U.S. DEPARTMENT OF THE INTERIOR REPORT OF PAYMENT ACCEPTED FROM A NON-FEDERAL SOURCE UNDER 31 U.S.C. §1353

SOURCE UNDER 31	. U.S.C. §1353			
IMPORTANT NOTICE: Upon completion, form must be sent to the Bureau or Office Deputy Ethics		OGE USE ONLY		
This report implements 31 U.S.C. §1353. It does not travel or travel expenses are accepted under other authomotors.				
1. Bureau/Office	2. For Report of this Event Page of			
3. Event (Identify meeting or similar function for which employee and/or	n payment will be accepted	under 31 U.S.C. §1353 for		
4. Sponsor of Event	5. I	ocation of Event		
6. Dates of Event, 19	То:	, 19		
7. Nature of Event				
8. Employee Name: Title: Office: Travel Dates:	9. Accompanying Spouse (If Applicable) Name: Employee: Position: Travel Dates:			
From: To: 10. Non-Federal Sources of Payment (Identify all non-Federal U.S.C. §1353 for this employee and/or accompanying	From:			
A	C	chib evene.,		
B	D			
11. Nature of Payments (Itemize on back of form.)				
12. Nature of Payments (Indicate total amount of payments and/or accompanying spouse in connection with this ev	rent.)			
Total of Payments to Agency by Check \$				
13. Employee Certification. The statements made in this my knowledge.	report are true, complete	e, and correct to the best of		
Employee's Signature Date				
14. Ethics Review and Approval. Based on the information situation	provided to me, I have d	determined that this travel		
Authorized Approving Official's Signature	Title	Date		

11. Nature of Payments. For each payment accepted, identify (a) nature of benefit; (b) mode of payment; (c) individual for whom provided; (d) non-Federal source; and (e) amount of payment. When describing mode of payment, use "C" for check or "K" for in kind. Use "E" for employee or "S" for spouse when identifying individual for whom payment was provided, and use applicable letter from question 10 to identify non-Federal source. To value benefits provided in kind, use cost to other participants for waiver of conference or training fee. For transportation or lodging, use cost to donor or consult rate for similar benefit in effect at time benefit provided. For travel on private or chartered aircraft, determine value by computing total constructive cost of transportation using premium class air fare. For meals and other benefits, use cost to donor or reasonable approximation.

(a) Nature of Benefit	(b) C or K	(c) E or S	(d) A,B,C or D	(e) \$
Example: Round-trip commercial air transportation between Washington, DC and Chicago	K	E	A	470.00