## **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*, B-81 Cannon House Office Building, within 15 days after travel is completed. Please do not file this form with the Committee on Ethics.

NO	TE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001.
1.	Name of Traveler: Thomas Clancy
2.	a. Name of Accompanying Relative: OR None $\square$
	b. Relationship to Traveler: $\square$ Spouse $\square$ Child $\square$ Other (specify):
3.	a. Dates: Departure: 10/9/19 Return: 10/11/19
	b. Dates at Personal Expense, if any:
4.	Departure City: Washington DC Destination: Palm Beach Intl Airpo Return City: Washington DC
5.	Sponsor(s), Who Paid for the Trip: South Florida Agricultural Foundation
6.	Describe Meetings and Events Attended: We met with a variety of local farmers, growers, producers, and all others a
7.	Attached to this form are <b>each</b> of the following, signify that each item is attached by checking the corresponding box:
	a.   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
	the Grantmaking or Non-Grantmaking Sponsor Forms;
	c. Description page 2 of the completed Iraveler Form submitted by the employee; and
0	d. I 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 agendal Signify statement is true by checking the box:
	b. If not application
	b. If not, explain:
I ce	ertify that the information contained on this form is true, complete, and correct to the best of my knowledge.
Sig	nature of Traveler: Date: 10/25/2019
	thorized this travel in advance. I have determined that all of the expenses listed on the attached <i>Sponsor Post-Travel</i> closure Form were necessary and that the travel was in connection with the employee's official duties and would not
	ate the appearance that the employee is using public office for private gain.
No	me of Supervising Member: Rep. Mary Gay Scanlon Date: 10/25/2019
ING	me of supervising Member:
Sig	nature of Supervising Member: Mary Scanlor

#### **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 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 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 for the trip: South Florida Agricultural Foundation, Inc. 2. Travel Destination(s): West Palm Beach, FL; Clewiston, FL (with site visits in Belle Glade, FL) 3. Date of Departure: October 9, 2019 Date of Return: October 11, 2019 4. Name(s) of Traveler(s): Tom Clancy *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 Question 4: Total Transportation **Total Lodging** Total Meal Total Other Expenses Expenses Expenses Expenses (dollar amount per item and description Traveler Airfare, air boat Clewiston & West \$130.14 and bus: Palm Beach: \$394.81 \$199.00 Accompanying Family Member 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. Date: 10/20/2019 Signature: \_ Name: Ardis Hammock \_\_\_\_\_ Title: President Organization: South Florida Agricultural Foundation, Inc. I am an officer of the above-named organization. Signify statement is true by checking box: Address: P. O. Box 1952, West Palm Beach, FL 33402 Telephone: 561-315-0481 Email: cheryl@soflagfoundation.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.

#### **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 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 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: South Florida Agricultural Foundation, Inc. Travel Destination(s): West Palm Beach, FL; Clewiston, FL (with site visits in Belle Glade, FL) 3. Date of Departure: October 9, 2019 Date of Return: October 11, 2019 4. Name(s) of Traveler(s): Tom Clancy 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 Question 4: Total Transportation Total Lodging Total Meal Total Other Expenses Expenses **Expenses** Expenses (dollar amount per item and description Traveler Airfare, air boat Clewiston & West \$130.14 and bus: Palm Beach: \$394.81 \$199.00 Accompanying Family Member 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. \_\_ Date: 10/20/2019 Signature: Name: Ardis Hammock \_\_\_\_\_ Title: President Organization: South Florida Agricultural Foundation, Inc. I am an officer of the above-named organization. Signify statement is true by checking box:  $\square$ Address: P. O. Box 1952, West Palm Beach, FL 33402 Telephone: 561-315-0481 Email: cheryl@soflagfoundation.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.

### **TRAVELER FORM**

1.	Name of Traveler: Thomas Clancy
2.	Sponsor(s) who will be paying for the trip: South Florida Agricultural Foundation
3.	City and State OR Foreign Country of Travel :Palm Beach, FL
4.	a. Date of Departure: 10/09/2019 Date of Return: 10/11/2019
	b. Will you be extending the trip at your personal expense?   Yes   No
	If yes, list dates at personal expense:
5.	a. Will you be accompanied by a family member at the sponsor's expense?   Yes   No If yes:
	(1) Name of Accompanying Family Member:
	(2) Relationship to Traveler:    Spouse    Child    Other (specify):
	(3) Accompanying Family Member is at least 18 years of age:   Yes   No
6.	a. Did the trip sponsor answer "Yes" to Question 8(c) on the <i>Primary Trip Sponsor Form</i> (i.e., travel is sponsored by an entity that employs a registered federal lobbyist or a foreign agent)?   Yes  No
	b. If yes, and you are requesting lodging for two nights, explain why the second night 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.
	Legislative Assistant/Rules Associate for Rep. Scanlon.
	To get a better sense of the role agricultural providers play in determining outcomes regarding to food, energy, and
	Further, to gain a better sense of the American agricultural industry.
9.	Is the traveler aware of any registered federal lobbyists or foreign agents involved planning, organizing, requesting, or arranging the trip?   Yes  No
10	For staff travelers, to be completed by your employing Member:
	ADVANCED AUTHORIZATION OF EMPLOYEE TRAVEL
di tra ap	dereby authorize the individual named above, an employee of the U.S. House of Representatives who works under my rect supervision, to accept expenses for the trip described in this request. I have determined that the above-described evel is in connection with my employee's official duties and that acceptance of these expenses will not create the pearance that the employee is using public office for private gain.
Sig	gnature of Employing Member Mary Vay Scanlon Date 9/5/19

#### **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 website (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: _South Florida Agricultural Foundation
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):
	See attached list
5.	Is travel being offered to an accompanying family member of the House invitee(s)?
6.	Date of Departure: October 9, 2019 Date of Return: October 11, 2019
7.	a. City of departure: Washington, DC
	b. Destination(s): West Palm Beach, FL; Clewiston, FL (with site visits in Belle Glade, FL)
	c. City of return: Washington, DC
8.	Check only one. I represent that:  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 <i>and</i> lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging the trip was <i>de minimis</i> under the Committee's travel regulations.
9.	Check only 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 you checked this box, explain why the second night of lodging is warranted:

10.	Attached is a detailed agenda of the activities House invitees will be participating in during the travel (i.e., an hourly description of planned activities for trip invitees). <i>Indicate agenda is attached by checking box:</i>
11.	Check only one of the following:
	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. Not Applicable. 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:
	The South Florida Agricultural Foundation is the sole sponsor of this staffer trip. It's mission is to provide educational
	stewardship opportunities within the South Florida agricultural industry, including sugarcane, citrus, sweet corn, rice
	celery and other local crops, each stop showcasing an important part of food production in the area.
13	Answer parts a and b. Answer part c if neccessary:
	a. Mode of travel: Air ☑ Rail ☐ Bus ☑ Car ☐ Other ☑ (specify: air boat
	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:
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.	Check only one. I represent that either:
	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): Wed. lunch/dinner \$45.75,
	Thurs. brkfast/lunch/dinner \$61.00, Fri. brkfast/lunch \$35.75
	2) Provide the reason for selecting the location of the event or trip: To provide first hand knowledge and
	experience the inner workings of the South Florida agricultural industry.
16.	Name, nightly cost, and reasons for selecting each hotel or other lodging facility:
	Hotel Name: Roland Martin Marina City: Clewiston Cost Per Night: \$78.00
	Reason(s) for Selecting: Located next to Lake Okeechobee and in the heart of western tour of agricultural operations
	Hotel Name: Marriott West Palm Beach City: West Palm Beach Cost Per Night: \$121.00
	Reason(s) for Selecting: Located near farms and the airport at the eastern end of the tour route
	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
-10 151	payment. Signify that the statement is true by checking box:

18.	Total	<b>Expenses</b>	for each	<b>Participant</b>
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Actual Amounts Good Faith Estimates	Total Transportation	Total Lodging Expenses	Total Meal Expenses
	Expenses per Participant	per Participant	per Participant
For each Member,	Airfare: \$301.65	Marina Clewiston: \$78.00	\$141.50
Officer, or Employee	Ground Trans: \$75.00	Mariott WPB:\$121.00	
For each Accompanying Family Member			

	Other Expenses (dollar amount per item)	Identify Specific Nature of "Other" Expenses (e.g., taxi, parking, registration fee, etc.)
For each Member, Officer, or Employee		
For each Accompanying Family Member		

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

19.	Chec	k onl	y one:

- a. I certify that I am an officer of the organization listed below: OR
- b. Not Applicable. Trip sponsor is an individual or a U.S. institution of higher education.  $\square$
- 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: Ardis Hammock Name: President Title: South Florida Agricultural Foundation, Inc. Organization: \_ P. O. Box 1952, West Palm Beach, FL 33402 Address: 561-315-0481 Telephone: Cheryl@soflagfoundation.org Email:

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, D.C. 20515

Phone: 202-225-7103 General Fax: 202-225-7392

Theodore E. Deutch, Florida Chairman Kenny Marchant, Texas Ranking Member

Grace Meng, New York Susan Wild, Pennsylvania Dean Phillips, Minnesota Anthony Brown, Maryland

John Ratcliffe, Texas George Holding, North Carolina Jackie Walorski, Indiana Michael Guest, Mississippi



# U.S. House of Representatives

COMMITTEE ON ETHICS

Thomas A. Rust Staff Director and Chief Counsel

> David W. Arrojo Counsel to the Chairman

Christopher A. Donesa
Counsel to the Ranking Member

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

October 4, 2019

Mr. Thomas Clancy Office of the Honorable Mary Gay Scanlon 1535 Longworth House Office Building Washington, DC 20515

Dear Mr. Clancy:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Ethics hereby approves your proposed trip to West Palm Beach and Clewiston, Florida, scheduled for October 9 to 11, 2019, sponsored by South Florida Agricultural Foundation, Inc.

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,

Theodore E. Deutch Chairman Kenny Marchant Ranking Member

TED/KM:mso