# SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

**US Embassy New Zealand**

**TRAVELER**

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Event Description/Sponsor/ Dates</th>
<th>Location and Travel Dates</th>
<th>Source</th>
<th>Benefits Accepted</th>
</tr>
</thead>
</table>

**NAME**

**DESCRIPTION**

**LOCATION**

---

This report implements 31 U.S.C. 1353. It does not supersede other reports that may have to be filled when travel expenses are accepted under other authority. For definition and policies, see 41 CFR part 304-1.

---

**AUTHORIZED FOR LOCAL REPRODUCTION**