

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
Office of the Under Secretary for Policy, S3

April 1, 2012 – September 30, 2012

Negative Report

X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
Office of Transportation Policy, P

April 1, 2012 – September 30, 2012

Negative Report

X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITSACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN- KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency OST - S-10

April 1, 2012 to September 30, 2012

Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

TRAVELER <i>(NAME/TITLE)</i>	EVENT	LOCATION AND	BENEFITSACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME: Rita E. Daguillard TITLE: Director of Research Management	DESCRIPTION: Fourth International Conference: Equal Rights--Equal Opportunities SPONSOR: International Academy for Accessibility and Universal Design DATES: May 10-11, 2012	LOCATION: Moscow, Russia TRAVEL DATES: May 8-12, 2012	International Academy for Accessibility and Universal Design	Round trip airfare		X	\$766.66
				Lodging		X	\$428.00
				Meals		X	\$160
NAME: Matthew Lesh TITLE: Transportation Program Specialist, Office of Mobility Innovation	DESCRIPTION: Podcar City Conference (Berlin, Germany) (September 18-20) Swedish Transport Administration (Stockholm, Sweden) (September 21) City of Uppsala (Uppsala, Sweden) (September 22) SPONSOR: KOMPASS (League of Swedish cities interested in exploring personal rapid transit) DATES: September 18-22, 2012	LOCATION: Berlin, Germany & Stockholm and Uppsala, Sweden TRAVEL DATES: September 17-23,2012	KOMPASS (League of Swedish cities interested in exploring personal rapid transit)	Round trip airfare		X	\$1,200.00
				Lodging and meals		X	\$300.00
				Local transportation		X	\$300.00
				Conference fees		X	\$200.00
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE	REPORTING PERIOD	PAGE 1 OF 1 PAGES
Reporting Department or Agency Office of the Assistant Secretary for Aviation and International Affairs, X1	April 1, 2012 – September 30, 2012	X Negative Report

TRAVELER <i>(NAME/TITLE)</i>	EVENT	LOCATION AND TRAVEL DATES	BENEFITS ACCEPTED					
	DESCRIPTION/SPONSOR/DATES		SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT	
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						
	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						
	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						
	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						
	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						
	DATES:							

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
DEPARTMENT OF TRANSPORTATION OFFICE OF INSPECTOR GENERAL

APRIL 1, 2012 – SEPTEMBER 30,
2012

Negative Report
X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND TRAVEL DATES	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES		SOURCE	DESCRIPTION	CHECK	IN- KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
 SAINT LAWRENCE SEAWAY DEVELOPMENT CORPORATION

April, 2012 – September, 2012

X Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND TRAVEL DATES	BENEFITS ACCEPTED					
	DESCRIPTION/SPONSOR/DATES		SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT	
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:						
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:						
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:						
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:						
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:						
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
OFFICE OF DRUG AND ALCOHOL POLICY AND COMPLIANCE (S1-D)

April 1, 2012 to September 30, 2012

Negative Report
X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITSACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE		REPORTING PERIOD		PAGE 1 OF 1 PAGES	
Reporting Department or Agency USDOT – Volpe Center		X	April 1, 2012 thru September 30, 2012	X	Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND TRAVEL DATES	BENEFITSACCEPTED					
	DESCRIPTION/SPONSOR/DATES		SOURCE	DESCRIPTION	CHECK	IN- KIND	AMOUNT	
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						

	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						

	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						

	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						

	DATES:							
NAME:	DESCRIPTION:	LOCATION:						
TITLE:	SPONSOR:	TRAVEL DATES:						

	DATES:							

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

Reporting Department or Agency: **FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION**

April 1, 2012 - September 30, 2012

X

NEGATIVE REPORT

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND TRAVEL DATES	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES		SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: TRB	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

OST/Office of the General Counsel

April 1, 2012 – September 30, 2012

Reporting Department or Agency

Negative Report
X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
 Research and Innovative Technology Administration

April 1, 2012 thru September 30, 2012

Negative Report
 X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

AUTHORIZED FOR LOCAL REPRODUCTION

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
OST Office of the Assistant Secretary for Administration

April 1, 2012 to September 30, 2012

Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITSACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES

Reporting Department or Agency
S1, S2, Government and Public Affairs

4/1/12 – 9/30/12

Negative Report
X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND TRAVEL DATES	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES		SOURCE	DESCRIPTION	CHECK	IN- KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE		REPORTING PERIOD	PAGE 1 OF 1 PAGES
Reporting Department or Agency PHMSA/PHP		4/1/12 – 9/30/12	Negative Report X

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE		REPORTING PERIOD	PAGE 1 OF 2 PAGES
Reporting Department or Agency FEDERAL AVIATION ADMINISTRATION		April 1, 2012 to September 30, 2012	Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITSACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME: Brian Pinkston, M.D.	DESCRIPTION: Spoke on the FAA AME Program and AMCS, and updates on AME Performance Reporting at 5 th International Aviation Medical Examiner Seminar	LOCATION: Berlin, Germany	The European School of Aviation Medicine	Round Trip		X	3,251.37
TITLE: Manager, CAMI Aerospace Medical Education Division				6 nights		X	1,055.00
				MI&E		X	600.00
	SPONSOR: The European School of Aviation Medicine	TRAVEL DATES: 8/21/12-8/27/12					
	DATES: 8/23/12 – 8/26/12						
NAME: Carl Burleson, Deputy Assistant Administrator for Policy, International Affair and Environment	DESCRIPTION: Spoke on US Next Generation Air Transportation System And US policy on international aviation	LOCATION: Dublin, Ireland	The European Region Airline Association				
TITLE: Deputy Assistant Administrator for Policy				2 nights		X	775.00
	SPONSOR: The European Regions Airline Association	TRAVEL DATES: 9/18/12-9/21/12					
	DATES: 9/18/12-9/21/12						
NAME: Melchor Antunano	DESCRIPTION: Spoke on Civilian Space Flight Operations and Involvement/ Oversight of FAA	LOCATION: Dayton, Ohio	Wright State University School of Medicine	Round Trip		X	352.00
TITLE: Director, Civil Aerospace Medical Institute				1 nights		X	82.00
	SPONSOR: Wright State University School of Medicine	TRAVEL DATES: 9/27/12-9/28/12					
	DATES:9/27/12-9/28/						
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR:	TRAVEL DATES:					
	DATES:						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE		REPORTING PERIOD	PAGE 1 OF 1 PAGES
Reporting Department or Agency FEDERAL AVIATION ADMINISTRATION		April 1, 2012 to September 30, 2012	Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME: Melchor Antunano, M.D.	DESCRIPTION: Spoke on the latest developments and concepts to the practice of aviation medicine at Univ. of Texas Medical Branch School	LOCATION: Houston, TX	Univ. of Texas Medical Branch School (UTMB)	Round Trip		X	203.10
TITLE: Director, Civil Aerospace Medical Institute				2 nights		X	327.00
	SPONSOR: Univ. of Texas of Medical Branch School	TRAVEL DATES: 6/25/12-6/27/12		Rental Car		X	85.14
	DATES: 6/25/12 – 6/27/12			Gas		X	50.00
NAME: Frederick E. Tilton, M.D.	DESCRIPTION: Spoke on FAA Office of Aerospace Medicine Update and Antidepressant at the 5 th International Aviation Medical Examiner Seminar	LOCATION: Berlin, Germany	The European School of Aviation Medicine	Round Trip		X	1,801.85
TITLE: Federal Air Surgeon				SPONSOR: The European School of Aviation Medicine	TRAVEL DATES: 8/21/12-8/27/12	6 nights	
	DATES: 8/23/12 – 8/26/12			MI&E		X	600.00
NAME: Melchor Antunano, M.D.	DESCRIPTION: Spoke on Emerging Technologies in Medicine and Impact on Pilot Medical Certification at 5 th International Aviation Medical Examiner Seminar	LOCATION: Berlin, Germany	The European School of Aviation Medicine	Round Trip		X	3,251.37
TITLE: Director, Civil Aerospace Medical Institute				SPONSOR: The European School of Aviation Medicine	TRAVEL DATES: 8/21/12-8/27/12	6 nights	
	DATES: 8/23/12 – 8/26/12			MI&E		X	600.00

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

Reporting Department or Agency
DOT/OST/M20 OFFICE OF HEARINGS

April 1, 2012-
 September 30, 2012

Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITS ACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME: Richard C. Goodwin	DESCRIPTION: ABA Conference	LOCATION: NY, NY	ABA	REIM	X		1,376.90
TITLE: Administrative Law Judge	SPONSOR: ABA	TRAVEL DATES: 4/15 & 4/18/2012					
	DATES: 4/16-17/2012						
NAME: Richard C. Goodwin	DESCRIPTION: 37 th Annual Indian Law Conference	LOCATION: Santa Fe, NM	ABA	REIM	X		1,546.95
TITLE: Administrative Law Judge	SPONSOR:	TRAVEL DATES: 4/18 & 21/2012					
	DATES: 4/19-20/2012						
NAME: Richard C. Goodwin	DESCRIPTION: ABA Conference	LOCATION: The Hague Netherlands	ABA				
TITLE: Administrative Law Judge	SPONSOR: ABA	TRAVEL DATES: 4/22 & 25/2012		REIM	X		310.00
	DATES: 4/23-24/2012						
NAME: Richard C. Goodwin	DESCRIPTION: Spring Planning Conf.	LOCATION: Washington, DC	ABA	REIM	X		415.81
TITLE: Administrative Law Judge	SPONSOR: : ABA	TRAVEL DATES: 5/30-& 6/2/2012					
	DATES: 6/1-2/2012						

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

REPORTING PERIOD

PAGE 1 OF 1 PAGES
2 of 2

Reporting Department or Agency
DOT/OST/M20 OFFICE OF HEARINGS

APRIL 1, 2012-SEPTEMBER 30,
2012

Negative Report

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITSACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME: Richard C. Goodwin	DESCRIPTION: Homelessness Conf.	LOCATION: San Francisco, CA	ABA	REIM	X		494.84
TITLE: Administrative Law Judge	SPONSOR: ABA	TRAVEL DATES: 4/30-5/13/2012					
	DATES: 5/1-12/2012						
NAME: Richard C. Goodwin	DESCRIPTION: FBA Reception	LOCATION: Los Angeles, CA	FBA				
TITLE: Administrative Law Judge	SPONSOR: FBA	TRAVEL DATES: 5/17/2012		REIM	X		228.48
	DATES: 5/17/2012						
NAME: Richard C. Goodwin	DESCRIPTION: ABA Conference	LOCATION: Salem, OR	ABA				
TITLE: Administrative Law Judge	SPONSOR: ABA	TRAVEL DATES: 6/27 & 7/1/2012		REIM	X		784.77
	DATES: 6/28-30/2012						
NAME: Richard C. Goodwin Administrative Law Judge	DESCRIPTION: ABA Annual Conf.	LOCATION: Chicago, IL	ABA	REIM	X		1,149.12
	DATES: 8/1-7/2012	7/31-8/8/2012					
NAME:	DESCRIPTION:	LOCATION:					

SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE		REPORTING PERIOD	PAGE OF PAGES
Reporting Department or Agency FEDERAL HIGHWAY ADMINISTRATION		Apr. 1, 2012 – Sept 30, 2012	1

TRAVELER (NAME/TITLE)	EVENT	LOCATION AND	BENEFITSACCEPTED				
	DESCRIPTION/SPONSOR/DATES	TRAVEL DATES	SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
NAME: Tom Kearney	DESCRIPTION: Travel Support to Participate in Brazil's Ministry of Transport's Workshop on Transport Infrastructure.	LOCATION: Brasilia, BS	Brazilian Ministry of Transport.	Airline Ticket			\$3,694.15
				Lodging			\$600.00
TITLE: Transportation Specialist	SPONSOR: Brazil Ministry of Transport DATES: May 8-10, 2012	TRAVEL DATES: May 7 – 12, 2012		M&IE			\$351.00
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					
NAME:	DESCRIPTION:	LOCATION:					
TITLE:	SPONSOR: _____ DATES:	TRAVEL DATES:					