

COMMITTEE ON ETHICS

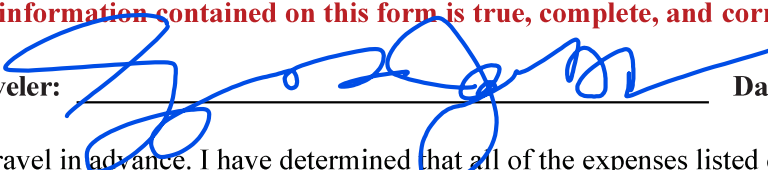
EMPLOYEE POST-TRAVEL DISCLOSURE FORM ☐ Original ☐ Amendment

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 by email at gifttravelreports@mail.house.gov, 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.

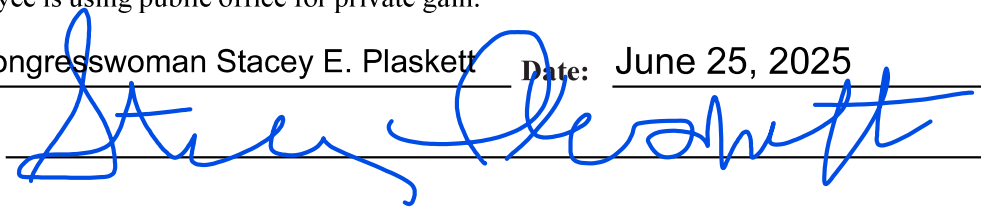
1. Name of Traveler: Angeline Jabber
2. a. Name of Accompanying Relative: _____ **OR** ☒ None
b. Relationship to Traveler: ☐ Spouse ☐ Child ☐ Other (specify): _____
3. a. Dates: Departure: May 27, 2025 Return: May 31, 2025
b. Dates at Personal Expense, if any: _____ **OR** ☒ None
4. Departure City: Washington, DC Destination: Honolulu, Hawaii Return City: Washington, DC
5. Sponsor(s), Who Paid for the Trip: The Third Way Foundation (Progressive Policy Institute is a project of the Third Way Foundation)
6. Describe Meetings and Events Attended: PPI facilitated meetings and dinners on pertinent policy issues in Hawaii, including trade, energy, housing, and national security.
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** the *Additional Sponsor Form(s)*;
 - 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 statement is true by checking the 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: June 25, 2025

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: Congresswoman Stacey E. Plaskett Date: June 25, 2025

Signature of Supervising Member: 

COMMITTEE ON ETHICS

SPONSOR POST-TRAVEL DISCLOSURE FORM

☐ Original ☐ Amendment

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: The Third Way Foundation
(Progressive Policy Institute is a project of the Third Way Foundation)
- Travel Destination(s): Honolulu, Hawaii
- Date of Departure: May 27, 2025 Date of Return: May 31, 2025
- Name(s) of Traveler(s): Angeline Jabber, Iyanla Kollock, Merrilee Rogers, Michael Demakos, Victor Martinez, Chiemi Kamaka
*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 Transportation Expenses	Total Lodging Expenses	Total Meal Expenses	Total Other Expenses (dollar amount per item and description)
Traveler	\$1,480	\$537	\$229	
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.

Signature:  Date: June 6, 2025

Name: Lindsay Lewis Title: CEO

Organization: The Third Way Foundation

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

Address: 1919 M St NW, Suite 300, Washington DC 20036

Telephone: 202 617 4042 Email: llewis@ppionline.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.

COMMITTEE ON ETHICS

TRAVELER FORM

This form should be completed by House Members, officers, or employees seeking Committee approval of privately-sponsored travel or reimbursement for travel under House Rule 25, clause 5. The completed form should be submitted directly to the Committee by each invited House Member, officer, or employee, together with the completed and signed trip sponsor form(s) and any attachments. A copy of this form, minus this initial page, will be made available for public inspection.

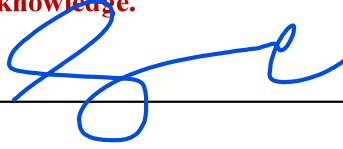
This form and any attachments may be submitted at 1015 Longworth House Office Building or travel.requests@mail.house.gov.

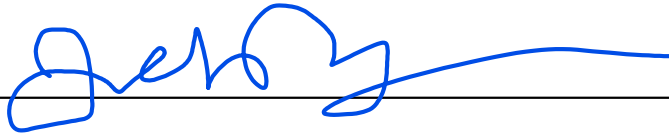
Your completed request must be submitted to the Committee no less than 30 days before your proposed departure date. Absent exceptional circumstances, permission will not be granted for requests received less than 30 days before the trip commences. **You must receive explicit approval from the Committee before you depart on this trip.**

Name of Traveler: Angeline M. Jabbar

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

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

Signature: 



Name of Signatory (if other than traveler): _____

For Staff (name of employing Member or Committee): Congresswoman Stacey E. Plaskett

Office Address: 2059 Rayburn HOB

Telephone Number: (202) 225-1790

Email Address of Contact Person: Angeline.Jabbar@mail.house.gov

☐ Check this box if the sponsoring entity is a media outlet, the purpose of the trip is to make a media appearance sponsored by that entity, and these forms are being submitted to the Committee less than 30 days before the trip departure date.

NOTE: You must complete all of the contact information fields above, as Committee staff may need to contact you if additional information is required.

KEEP A COPY OF THIS FORM. Page 2 (but not this page) must be submitted to the Clerk as part of the post-travel disclosure required by House Rule 25. Travel Regulation § 404(d) also requires you to keep a copy of all request forms and supporting paperwork for three subsequent Congresses from the date of travel.

If there are any questions regarding this form, please contact the Committee on Ethics at 202-225-7103 or via email: travel.requests@mail.house.gov.

COMMITTEE ON ETHICS

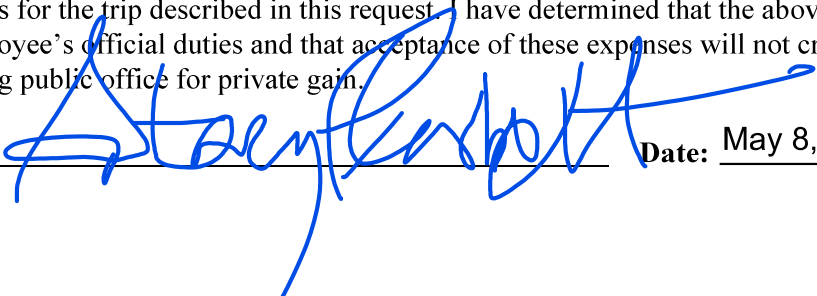
TRAVELER FORM

1. Name of Traveler: Angeline M. Jabbar
2. Sponsor(s) who will be paying or providing in-kind support for the trip: The Third Way Foudation (Progressive Policy Insitute is a project of the
3. City and State **OR** Foreign Country of Travel: Honolulu, Hawaii
4. a. Date of Departure: May 27, 2025 Date of Return: May 31, 2025
b. Yes ☐ No ☒ Will you be extending the trip at your personal expense?
If yes, list dates at personal expense: _____
5. a. Yes ☐ No ☒ Will you be accompanied by a family member at the sponsor's expense? **If yes:**
(1) Name of Accompanying Family Member: _____
(2) Relationship to Traveler: ☐ Spouse ☐ Child ☐ Other(specify): _____
(3) Yes ☐ No ☐ Accompanying Family Member is at least 18 years of age?
6. a. Yes ☐ No ☒ Did the trip sponsor answer "Yes" to Question 8(c) on the *Primary Trip Sponsor Form* (i.e., travel is sponsored by an entity that employs a registered federal lobbyist or a foreign agent)?
b. **If yes**, and you are requesting lodging for two nights, explain why the second night is warranted:

7. Yes ☒ No ☐ *Primary Trip Sponsor Form* is attached, including agenda, invitation, invitee list, and any other attachments and Additional Sponsor Forms.
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.**
I am Chief of Staff for Congresswoman Stacey E. Plaskett who serves on the House Ways and Means Committee. The primary purpose of the trip is to discuss trade and meet with stakeholders in the trade industry.
9. **Yes ☐ No ☒ Is the traveler aware of any registered federal lobbyists or foreign agents involved in planning, organizing, requesting, or arranging the trip?**
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.

Signature of Employing Member: 

Date: May 8, 2025 (edited)