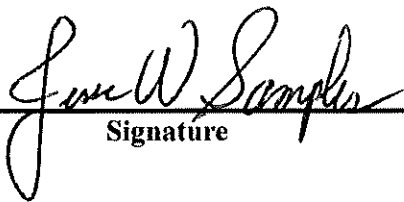
6. List the names, person submitting report, and allocation of costs for each employer of lobbyist or lobbyist who contributed to the cost of the event. (Attach additional pages as needed.)

Name of Employer or Lobbyist	Person Submitting Report	Employer or Lobbyist Cost
Tennessee Health Care Association	Jesse Samples	\$10,983.66

TOTAL COST OF EVENT: \$10,983.66

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).

Jesse Samples		04/06/2026
Print Name	Signature	Date
Print Name	Signature	Date
Print Name	Signature	Date
Print Name	Signature	Date
Print Name	Signature	Date





## Receipt

# Thank you for your order

Order Number: 4477611

## Shipping & Delivery

### Shipping Address

Jen Talbert  
Tennessee Health Care Association  
5120 Virginia Way  
Suite A21  
Brentwood, TN, 37027  
615-834-6520

### Delivery Method

Ground  
(2-5 Days)  
Event Date: 02/12/2024

### Contact Information

jtalbert@thca.org

## Payment

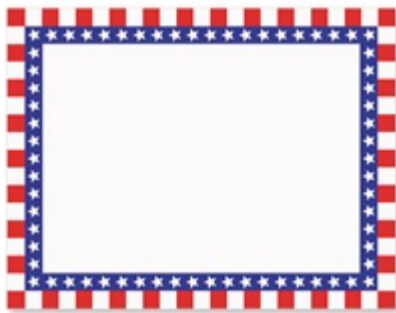
### Billing Address

Jen Talbert  
Tennessee Health Care Association  
5120 Virginia Way  
Suite A21  
Brentwood, TN, 37027  
615-834-6520

### Payment Method

Credit Card  
MasterCard - ending in 5939

## Cart Review



Star Spangled Postcards

\$27.99 each

Qty: 3



Solid Color Crescent Envelopes

\$18.99 each

Qty: 5





Plain Foil Embossing Certificate Seals

\$19.49 each

Qty: 2



The following promotions have been applied to your order:

10% off \$99+

Subtotal	<b>\$217.90</b>
Your Savings	-\$21.79
Shipping	\$42.48
Tax	\$23.26
<b>Order Total</b>	<b>\$261.85</b>

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 1-800-272-7377

[Privacy Policy](#)



**DoubleTree by Hilton Nashville Downtown**  
 315 Fourth Avenue North, Nashville, TN 37219  
 Phone: (615) 747-4800

BEO/Check #: 6265

Group Catering

**Banquet Check**

Page 1 of 1  
 Date Printed: 4/06/2026

<b>Post As:</b>	THCA 2026	<b>Event Date:</b>	Wednesday, March 18, 2026
<b>Account:</b>	Tennessee Health Care Association THCA	<b>Contact:</b>	Darius McDonald
<b>Address:</b>	5120 Virginia Way Suite A 21 Brentwood, TN 37027	<b>Phone:</b>	(615) 346-7108
		<b>Email:</b>	dmcDonald@thca.org
		<b>Onsite Contact:</b>	Darius McDonald
		<b>Onsite Phone:</b>	
<b>Master Account #:</b>	H1215	<b>Catering Manager:</b>	Makenna Doud
<b>Payment Method:</b>	Direct Bill	<b>Booked By:</b>	Debbie Wright

Event Time	Event Name	Room	Agr	Gtd
5:30 PM - 7:30 PM	Reception	Salon C/D/E	200	200

<b>Food</b>				
Quantity	Item	Price	Amount	
200	PASSED - Jumbo Shrimp	\$8.00	\$1,600.00	
200	PASSED -Vegetable Spring Roll	\$6.00	\$1,200.00	
200	PASSED - Beef Wellington	\$8.00	\$1,600.00	
100	STATION -The Cheese Board and Charcuterie Station	\$26.00	\$2,600.00	
<b>Subtotal:</b>			<b>\$7,000.00</b>	
<b>Service Charge 26.00%:</b>			\$1,820.00	
<b>State Tax 10.25%:</b>			\$904.05	
<b>Food Total:</b>			<b>\$9,724.05</b>	

<b>Additional Items</b>				
Quantity	Item	Price	Amount	
2	Bartender Fee	\$150.00	\$300.00	
3	Passing Fee	\$150.00	\$450.00	
<b>Subtotal:</b>			<b>\$750.00</b>	
<b>Service Charge 26.00%:</b>			\$195.00	
<b>State Tax 10.25%:</b>			\$96.87	
<b>Additional Items Total:</b>			<b>\$1,041.87</b>	

	<b>Check Subtotal</b>	<b>\$7,750.00</b>
	<b>Total Service Charges</b>	\$2,015.00
	<b>Total Taxes</b>	\$1,000.92
	<b>Check Grand Total</b>	<b>\$10,765.92</b>



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<b>Address:</b>	5120 Virginia Way Suite A 21 Brentwood, TN 37027	<b>Phone:</b>	(615) 346-7108
		<b>Email:</b>	dmcdonald@thca.org
		<b>Onsite Contact:</b>	Darius McDonald
		<b>Onsite Phone:</b>	
<b>Master Account #:</b>	H1215	<b>Catering Manager:</b>	Makenna Doud
<b>Payment Method:</b>	Direct Bill	<b>Booked By:</b>	Debbie Wright

Event Time	Event Name	Room	Agr	Gtd
5:30 PM - 7:30 PM	Reception Drinks	Salon C/D/E	200	200

<b>Beverage</b>				
Quantity	Item	Price	Amount	
0	House Seasonal Specialty Cocktails	\$13.00	\$0.00	
135	House Cocktails	\$11.00	\$1,485.00	
45	House Wine	\$11.00	\$495.00	
40	Seasonal Fruit Sangria	\$12.00	\$480.00	
0	Seasonal Specialty Mocktails	\$9.00	\$0.00	
6	Imported Beer	\$8.00	\$48.00	
18	Domestic Beer	\$7.00	\$126.00	
6	Soft Drinks	\$6.00	\$36.00	
14	Bottled Spring Water	\$5.00	\$70.00	
0	Hosted Bar - House Brands	\$0.00	\$0.00	
<b>Subtotal:</b>			<b>\$2,740.00</b>	
<b>Service Charge 26.00%:</b>			\$712.40	
<b>State Tax 10.25%:</b>			\$353.87	
<b>Wine and Liquor Tax 15.00%:</b>			\$369.00	
<b>Beverage Total:</b>			<b>\$4,175.27</b>	

<b>Check Subtotal</b>	<b>\$2,740.00</b>
<b>Total Service Charges</b>	\$712.40
<b>Total Taxes</b>	\$722.87
<b>Check Grand Total</b>	<b>\$4,175.27</b>