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Amendment

U.S. House of Representatives EMPLOYEE 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 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 annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 26, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk is to make these forms publicly available as soon as possible after they are filed. Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.

NAME OF EMPLOYEE (PRINT OR TYPE):	Bill Cooper		
NAME OF ACCOMPANYING FAMILY MEMBER	n/a		
RELATIONSHIP TO EMPLOYEE (check one):	Spouse Child		
DATES OF TRAVEL:	August 18-21, 2003		
DATES AT PERSO	n/a		
ITINERARY:	See attached. (Jackson Hole, WY)		
SPONSOR (WHO PAID FOR THE TRIP):	Independent Petroleum Association of America		
PURPOSE OF TRIP:	Speak on the energy bill.		
TOTAL TRANSPORTATION EXPENSES:	1		
For employee:	995.50		
For accompanying spouse or child:	n/a		LEGI 20
TOTAL LODGING EXPENSES:			EGISLATIVE
For employee:	755.56		TIVE R
For accompanying spouse or child:	n/a		RESC -5
TOTAL MEAL EXPENSES:	3		EGISLATIVE RESOURCE CENTER 2003 NOV - 5 PM 4: 39 OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES
For employee:	116.59		i GER
For accompanying spouse or child:	n/a		TER 9
OTHER EXPENSES (Specify):			
For employee:	n/a		
For accompanying spouse or child:	n/a		
SIGNATURE OF EMPLOYEE:	Lagn	DAT	E Nov. 4, 2003

I authorized this travel in advance. I have determined that all of the expenses listed above were necessary and that the travel was in connection with the employee's official duties and would not create the appearance that he/she is using public office for private gain.

NAME OF SUPERVISING MEMBER/OFFICER (Print or Type):

SIGNATURE OF SUPERVISING MEMBER/OFFICER: