

U.S. House of Representatives
Committee on Ethics

LEGISLATIVE RESOURCE CENTER

EMPLOYEE POST-TRAVEL DISCLOSURE FORM

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This form is for disclosing the receipt of travel expenses from private sources for travel taken in connection with official duties. This form does not eliminate the need to report privately-funded travel on the annual Financial Disclosure Statements of those employees required to file them. In accordance with House Rule 25, clause 5, **you must complete this form and file it with the Clerk of the House, 135 Cannon House Office Building, within 15 days after travel is completed.** Please **do not** file this form with the Committee on Ethics.

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


1. Name of Traveler: Erin O'Quinn
2. a. Name of accompanying relative: _____ *or* None
 b. Relationship to Traveler: Spouse Child Other (specify): _____
3. a. Dates of departure and return: Departure: March 9, 2018 Return: March 11, 2018
 b. Dates at personal expense (if any): _____ *or* None
4. Departure city: Washington DC Destination: Warrenton Return city: Washington DC
5. Sponsor(s) (who paid for the trip): Alliance for Health Policy and The Commonwealth Fund
6. Describe meetings and events attended: Attended panel sessions and speeches from leading experts on health cybersecurity, patient safety, drug pricing, and market stability policy proposals.
7. Attached to this form are EACH of the following (*signify that each item is attached by checking the corresponding box*):
 - a. a completed Sponsor Post-Travel Disclosure Form;
 - b. the Primary Trip Sponsor Form completed by the trip sponsor prior to the trip, including all attachments and Grantmaking or Non-Grantmaking Sponsor Forms;
 - c. page 2 of the completed Traveler Form submitted by the employee; *and*
 - d. the letter from the Committee on Ethics approving my participation on this trip.
8. a. I represent that I participated in each of the activities reflected in the attached sponsor's agenda. (*Signify that statement is true by checking box*):
 b. If not, explain: _____

I certify that the information contained on this form is true, complete, and correct to the best of my knowledge.

SIGNATURE OF TRAVELER:  DATE: 3/23/18

I authorized this travel in advance. I have determined that all of the expenses listed on the attached Sponsor Post-Travel Disclosure form were necessary and that the travel was in connection with the employee's official duties and would not create the appearance that the employee is using public office for private gain.

NAME OF SUPERVISING MEMBER: Ami Bera DATE: 3/23/18

SIGNATURE OF SUPERVISING MEMBER: 



**U.S. House of Representatives
Committee on Ethics**

SPONSOR POST-TRAVEL DISCLOSURE FORM

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 on 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.

1. Sponsor(s) (who paid for the trip): Alliance for Health Policy and The Commonwealth Fund

2. Travel Destination(s): Airlie, 6809 Airlie Road, Warrenton, VA

3. Date of Departure: March 9, 2018 Date of Return: March 11, 2018

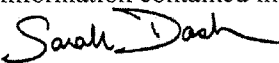
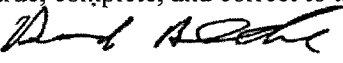
4. Name(s) of Traveler(s): Erin O'Quinn
(NOTE: You may list more than one traveler on a form only if all information is identical for each person listed.)

5. **Actual amount** of expenses paid on behalf of, or reimbursed to, each individual named in response to Question 4:

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses	Other Expenses (dollar amount per item and description)
Traveler	\$51.94	\$188.00	\$170	\$106 facilities use fee and cost of printed materials
Accompanying Relative	NA	NA	NA	NA

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:  

Name: Sarah Dash / David Blumenthal Title: President and CEO / President

Organization: Alliance for Health Policy / The Commonwealth Fund

I am an officer of the above-named organization (signify statement is true by checking box):

Address: 1444 I Street NW, Suite 910, Washington, DC 20005 / 1 East 75th Street, NY, NY, 10021

Telephone number: 202-789-2300 / 212-606-3800

Email Address: sarahdash@allhealthpolicy.org / db@cmwf.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.

U.S. House of Representatives
Committee on Ethics

TRAVELER FORM

1. Name of Traveler: Erin O'Quinn
2. Sponsor(s) (who will be paying for the trip): Alliance for Health Policy
3. Travel destination(s): The Airlie Center, Warrenton, VA
4. a. Date of departure March 9, 2018 Date of return: March 11, 2018
b. Will you be extending the trip at your personal expense? Yes No
If yes, dates at personal expense: _____
5. a. Will you be accompanied by a relative at the sponsor's expense? Yes No
b. If yes:
(1) Name of accompanying relative: _____
(2) Relationship to traveler: Spouse Child Other (specify): _____
(3) Accompanying relative is at least 18 years of age: Yes No
6. a. Did the trip sponsor answer "yes" to Question 9(d) on the Primary Trip Sponsor Form (*i.e.*, travel is sponsored by an entity that employs a registered federal lobbyist or foreign agent and you are requesting lodging for two nights)? Yes No
b. If yes, explain why the second night of lodging is warranted:

7. Primary Trip Sponsor Form is attached, including agenda, invitee list, and any other attachments and contributing sponsor forms: Yes No
NOTE: The agenda should show the traveler's individual schedule, including departure and arrival times and identify the specific events in which the traveler will be participating.
8. Explain why participation in the trip is connected to the traveler's individual official or representational duties. Staff should include their job title and how the activities on the itinerary relate to their duties.
As Deputy Chief of Staff for a physician Member of Congress I serve as the primary advisor for all health policy. This conference provides the opportunity to work with other staff and hear from leaders in the field.
9. Is the traveler aware of any registered federal lobbyists or foreign agents involved in planning, organizing, requesting, and/or arranging the trip? Yes No

10. **FOR STAFF TRAVELERS:**

TO BE COMPLETED BY YOUR EMPLOYING MEMBER:

ADVANCED AUTHORIZATION OF EMPLOYEE TRAVEL

I hereby authorize the individual named above, an employee of the U.S. House of Representatives who works under my direct supervision, to accept expenses for the trip described in this request. I have determined that the above-described travel is in connection with my employee's official duties and that acceptance of these expenses will not create the appearance that the employee is using public office for private gain.

Date: 2/7/18



Signature of Employing Member

**U.S. House of Representatives
Committee on Ethics**

PRIMARY TRIP SPONSOR FORM

This form should be completed by private entities offering to provide travel or reimbursement for travel to House Members, officers, or employees under House Rule 25, clause 5. A completed copy of the form (and any attachments) should be provided to each invited House Member, officer, or employee, who will then forward it to the Committee together with a Traveler Form at least 30 days before the start date of the trip. The trip sponsor should NOT submit the form directly to the Committee. The Committee Web site (ethics.house.gov) provides detailed instructions for filling out the form.

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001. Failure to comply with the Committee's Travel Regulations may also lead to the denial of permission to sponsor future trips.

1. Sponsor (who will be paying for the trip): _____
The Alliance for Health Policy a non-partisan 501(c)3 public charity and The Commonwealth Fund. _____
2. I represent that the trip will not be financed (in whole or in part) by a registered federal lobbyist or foreign agent (signify that the statement is true by checking box):
3. *Check only one:* I represent that:
 - a. the primary trip sponsor has not accepted from any other source funds intended directly or indirectly to finance any aspect of the trip *or*
 - b. the trip is arranged without regard to congressional participation and the primary trip sponsor has accepted funds only from entities that will receive a tangible benefit in exchange for those funds *or*.
 - c. the primary trip sponsor has accepted funds from other source(s) intended directly or indirectly to finance all or part of this trip and has enclosed disclosure forms from each of those entities.
If "c" is checked, list the names of the additional sponsors: _____

4. Provide names and titles of ALL House Members and employees you are inviting. **For each House invitee, provide an explanation of why the individual was invited** (include additional pages if necessary):
(answer attached) _____

5. Is travel being offered to an accompanying relative of the House invitee(s)? Yes No
6. Date of departure: Friday, March 9th 2018 Date of return: Sunday, March 11th 2018
7. a. City of departure: Washington, DC or other dependent upon location of the attendee and Congressional schedule.
b. Destination(s): The Airlie Center, Warrenton, VA
c. City of return: Washington, DC or other dependent upon location of the attendee and Congressional Schedule.
8. I represent that (*check one of the following*):
 - a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the Higher Education Act of 1965: *or*
 - b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: *or*
 - c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance at a one-day event *and* lobbyist/foreign agent involvement in planning, organizing, requesting, or arranging the trip was *de minimis* under the Committee's travel regulations.
9. Check one of the following:
 - a. I checked 8(a) or (b) above:
 - b. I checked 8(c) above but am not offering any lodging:
 - c. I checked 8(c) above and am offering lodging and meals for one night: *or*
 - d. I checked 8(c) above and am offering lodging and meals for two nights:
If "d" is checked, explain why the second night of lodging is warranted: _____

10. Attached is a detailed agenda of the activities the House invitees will be participating in during the travel (i.e., an hourly description of planned activities for trip invitees) (indicate agenda is attached by checking box):

11. Check one:

- a. I represent that a registered federal lobbyist or foreign agent will not accompany House Members or employees on any segment of the trip (signify that the statement is true by checking box): or
- b. N/A – trip sponsor is a U.S. institution of higher education.

12. For each sponsor required to submit a sponsor form, describe the sponsor's interest in the subject matter of the trip and its role in organizing and/or conducting the trip:

(answer attached)

13. Answer parts a and b. Answer part c if necessary.

- a. Mode of travel: Air Rail Bus Car Other (Specify: Member may drive him or herself to the Conference.)
- b. Class of travel: Coach Business First Charter Other (Specify: _____)
- c. If travel will be first class or by chartered or private aircraft, explain why such travel is warranted:
The Alliance will provide a bus or carpooling to reduce travel costs.
-

14. I represent that the expenditures related to local area travel during the trip will be unrelated to personal or recreational activities of the invitee(s). (signify that the statement is true by checking box):

15. I represent that either (check one of the following):

- a. The trip involves an event that is arranged or organized *without regard* to congressional participation and that meals provided to congressional participants are similar to those provided to or purchased by other event attendees: or
- b. The trip involves events that are arranged specifically *with regard* to congressional participation:

If "b" is checked:

- 1) Detail the cost per day of meals (approximate cost may be provided): _____
We estimate the costs will be; Friday, March 9 \$59 Saturday, March 10 \$59 Sunday, March 11 \$52.00
- 2) Provide reason for selecting the location of the event or trip: _____
(Answer attached)
-
-

16. Name, nightly cost, and reasons for selecting each hotel or other lodging facility:

Hotel name: Airlie City: Warrenton, VA Cost per night: \$94.00
Reason(s) for selecting: (See attached reasons from Q15, part B number 2)

Hotel name: _____ City: _____ Cost per night: _____
Reason(s) for selecting: _____

Hotel name: _____ City: _____ Cost per night: _____
Reason(s) for selecting: _____

17. I represent that all expenses connected to the trip will be for actual costs incurred and not a per diem or lump sum payment. (signify that the statement is true by checking box):

18. TOTAL EXPENSES FOR EACH PARTICIPANT:

<input type="checkbox"/> actual amounts <input checked="" type="checkbox"/> good faith estimates	Total <i>Transportation</i> Expenses per Participant	Total <i>Lodging</i> Expenses per Participant	Total <i>Meal</i> Expenses per Participant
For each Member, Officer, or employee	\$26	\$188	\$170.00
For each accompanying relative	\$26	\$0	\$170.00

	<i>Other</i> Expenses (dollar amount per item)	Identify Specific Nature of "Other" Expenses (e.g., taxi, parking, registration fee, etc.)
For each Member, Officer, or employee	\$106.00	(see attached)
For each accompanying relative	\$106.00	(see attached)

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

19. Check one:

- a. I certify that I am an officer of the organization listed below. *or*
- b. N/A – sponsor is an individual or a U.S. institution of higher education.

20. I certify that I am not a registered federal lobbyist or foreign agent for any sponsor of this trip.

21. I certify by my signature that the information contained in this form is true, complete, and correct to the best of my knowledge.

Signature: Sarah Dash David Blumenthal

Name: Sarah J. Dash / David Blumenthal

Title: President and CEO / President

Organization: Alliance for Health Policy / The Commonwealth Fund

Address: 1444 I Street, NW, Suite 910, Washington, DC 20005 / 1 East 75th Street, NY, NY, 10021

Telephone number: 202-789-2300 / 212-606-3800

Email address: sarahdash@allhealthpolicy.org / db@cmwf.org

If there are any questions regarding this form please contact the Committee at the following address:

Committee on Ethics
 U.S. House of Representatives
 1015 Longworth House Office Building
 Washington, DC 20515
 (202) 225-7103 (phone)
 (202) 225-7392 (general fax)

Susan W. Brooks, Indiana
Chairwoman
Theodore E. Deutch, Florida
Ranking Member



Kenny Marchant, Texas
Leonard Lance, New Jersey
Mimi Walters, California
John Ratcliffe, Texas

Yvette D. Clarke, New York
Jared Polis, Colorado
Anthony Brown, Maryland
Steve Cohen, Tennessee

ONE HUNDRED FIFTEENTH CONGRESS

U.S. House of Representatives

COMMITTEE ON ETHICS

March 1, 2018

Thomas A. Rust
Staff Director and Chief Counsel

Donna Herbert
Director of Administration

Megan Savage
*Chief of Staff and Counsel to
the Chairwoman*

Daniel J. Taylor
Counsel to the Ranking Member

1015 Longworth House Office Building
Washington, D.C. 20515-6328
Telephone: (202) 225-7103
Facsimile: (202) 225-7392

Ms. Erin O'Quinn
Office of the Honorable Ami Bera
1431 Longworth House Office Building
Washington, DC 20515

Dear Ms. O'Quinn:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Ethics hereby approves your proposed trip to Warrenton, Virginia, scheduled for March 9 to 11, 2018, sponsored by the Alliance for Health Policy and the Commonwealth Fund.

You must complete an Employee Post-Travel Disclosure Form (which your employing Member must also sign) and file it, together with a Sponsor Post-Travel Disclosure Form completed by the trip sponsor, with the Clerk of the House within 15 days after your return from travel. As part of that filing, you are also required to attach a copy of this letter and both the Traveler and Primary Trip Sponsor Forms (including attachments) you previously submitted to the Committee in seeking pre-approval for this trip. If you are required to file an annual Financial Disclosure Statement, you must also report all travel expenses totaling more than \$390 from a single source on the "Travel" schedule of your annual Financial Disclosure Statement covering this calendar year. Finally, Travel Regulation § 404(d) also requires you to keep a copy of all request forms and supporting information provided to the Committee for three subsequent Congresses from the date of travel.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-7103.

Sincerely,

Susan W. Brooks
Chairwoman

Theodore E. Deutch
Ranking Member

SWB/TED:adw

**U.S. House of Representatives
Committee on Ethics**

**PRIMARY TRIP SPONSOR FORM CONTINUED ANSWERS
Provided by Alliance for Health Policy**

4. PROVIDE NAMES AND TITLES OF ALL HOUSE MEMBERS AND EMPLOYEES YOU ARE INVITING. FOR EACH HOUSE INVITEE, PROVIDE AN EXPLANATION OF WHY THE INDIVIDUAL WAS INVITED (INCLUDE ADDITIONAL PAGES IF NECESSARY):

This is the 20th Annual Bipartisan Congressional Health Policy Conference to which members of the House of Representatives and the Senate have been invited and have participated. Staff may accompany their boss if he or she attends. Staff members are not permitted without their member's confirmed attendance. We have attached a list of members and staff invited. For members we have listed their jurisdiction, degree, or interest in learning more about healthcare. Staff are encouraged to join their boss at the conference for the educational opportunity of attending the panel discussions and the access to the speakers throughout the weekend to answer their questions and use as a resource for their legislative work.

12. FOR EACH SPONSOR REQUIRED TO SUBMIT A SPONSOR FORM, DESCRIBE THE SPONSOR'S INTEREST IN THE SUBJECT MATTER OF THE TRIP AND ITS ROLE IN ORGANIZING AND/OR CONDUCTING THE TRIP:

The Alliance is a non-partisan, 501(c)(3) public charity dedicated to providing governmental leaders with expert analysis and information on current health care-related issues, solutions, legislative proposals and industry conditions. The Alliance has been a resource providing objective, fact-based, unbiased information to members of the Senate/House on both sides of the aisle since its inception in 1991. Through a grant provided by The Commonwealth Fund, a private foundation that supports independent research on health and social issues and makes grants to improve health care practice and policy, the conference provides an opportunity for Representatives and Senators, and their senior health staff, to learn more about timely health policy topics in informal, off-the-record sessions with a select group of health policy experts from a wider variety of perspectives. There is also ample opportunity for interchange among the members of Congress in attendance. The event aims to educate, not to advance any political or ideological position. The Alliance for Health Policy and The Commonwealth Fund jointly formulate the agenda, recruit appropriate speakers, and develop and compile resource materials for conference curriculum. Alliance staff also handles the lodging, travel, and event management for the conference, with input and oversight from The Commonwealth Fund. (www.allhealthpolicy.org)

15. b) 2) PROVIDE REASON FOR SELECTING THE LOCATION OF THE EVENT OR TRIP:

The location was selected because of a need to balance proximity to Capitol Hill in order to accommodate the schedules of Members and staff and achieve our goal of reduced travel costs by allowing for bus or carpooling as the mode of transportation and yet be located outside of the Senate duty station. The Airlie is located in Fauquier County, Virginia. After relocating the annual conference to Virginia in 2016, the Alliance has been searching for a good location in Virginia. In 2017 an extensive venue search that determined that Airlie was a prime location for the conference.

The Alliance for Health Policy, in close collaboration with the Commonwealth Fund, undertook an extensive search in 2017 of properties that met several key criteria:

Location: Located a reasonable driving distance from Washington, D.C. and major airports for the convenience of Members of Congress and participating speakers, yet outside of the Washington, D.C. "duty station" for Members of Congress and their staff. The Airlie is located at 6809 Airlie Road in Warrenton, Virginia, approximately 40-60 minutes from Dulles Airport (depending on traffic), and a 1-2 hour drive from the Capitol, depending on traffic. It is located in Fauquier County, Virginia. Other facilities we considered were either a significant driving distance from the Capitol or not well accessed by affordable or convenient transportation.

Facilities and logistics: Conference facilities and rooming arrangements that can accommodate the conference; criteria include as space that can ensure safety and privacy for the Members, and any other high profile speakers that attend; meeting space and overnight accommodations that are located on the same property so as not to add additional travel time and distract from substantive programming; suitability of conference facilities and A/V capacity; and conference support staff that's suitable for hosting a conference as large and logistically complex as ours.

Cost: Reasonable costs that can meet the conference budget. The Alliance has negotiated the lowest possible food costs at Airlie, selecting the most reasonable food costs on the available menu. These are the market rates for conference facilities that meet all of our criteria.

Timing: preferred date availability to coincide with anticipated congressional availability

After this extensive search in 2017 and a site visit by Alliance and Fund staff, we chose the Airlie center for the site of our 2017 conference. Upon a successful and educational conference for Members in March of 2017, we have decided to use this venue again in 2018 seeing that it fit our criteria of proximity, facilities available, and the ethics committee's rules and recommendations for acceptable accommodations and travel for our Congressional guests.

18. TOTAL EXPENSES OF EACH PARTICIPANT

Other Expenses:

The \$106.00 fee includes the facilities use fee and the cost of the printed materials and packets that all conference attendees receive.