Member / Officer Post-Travel Disclosure Form

Original Amendment

This form is for disclosing the receipt of travel expenses from a private source for travel taken in connection with a Member or officer's official duties. This form does not eliminate the need to report privately-funded travel on the Member or officer's annual Financial Disclosure Statement. In accordance with House Rule 25, clause 5, you must complete

Nai	me of Traveler: Ted Budd					
	Name of Accompanying Relative: Child					
	Dates: Departure: May 10th, 2019 Return: May 12th, 2019					
	Dates at Personal Expense, if any:	OR None				
	parture City: Washington, DC Destination: Boston, MA Return City: Char	OK None				
	onsor(s), Who Paid for the Trip: The Aspen Institute					
	Describe Meetings and Events Attended (attach additional pages if necessary): (See attached)					
1500	serioe meetings and Events Attended (attach additional pages if necessary).					
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-						
Att	ached to this form are each of the following, signify that each item is attached by checking the corre	esponding box:				
	a completed Sponsor Post-Travel Disclosure Form;	20				
b. 🖸	the Primary Trip Sponsor Form completed by the trip sponsor prior to the trip, including at the Grantmaking or Non-Grantmaking Sponsor Forms;	tachments and				
c. [page 2 of the completed <i>Traveler Form</i> submitted by the Member or officer; and	VE RE				
d. 🛭	the letter from the Committee on Ethics approving my participation on this trip.	B F				
	represent that I participated in each of the activities reflected in the attached sponsor's agencia.					
a. I		မ္ ဗို				
	Signify statement is true by checking the box: 🗹	m				
S		RESOURCE CENTER 18 PM 3: 42				
S	Signify statement is true by checking the box:	DENTER 42				
S	Signify statement is true by checking the box:	CENTER 42				
b. In	f not, explain:	. 51				
b. In	f not, explain: y that the information contained in this form is true, complete, and correct to the best of my kn ined that all of the expenses on the attached Sponsor Post-Travel Disclosure Form were necessary as	owledge. I hav				
b. Interest of the second seco	f not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: The statement is true by checking the box: If not, explain: If n	owledge. I hav				
b. Interest of the second seco	f not, explain: y that the information contained in this form is true, complete, and correct to the best of my kn ined that all of the expenses on the attached Sponsor Post-Travel Disclosure Form were necessary as	owledge. I hav				

Sponsor Post-Travel Disclos

sure Form	Original	Amendment
he primary trip spo	onsor in providing	travel expenses

This form must be completed by an officer of any organization that served as t 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 on the trip within ten 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

Co	mmittee's travel regul	lations. Failure to comply	with this requirement m	nay result in the denial of fut	y with House rules and the ure 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.									
1.	Sponsor(s) who paid for the trip: The Aspen Institute, Inc. (Congressional Program)								
2.	Travel Destination(s): Boston, Mass.								
3.	Date of Departure	Date of Departure: May 10, 2019 Date of Return: May 12, 2019							
4.	Name(s) of Travele	er(s): Rep. Ted Budd							
	Note: You may list	more than one traveler	on a form only if <i>all</i> ir	nformation is identical for	each person listed				
5.	Actual amount of	expenses paid on behalf	of, or reimbursed to,	each individual named in	Question 4:				
		Total Transportation	Total Lodging	Total Meal	Total Other Expenses				
		Expenses	Expenses	Expenses	(dollar amount per item and description				
	Traveler Accompanying	\$763	\$786	\$160	\$506 Conference expenses incl. meeting space & AV services				
	Family Member				RESOURCE DE				
6. 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: May 23, 2019									
Nan	Name: Dan Glickman Title: Vice President								
Organization: The Aspen Institute, Inc. (Congressional Program) Executive Director; Congressional Program									
I am an officer of the above-named organization. Signify statement is true by checking box:									
Address: 2300 N Street, NW, Washington, DC 20037									
Telephone: Deputy General Counsel Lisa Jones: 202-736-5859 Email: lisa.jones@aspeninst.org									

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

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