☐ *Original* ☑ *Amendment*

U.S. House of Representatives
111th Congress

LEGISLATIVE RESOURCE CENTER
2009 SEP -8 AM 9:58
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

EMPLOYEE
POST-TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips, or similar events undertaken in connection with official duties. This form does not eliminate the need to report all privately-funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with House Rule 25, clause 5, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within **15 days** after travel is completed. The Clerk is to make the second page of this form publicly available as soon as possible after it is filed.

Name of Traveler (print or type): Laura Berntsen

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

SIGNATURE OF TRAVELER: _____

DATE: 9-8-09

I authorized this travel in advance. I have determined that all of the expenses listed on this 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: Congressman Jim McDermott

SIGNATURE OF SUPERVISING MEMBER: _____

DATE: 9/8/09

Version date 3/2009 by Committee on Standards of Official Conduct

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1. Name of Traveler (print or type): Laura Berntsen

2. a. Name of Accompanying Family Member (if any): n/a

   b. Relationship to Employee: ☐ Spouse ☐ Child ☐ Other (specify): n/a

3. a. Date of Departure and Date of Return: 8/17/2009 - 8/19/2009

   b. Dates at personal expense (if any): n/a

4. Itinerary (cities of departure – destination – return): Washington DC - Los Angeles - Washington DC

5. Sponsor(s) (who paid for the trip): Congressional Coalition on Adoption Institute

6. Describe meetings and events attended (attach additional pages if necessary): Met with LA county officials and local families to discuss foster care initiatives and reforms. See schedule.

7. Attached to this form are EACH of the following (*signify that each item is attached by checking the corresponding box*):
   a. ☑ the Private Sponsor Travel Certification Form completed by the trip sponsor, including all attachments;
   b. ☑ the Traveler Form completed by the employee; ***and***
   c. ☑ the Committee on Standards' letter approving my participation on this trip.

8. a. I represent that I participated in each of the activities reflected in the sponsor's agenda. (*Signify that statement is true by checking box*): ☑
   b. If not, explain: n/a

9. TRAVEL EXPENSES: *Obtain actual dollar amounts from the sponsor. If exact dollar amounts are unavailable by the due date, provide a good faith estimate and file an amended form once the correct amounts are received.*

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses
For employee:	$711.13	$292.04	$204.77
For accompanying family member:	n/a	n/a	n/a

	Other Expenses (dollar amount)	Specific Nature of Expenses (*e.g.*, taxi, parking, registration fee, etc.)
For employee:	$14.34	Refreshment Center
For accompanying family member:	n/a	n/a