SEMIANNUAL REPORT OF PAYMENTS ACCEPTED FROM A NON-FEDERAL SOURCE

Form Approval.: **0416-GSA-SA**

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.

REPORTING DEPARTMENT OR AGENCY

ARMY FUTURES COMMAND, Future Vertical Lift CFT

REPORTING PERIOD

OCTOBER 1 - MARCH 31 *(Year)* 2018-2019

APRIL 1 - SEPTEMBER 10 *(Year)*

NEGATIVE REPORT

	TRAVELER (Name/Title)	EVENT DESCRIPTION/SPONSOR/ DATES	LOCATION AND TRAVEL DATES	BENEFITS ACCEPTED SOURCE	DESCRIPTION	CHECK	IN-KIND	AMOUNT
EXAMPLES	John Smith Secretary	Conference on Asia-Pacific Relations sponsored by Asia-Pacific Forum.	San Francisco, CA 8/11-13/93	Asia-Pacific Forum Pacific Rim Assoc.	Hotel Air Transportation Meals	X	X X	$280 825 120
EXAMPLES	Joyce Smith Spouse of Secretary	Conference on Asia-Pacific Relations sponsored by Asia-Pacific Forum.	San Francisco, CA 8/11-13/93	Asia-Pacific Forum Pacific Rim Assoc.	Air Transportation Meals	X	X	$825 120
NAME: Mr. Jim Thomson TITLE: FVL CFT HQE		DESCRIPTION: AUSA Conference SPONSOR: AUSA DATES:	LOCATION: Washington DC DATES: 7-11 Oct 18	AUSA	Hotel	X		1,148.00
					Air Transportation	X		500.00
					Meals	X		241.50
					Parking, Taxi, Mileage	X		95.00
NAME: COL Andrew Batten TITLE: FVL CFT Senior NG Rep		DESCRIPTION: AUSA Conference SPONSOR: AUSA DATES:	LOCATION: Washington DC DATES: 7-11 Oct 18	AUSA	Hotel	X		1,148.00
					Air Transportation	X		500.00
					Meals	X		241.50
					Parking, Taxi, Mileage	X		95.00
NAME: LTC(P) Matthew Isaacson TITLE: FVL CFT CoS		DESCRIPTION: AUSA Conference SPONSOR: AUSA DATES:	LOCATION: Washington DC DATES: 7-11 Oct 18	AUSA	Hotel	X		1,148.00
					Air Transportation`	X		500.00
					Meals	X		241.50
					Parking, Taxi, Mileage	X		95.00
NAME: LTC Eddy Lee TITLE: FVL CFT Advisor		DESCRIPTION: AUSA Conference SPONSOR: AUSA DATES:	LOCATION: Washington DC DATES: 7-11 Oct 18	AUSA	Hotel	X		1,148.00
					Air Transportation	X		500.00
					Meals	X		241.50
					Parking, Taxi, Mileage	X		95.00

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