

SPONSOR POST-TRAVEL DISCLOSURE FORM

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This form must be completed by an officer of any organization that served as the primary trip sponsor in providing travel expenses or reimbursement for travel expenses to House Members, officers, or employees under House Rule 25, clause 5. A completed copy of the form must be provided to each House Member, officer, or employee who participated in the trip within 10 days of their return. You must answer all questions, and check all boxes, on this form for your submission to comply with House Rules and the Committee's Travel Regulations. Failure to comply with this requirement may result in the denial of future requests to sponsor trips and/or subject the current traveler to disciplinary action or a requirement to repay the trip expenses.

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001.

Sponsor(s) who paid or provided in-kind support for the trip: 2. Travel Destination(s): Date of Departure:_______Date of Return: 3. Name(s) of Traveler(s): *Note:* You may list more than one traveler on a form only if *all* information is *identical* for each person listed. **Actual amount** of expenses paid on behalf of, or reimbursed to, each individual named in Question 4: Total **Lodging** Total **Other** Expenses Total **Transportation** Total **Meal** Expenses Expenses (dollar amount per item Expenses and description) Traveler Accompanying Family Member All expenses connected to the trip were for actual costs incurred and not a *per diem* or lump sum payment. Signify statement is true by checking box. I certify that the information contained in this form is true, complete, and correct to the best of my knowledge. Signature: Date: Name: ______ Title:

Committee staff may contact the above-named individual if additional information is required.

Organization:

Address:

☐ I am an officer of the above-named organization. Signify statement is true by checking box.

If you have questions regarding your completion of this form, please contact the Committee on Ethics at 202-225-7103.

Telephone: Email: _____