| | No V | nild Yes | Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct. | Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or libecause they meet all three tests for exemption? Do not answer "yes" unless you have first Standards of Official Conduct. | |
|----|--|---|---|---|-----|
| | Yes No No | | Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? | Trusts Details regarding "Qualified Blind Trusts" approved by trusts" need not be disclosed. Have you excluded from child? | |
| | | STIONS | INFORMATION ANSWER EACH OF THESE QUESTIONS | EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE | |
| | | | schedule attached for each "Yes" response. | If yes, complete and attach Schedule V. | |
| | propriate | and the ap | ✓ No ☐ Each question in this part must be answered and the appropriate | Did you, your spouse, or a dependent child have any reportable liability (more V. than \$10,000) during the reporting period? | |
| | | | If yes, complete and attach Schedule IX. | If yes, complete and attach Schedule IV. | |
| | No K | outside Yes | Did you have any reportable agreement or arrangement with an outside No IX. entity? | , your spouse, or dependent child purchase, sell, or exchange any ble asset in a transaction exceeding \$1,000 during the reporting Yes | |
| | | ing in the Yes | VIII. current calendar year? If yes, complete and attach Schedule VIII. | Ill. more than \$200 in the reporting period or hold any reportable asset worth γes more than \$1,000 at the end of the period? If yes, complete and attach Schedule III. | |
| | | : ! | If yes, complete and attach Schedule VII. | If yes, complete and attach Schedule II. | 7 |
| | No I | e travel or an \$335 Yes | Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)? | Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period? Yes | |
| | | | If yes, complete and attach Schedule VI. | If yes, complete and attach Schedule I. | 7 |
| | S No | e gift in herwise Yes | Old you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? | Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 Yes | |
| | | | ANSWER EACH OF THESE QUESTIONS | PRELIMINARY INFORMATION - ANSWER EACH OF | l l |
| | า 30 days | more than 30 days late. | Termination Date: | Report Type Annual (May 15) Amendment | |
| | A \$200 penalty shall be assessed against anyone who files | A \$200 penalty st be assessed again | Officer Or Employing Office: | Filer Member of the U.S. State: NY Status Mouse of Representatives District: 10 | |
| हर | [กาก AUS I 0 Pii 4: 53 | Coffice (Office | 202-225-5936 (Daytime Telephone) | Edolphus "Ed" Towns (Full Name) | |
| » | DELIVERED | | T For use by Members, officers, and employees | UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT | |
| | ロハコ | | | | |

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Edolphus "Ed" Towns

spouse or dependent child that is totally independent of his or her relationship to you. the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the

| Source | Date(s) | Point of Departure | Lodging | Food? | Was a Family ? Food? Member Included? | Days not at sponsor's expense |
|---|------------|-------------------------------|----------|-------|---------------------------------------|-------------------------------|
| Source | Date(s) | DestinationPoint of Return | | (Y/N) | (Y/N) | expense |
| CBC Political and Leadership Institute | Aug. 13-16 | Aug. 13-16 NY-Memphis, TN, NY | Y | ~ | Y | 3 Days |
| Council on Social Work Education | Nov. 8-9 | NY-San Antonio, TX, Newark, Y | ~ | Z | Z | 1 Day |
| | | | | | | |

| 7010 JUL | 14 | 41 | 9: | 26 |
|----------|----|----|----|----|
|----------|----|----|----|----|

| 1 | Original | Amendment |
|---|----------|---------------|
| V | Original | Amendment |

.....IVES

U.S. House of Representatives 111th Congress

MEMBER / OFFICER POST-TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from a private source for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately-funded travel on the Member or officer's annual Financial Disclosure Statement. In accordance with clause 5 of House Rule 25, 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 these forms available to the public as soon as possible after they are received.

| a. Name of Accompanying Family Member (if any): |
|--|
| b. Relationship to Member/Officer: Spouse Child Other (specify): |
| a. Date of Departure and Date of Return: November 8, 2009-November 9, 2009 |
| b. Dates at personal expense (if any): |
| Itinerary (cities of departure – destination – return): |
| New York-San Antonio-Newark |
| Sponsor(s) (who paid for the trip): Council on Social Work Education |
| Describe meetings and events attended (attach additional pages if necessary): The purpose of the trip was to deliver a lecture to Social Work Educators at the CSWE annual meeting |
| 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 trip sponsor, including all attachments; |
| b. the Traveler Form completed by the Member or officer; and |
| the Committee on Standards' letter approving my participation on this trip. |
| I represent that I participated in each of the activities reflected in the sponsor's agenda. (Signify that statement is true by checking box): If not, explain: |
| 1 to 2 |

9. **TRIP 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.

| gregoria de escolutiva Paris, a 19-sen destinon de que sua escola política del condicional de escola de es | Total Transportation Expenses | Total Lodging Expenses | Total Meal Expenses |
|--|----------------------------------|------------------------|---------------------------|
| For Member or Officer: | 921.00 | 629.00 | included in hotel expense |
| For accompanying family member: | | | |

| CALIFORNIA A PARAMETER NEW ALTO THE THE STREET STREET ASSESSED AND STREET STREET STREET STREET STREET STREET S | Other Expenses (dollar amount) | Specific Nature of Expenses (e.g., taxi, parking, registration fee, etc.) |
|--|--|---|
| For Member or Officer: | ументе в Сонтта и об е рекрупително вышений в повыше име з в городина выпочений в городина в почений в городина в почений в городина в городин | |
| For accompanying family member: | C Martine de Carlos de La Arresse de America de América de La América de America de Amer | |

I certify that the information contained in this form is true, complete, and correct to the best of my knowledge. I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public officer for private gain.

SIGNATURE OF MEMBER:

| DATE: | |
|-------|--|
|-------|--|

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

PRIVATE SPONSOR TRAVEL CERTIFICATION FORM (provide directly to each House invitee)

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. The trip sponsor should NOT submit the form directly to the Committee. You must answer every question on the form.

| | Sponsor(s) (who will be paying for the trip): Council on Social Work Education |
|-----|---|
| 2. | I represent that the trip will not be financed (in whole or in part) by a federally-registered lobbyist or a registered foreign agent (Signify that the statement is true by checking box): |
| 3. | I represent that the trip sponsor(s) has not accepted from any other source funds earmarked directly or indirectly to finance any aspect of the trip (Signify that the statement is true by checking box): |
| 4. | Is travel being offered to an accompanying family member of the House invitee(s)? Yes Yo |
| 5. | Provide names and titles of ALL House invitees; for each invitee, provide explanation of why, the individual was invited (include additional pages if necessary): Representative Fd Towns has been invited to deliver the Carl A. Scott Memorial Lecture |
| 6. | Dates of travel: Narmber 8-9, 2009 |
| 7. | Cities of departure - destination - return: San Diego -> Jan Antonio Newark |
| 8. | Attached is a detailed agenda of the activities taking place during the travel (i.e., an hourly description of planned activities) (Signify "yes" by checking box): |
| 9. | 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. |
| 10. | If travel is for participation in a one-day event (i.e., if you checked Question 9(c)), check one of the following: |
| | a. N/A – I checked 9(a) or (b) above: |
| | b. One-night's lodging and meals are being offered: <u>v</u> or |
| | c. Two-nights' lodging and meals are being offered: If "c" is checked, explain why the second night is warranted: |
| | |

| 1 | Check one: a. I represent that a federally-registered 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): Δor |
| : | b. N/A – trip sponsor is an institution of higher education. |
| | Private sponsors must have a direct and immediate relationship to the purpose of the trip or location being visited. Describe the purpose of the trip and the role of each sponsor in organizing and conducting the trip: The purpose of the trip is to deliver a Victure to so year. So year work relations atknowing our Annual Program. Meeting. |
| 13. (| a. Describe the mode of travel (air, rail, bus, etc.). For air travel, also indicate the type of aircraft (commercial, charter, or privately owned) and class of travel (coach, business class, first class, etc.): Commercial |
| 1 | o. If travel will be first class or by chartered or private aircraft, provide an explanation describing why such travel is warranted: |
| 1 | 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): |
| | represent that either (check one of the following): |
| | |
| l | 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 |
| | that meals provided to congressional participants are similar to those provided to or purchased by other event attendees: or The trip involves events that are arranged specifically with regard to congressional participation: |
| 6. I | 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 |
| 16. I 2 17. 1 | 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 or organized with regard to congressional participation: If "b" is checked, detail the cost per day of meals (approximate cost may be provided): Reason for selecting the location of the event or trip: San Antonio of the site for the same of |
| 6. I 2 17. 1 | 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 or organized with regard to those provided to or purchased by other event attendees: or or organized with regard to congressional participation: If "b" is checked, detail the cost per day of meals (approximate cost may be provided): Reason for selecting the location of the event or trip: San Antonio is the signed in 2006. Name of hotel or other lodging facility: Grand Hyatt San Antonio |
| 16. I 2 17. 1 18. 0 | 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 or organized with regard to those provided to or purchased by other event attendees: or or organized with regard to congressional participation: If "b" is checked, detail the cost per day of meals (approximate cost may be provided): Reason for selecting the location of the event or trip: San Antonio is the site for the compact of the same of hotel or other lodging facility: Grand Hyatt San Antonio Name of hotel or other lodging facility: Grand Hyatt San Antonio |
| 16. I 2 17. I 18. (| 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 othe event attendees: or a similar to those provided to or purchased by othe event attendees: or a similar to those provided to or purchased by othe event attendees: or a similar to those provided to or purchased by othe event attendees: or a similar to those provided to or purchased by othe event attendees: or a similar to those provided to or purchased by othe event attendees: or a similar to those provided to or purchased by othe event attendees: or a similar to those provided by othe eve |

20. TOTAL EXPENSES FOR EACH PARTICIPANT:

| actual amounts good faith estimates | Total <i>Transportation</i> Expenses per Participant | Total Lodging Expenses per Participant | Total <i>Meal</i> Expenses per Participant |
|--|---|--|---|
| For each Member, Officer, or employee | \$921.00 | \$ 629.00 | ن پرسون در م |
| For each accompanying family member | NA | | |

| , | Other Expenses (dollar amount) | Identify Specific Nature of "Other" Expenses (e.g., taxi, parking, registration fee, etc.) |
|--|--------------------------------|--|
| For each Member, Officer, or employee | | |
| For each accompanying family member | NA | |

| 21. | I represent the | at all expenses | connected | to the to | ip will | be for | actual | costs | incurred | and no | ot a per | diem | or l | ump |
|-----|-----------------|------------------|------------|-----------|---------|---------|--------|--------------|----------|--------|----------|------|------|-----|
| | sum payment | (signify that th | e statemen | t is true | by che | cking b | ox): 🖫 | and the same | | | | | | |

| 22. | I certify that the information contained in this form is true, complete, and correct to the best of my knowledge. |
|-----|--|
| | Signature: Aulia M. Natterns |
| | Name and title: Julia Watkins, Executive Director |
| | Organization: COUNCIL ON SOCIAL WORK Education |
| | Address: 1725 Duke St, Suite 500, Alexandria, VA 22314 |
| | Telephone number: 703 519. 2068 |
| | Fax number: 703, 739, 9242. |
| | Email Address: Watkins (a) CSNE. org |
| | No. of the second secon |

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

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

Committee on Standards of Official Conduct U.S. House of Representatives HT-2, The Capitol Washington, DC 20515 (202) 225-7103 (phone) (202) 225-7392 (general fax)

Version date 8/2008 by Committee on Standards of Official Conduct

Itinerary Council on Social Work Education Annual Program Meeting San Antonio, TX November 8-9, 2009

Sunday, November 8, 2009

6:25pm

Flight arrives in San Antonio

Hotel:

Grand Hyatt San Antonio 600 East Market Street San Antonio, TX

Monday, November 9, 2009

9:00am - 10:15am

Carl A. Scott Memorial Lecture

3:05pm

Continental Airlines Flight Number CO0761 departs San Antonio

PRIVATELY SPONSORED TRAVEL: TRAVELER FORM For Members, Officers, and Employees

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 Private Sponsor Travel Certification Form and any attachments. A copy of this form, minus this initial page, will be made available for public inspection. Please type form. Form (and any attachments) may be faxed to the Committee at (202) 225-7392.

YOUR COMPLETED REQUEST MUST BE SUBMITTED TO THE COMMITTEE NO LESS THAN 14 DAYS BEFORE YOUR PROPOSED

DEPARTURE DATE. Absent exceptional circumstances, permission will <u>not</u> be granted for requests received less than 14 days before the trip commences.

| Na | me of Traveler: F | Rep. Edolphus Towns | |
|----|--|--|---|
| | I certify that the the best of my k | e information contained on both pages of this form is true, complete, and correct to nowledge. | |
| | Signature: | E Proposition of the second of | |
| | Name of Sig | natory (if other than traveler): | |
| | For staff, nar | ne of employing Member/Committee: | |
| | Office address: | 2232 Rayburn House Office Building | |
| | Phone number: | 202-225-5936 | |
| | Email address of | contact person: sonjiah.davis@mail.house.gov | |
| | media appearanc | the sponsoring entity is a media outlet and the traveler is a Member traveling to make sponsored by that entity and these forms are being submitted to the Committee less ore the trip departure date. | |
| NC | | complete the contact information fields above, as Committee staff may need to if additional information is required. | 0 |

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

Committee on Standards of Official Conduct U.S. House of Representatives HT-2, The Capitol Washington, DC 20515 (202) 225-7103 (phone) (202) 225-7392 (fax)

PRIVATELY SPONSORED TRAVEL: TRAVELER FORM

| 1. | Name of Traveler: Rep. Edolphus Towns |
|----|--|
| 2. | Sponsor(s) (who will be paying for the trip): Council on Social Work Education |
| 3. | Travel destination(s): San Antonio, TX |
| 4. | a. Date of Departure and Date of Return: Sunday, November 8, 2009-Monday, November 9, 2009 |
| | 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 family member at the sponsor's expense? ☐ Yes ☑ No b. If yes, name of accompanying family member: c. Relationship to traveler: ☐ Spouse ☐ Child ☐ Other (specify): |
| 6. | a. Did the trip sponsor answer "yes" to Question 9(c) on the Trip Sponsor form (i.e., the travel is being sponsored by an entity that employs a lobbyist)? Yes No b. If yes, check one of the following: N/A - Sponsor checked 9(a) or 9(b) (1) Approval for one-night's lodging and meals is being requested: or (2) Approval for two-nights' lodging and meals is being requested: If "(2)" is checked, explain why the second night is warranted: |
| 7. | Private Sponsor Travel Certification Form is attached, including agenda, invitee list, and any other attachments (indicate that form is attached by checking box): |
| 8. | Explain why participation in the trip is connected to your individual official or representational duties: will have the opportunity to starse with the conference participants my experience as a Social Worker and legislator and how it is important for Social Workers to become involved in the legislative process to advocate for the clients they serve |
| 9. | FOR STAFF: TO BE COMPLETED BY YOUR EMPLOYING MEMBER: 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: Signature of Employing Member |

NOTE: This page must be submitted with your post-travel disclosure form within 15 days of your return, so you should maintain a photocopy of the completed form for your records.

ZOE LOFGREN, CALIFORNIA CHAIR
SEN CHANDLER, KENTUCKY
G. K. BUTTERFIELD, NORTH CAROLINA KATHY CASTOR, PLORIDA
PETER WELCH, VERMONT
DANIEL J. TAYLOR,
COUNSEL TO THE CHAIR

R. BLAKE CHISAM, CHIEF COUNSEL AND STAFF DIRECTOR ONE HUNDRED ELEVENTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF OFFICIAL CONDUCT

Washington, DC 20515-6328

November 3, 2009

JO BONNER, ALABAMA RANKING REPUBLICAN MEMBER

K. MICHAEL CONAWAY, TEXAS CHARLES W. DENT, PENNSYLVANIA GREGG HARPER, MISSISSIPPI MICHAEL T. McCAUL, TEXAS

TOOD UNGERECHT COUNSEL TO THE KANKING REPUBLICAN MEMBER

SUITE HT-2, THE CAPITOL (202) 225-7103

The Honorable Edolphus Towns U.S. House of Representatives 2232 Rayburn House Office Building Washington, DC 20515

Dear Colleague:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Standards of Official Conduct hereby approves your proposed trip to San Antonio, Texas, scheduled for November 8 to 9, 2009, sponsored by the Council on Social Work Education.

You must complete a Member Travel Disclosure Form and file it with the Clerk of the House within 15 days after your return from travel. As part of that filing, you are required to attach a copy of this letter and both the Private Sponsor Travel Certification Form (including attachments) and Member travel approval form you previously submitted to the Committee. You must also report all travel expenses totaling more than \$335 from a single source on Schedule VII of your annual Financial Disclosure Statement.

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

Sincerely.

e Torkien

Chair

Jo Bonner

Ranking Republican Member

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U.S. House of Representatives 111th Congress

OF THE SERVENCE OF THE SERVENCES

MEMBER / OFFICER POST-TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from a private source for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately-funded travel on the Member or officer's annual Financial Disclosure Statement. In accordance with clause 5 of House Rule 25, 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 these forms available to the public as soon as possible after they are received.

| io i | ne public as soon as possible after they are received. | | | | | |
|------------------|---|--|--|--|--|--|
| 1. | Name of Traveler: Rep. Edolphus Towns | | | | | |
| 2. | a. Name of Accompanying Family Member (if any): Gwendolyn Towns | | | | | |
| | b. Relationship to Member/Officer: Spouse Child Other (specify): | | | | | |
| 3. | a. Date of Departure and Date of Return: August 13, 2009-August 16, 2009 | | | | | |
| | b. Dates at personal expense (if any): | | | | | |
| 4. | Itinerary (cities of departure – destination – return): New York LGA-Memphis, TN-New York, LGA | | | | | |
| 5. | Sponsor(s) (who paid for the trip): The Congressional Black Caucus Political Education and Leadership Institute | | | | | |
| | | | | | | |
| 6. | Describe meetings and events attended (attach additional pages if necessary): see attached | | | | | |
| | Describe meetings and events attended (attach additional pages if necessary): See attached Attached to this form are EACH of the following (signify that each item is attached by checking the corresponding box): | | | | | |
| 6 <i>.</i> 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 trip sponsor, including all | | | | | |
| | Attached to this form are EACH of the following (signify that each item is attached by checking the corresponding box): | | | | | |
| | 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 trip sponsor, including all attachments; | | | | | |

9. TRIP 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.

| A THE RESERVE OF THE PROPERTY | Total Transportation Expenses | Total Lodging Expenses | Total Meal Expenses |
|---|-------------------------------|------------------------|---------------------|
| For Member or Officer: | | \$129.00 | \$75 |
| For accompanying family member: | | | |

| Additional Control of the Control of | Other Expenses (dollar amount) | Specific Nature of Expenses (e.g., taxi, parking, registration fee, etc.) |
|--|--------------------------------|---|
| For Member or Officer: | \$75 | Golf |
| For accompanying family member: | | - |

I certify that the information contained in this form is true, complete, and correct to the best of my knowledge. I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member of Officer of the U.S. House of Representatives and would not create the appearance that I amount public office for private gain.

SIGNATURE OF MEMBER

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



August 27, 2009

The Honorable Edolphus Towns U.S. House of Representatives 2232 Rayburn House Office Building Washington, DC 20515

Dear Representative Towns:

Thank you for participating in the Annual Policy Conference in Tunica, Mississippi hosted by the Congressional Black Caucus Institute from August 13 to August 16, 2009. We hope that the sessions provided you with an opportunity to share your views on issues related to the Economic Stimulus, Infrastructure and New Economy, Energy and the Environment, Health Care and Health Disparities, Justice and Civil Liberties, Financial Services and Homeland Security. We were particularly pleased with the response we received from the Town Hall Meeting which allowed our participants to ask you questions.

In order to help you complete your Travel Disclosure Form, we are providing you with information on the costs we incurred for your participation in the event:

- Lodging Expenses \$129
- Meal Expenses \$75

In addition, under House Rules the cost for golf, tennis, and skeet shooting activities which were part of the event are subject to reimbursement and should be forwarded to the Congressional Black Caucus Institute at 227 Massachusetts Ave N.E. Washington, D.C. 20002.

• Golf - \$75

If you have any questions or need more information, please do not hesitate to call Alicia Petersen at (202) 785-3634.

Sincerely,

Bennie G. Thompson, Chair

Ramie Allen poor

Congressional Black Caucus Institute

PRIVATELY SPONSORED TRAVEL: TRAVELER FORM

| 1. | Name of Traveler: Representative Eclolphus Towns |
|----|---|
| 2. | Sponsor(s) (who will be paying for the trip): Congressional Black Caucus Political Education and Leadership Institute (CBC Institute) |
| 3. | Travel destination(s): Tunica, Mississippi |
| 4. | a. Date of Departure and Date of Return: Depart-August 14 , 2009/Return, August 16, 2009 |
| | b. Will you be extending the trip at your personal expense? Yes INO |
| | If yes, dates at personal expense: |
| 5. | a. Will you be accompanied by a family member at the sponsor's expense? ✓ Yes ☐ No |
| | b. If yes, name of accompanying family member: Gwendolyn Towns |
| | c. Relationship to traveler: Spouse Child Other (specify): |
| 6. | a. Did the trip sponsor answer "yes" to Question 9(c) on the Trip Sponsor form (i.e., the travel is being sponsored by an entity that employs a lobbyist)? ☐ Yes ☐ No b. If yes, check one of the following: ☐ N/A - Sponsor checked 9(a) or 9(b) (1) Approval for one-night's lodging and meals is being requested: ☐ or (2) Approval for two-nights' lodging and meals is being requested: ☐ If "(2)" is checked, explain why the second night is warranted: |
| 7. | Private Sponsor Travel Certification Form is attached, including agenda, invitee list, and any other attachments (indicate that form is attached by checking box): |
| 8. | Explain why participation in the trip is connected to <u>your</u> individual official or representational duties: My participation in this conference includes me making presentations at issue and policy sessions and |
| | joining in on discussions on legislative issues affecting the country at the Members round table |
| 9. | FOR STAFF: TO BE COMPLETED BY YOUR EMPLOYING MEMBER: |
| | 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 tha acceptance of these expenses will not create the appearance that the employee is using public office fo private gain. |
| | Date: |
| | Signature of Employing Member |

NOTE: This page must be submitted with your post-travel disclosure form within 15 days of your return, so you should maintain a photocopy of the completed form for your records.

PRIVATE SPONSOR TRAVEL CERTIFICATION FORM (provide directly to each House invitee)

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. The trip sponsor should NOT submit the form directly to the Committee. You must answer every question on the form.

| 1. | Sponsor(s) (who will be paying for the trip): Congressional Black Caucus Political Education and |
|-----|--|
| | Leadership Institute (CBC Institute) |
| 2. | I represent that the trip will not be financed (in whole or in part) by a federally-registered lobbyist or a registered foreign agent (Signify that the statement is true by checking box): |
| 3. | I represent that the trip sponsor(s) has not accepted from any other source funds earmarked directly or indirectly to finance any aspect of the trip (Signify that the statement is true by checking box): |
| 4. | Is travel being offered to an accompanying family member of the House invitee(s)? |
| 5. | Provide names and titles of ALL House invitees; for each invitee, provide explanation of why the individual was invited (include additional pages if necessary): See attached for full fist of Invitees (includes southern Members, and CBC Members and Key Staff) |
| | See attached for full list of Invitees (includes southern Members, all CBC Members and Key Staff) |
| 6. | Dates of travel: August 13, 2009 - August 16, 2009 |
| 7. | Cities of departure destination - return: Departure from Home District to Tunica, MS and return to Home District |
| 8. | Attached is a detailed agenda of the activities taking place during the travel (i.e., an hourly description of planned activities) (Signify "yes" by checking box): |
| 9. | 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: are 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. |
| 10. | If travel is for participation in a one-day event (i.e., if you checked Question 9(c)), check one of the following: |
| | a. N/A – I checked 9(a) or (b) above: |
| | b. One-night's lodging and meals are being offered: or |
| | c. Two-nights' lodging and meals are being offered: If "c" is checked, explain why the second night is warranted: 3 nights are requested based on the length of programs |
| | Where each Mamber has been requested to partiripate. Considerating peeded for limited Blobb schools to been Accordant to the Consideration peeded for limited Blobb schools to be the Consideration and Considerat |

| 11. | Check one: a. 1 represent that a federally-registered 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 an institution of higher education. |
| 12. | Private sponsors must have a direct and immediate relationship to the purpose of the trip or location being visited. Describe the purpose of the trip and the role of each sponsor in organizing and conducting the trip: |
| | The CBC Institute is the sole sponsor of this event, which is our annual policy conference. The goal of the |
| | conference is to bring together elected officials, business leaders and the general public to discuss current |
| | legislation impacting underserved communities. |
| 13. | Describe the mode of travel (air, rail, bus, etc.). For air travel, also indicate the type of aircraft (commercial, charter, or privately owned) and class of travel (coach, business class, first class, etc.): No Air travel or other carrier to destination is provided |
| | b. If travel will be first class or by chartered or private aircraft, provide an explanation describing why such travel is warranted: |
| | 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): 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, detail the cost per day of meals (approximate cost may be provided): |
| 6. | Reason for selecting the location of the event or trip: Tunica Mississippi has been the ongoing location for this event. |
| 7. | Name of hotel or other lodging facility: Hotels: The Veranda, The Terrace, Gold Strike, Fltz and The Horseshoe |
| 8. | Cost per night of hotel or other lodging facility (approximate cost may be provided): Approximately \$91 a night, per room (w/out tax). |
| 9. | Reason(s) for selecting hotel or other lodging facility: Hotels are closely located and are host to conference area, or are within a short distance to a conference area. |
| | |

20. TOTAL EXPENSES FOR EACH PARTICIPANT:

| actual amounts good faith estimates | Total Transportation Expenses per Participant | Total Lodging Expenses per Participant | Total <i>Meal</i> Expenses per Participant |
|--|---|--|---|
| For each Member, Officer, or employee | n/a | \$200 | \$150 |
| For each accompanying family member | n/a | r/a | \$150 |

| | Other Expenses (dollar amount) | Identify Specific Nature of "Other" Expenses (e.g., taxi, parking, registration fee, etc.) |
|--|--------------------------------|--|
| For each Member, Officer, or employee | | |
| For each accompanying family member | | |

| 21. | I represent the | at all expenses | connected | to the tri | p will be | for a | ctual cost | s incured | and not | a per | diem d | or lump |
|-----|-----------------|------------------|-------------|-------------|-----------|--------|------------|-----------|---------|-------|--------|---------|
| | sum payment | (signify that th | ne statemen | l is true b | y checki | ng box | r): 🗹 | | | | | |

| Name and title: Dr. Alicia Petersen, Executive Director Organization: Congressional Black Caucus Political Education and Leadership Institute Address: 227 Massachusetts Avenue, NE Suite 201 Washington DC 20002 Telephone number: (202) 785-3634 Fax number: (202) 544-1912 | wledge. |
|---|---------|
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| Address: 227 Massachusetts Avenue, NE Suite 201 Washington DC 20002 Telephone number: (202) 785-3634 | |
| Telephone number: (202) 785-3634 | |
| | |
| Fax number: (202) 544-1912 | |
| | |
| Email Address: petersen@cbcinstitute.org | |

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

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

Committee on Standards of Official Conduct U.S. House of Representatives HT-2, The Capitol Washington, DC 20515 (202) 225-7103 (phone) (202) 225-7392 (general fax)

Version date 8/2008 by Committee on Standards of Official Conduct

| | *Hon. Barbara Lee, (D-CA |
|----|---------------------------------------|
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| | Hon. Corrine Brown (D-FL) |
| | Hon. Roland W. Burris (D-IL) |
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| -2 | Hon. Edolphus Towns (D-NY) |
| | Hon. Maxine Waters (D-CA) |
| | Hon. Diane E. Watson (D-CA) |
| F3 | *Hon, Melvin L. Watt (D-NC) |

Staff

Patrice Willoughby, Executive Director, Congressional Black Caucus Kim Rudolph, Chief of Staff, Congresswoman Carolyn Kilpatrick

PRIVATELY SPONSORED TRAVEL: TRAVELER FORM For Members, Officers, and Employees

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 Private Sponsor Travel Certification Form and any attachments. A copy of this form, minus this initial page, will be made available for public inspection. Please type form. Form (and any attachments) may be faxed to the Committee at (202) 225-7392.

YOUR COMPLETED REQUEST MUST BE SUBMITTED TO THE COMMITTEE NO LESS THAN 14 DAYS BEFORE YOUR PROPOSED DEPARTURE DATE. Absent exceptional circumstances, permission will not be granted for requests received less than 14 days before the trip commences.

| Name of Traveler: Representative Edolphus '2d' Towns |
|--|
| I certify that the information contained on both pages of this form is true, complete, and correct to the best of my knowledge. |
| Signature: / www. |
| Name of Signatory (if other than traveler): |
| For staff, name of employing Member/Committee: |
| Office address: 2232 Raylough House Office Building |
| Phone number: 202-225-5936 |
| Email address of contact person: Sonjiah-davi S @mail.house.gov |
| Check this box if the sponsoring entity is a media outlet and the traveler is a Member traveling to make a media appearance sponsored by that entity <u>and</u> these forms are being submitted to the Committee less than 14 days before the trip departure date. |
| NOTE: You must complete the contact information fields above, as Committee staff may need to contact you if additional information is required. |

Version date 9/2008 by Committee on Standards of Official Conduct

Committee on Standards of Official Conduct

U.S. House of Representatives

HT-2, The Capitol Washington, DC 20515 (202) 225-7103 (phone) (202) 225-7392 (fax)

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

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U.S. House of Representatives

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July 30, 2009

The Honorable Edolphus Towns U.S. House of Representatives 2232 Rayburn House Office Building Washington, DC 20515

Dear Colleague:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Standards of Official Conduct hereby approves your proposed trip for you and your spouse to Tunica, Mississippi scheduled for August 14 to 16, 2009, sponsored by the Congressional Black Caucus Political Education and Leadership Institute.

You must complete a Member Travel Disclosure Form and file it with the Clerk of the House within 15 days after your return from travel. As part of that filing, you are required to attach a copy of this letter and both the Private Sponsor Travel Certification Form (including attachments) and Member travel approval form you previously submitted to the Committee. You must also report all travel expenses totaling more than \$335 from a single source on Schedule VII of your annual Financial Disclosure Statement.

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

Sincerely,

Zoe Lefgren

Chair

Ranking Republican Member

ZL/JB:slo