COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

Date/Time Stamp
RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
2024 APR 22 PM 3:50

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the **Office of Public Records** in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. **Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.**

SUBMIT DIRECTLY TO THE **OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING**

Name of Traveler: Samir Hammoud

Employing Office/Committee: Office of Senator Cory A. Booker

Travel Expenses Paid by (List all sources): Malaria No More

Travel Date(s): 10/8/2023-10/15/2023

Description/Title of Attached Forms: RE-1

Purpose of Amendment (describe the reason for amending original submission):
RE-1 didn't properly download in post travel packet.

04/22/2024
(Date)

(Signature of Traveler)

(Revised 4/19/2010)

RE-1 Employee Pre-Travel Authorization

Date/Time Stamp

Pre-Travel Filing Instructions: Complete and submit this form at least 30 days prior to the travel departure date to the **Select Committee on Ethics in SH-220.** Incomplete and late travel submissions will **not** be considered or approved.

Name of Traveler:
Samir Hammoud

Employing Office/Committee:
BOOKER, CORY

Private Sponsor(s):
Malaria No More

Destination(s):
Lusaka, Zambia Mfuwe, Zambia Lusaka, Zambia

Travel Dates:
10/08/2023 to 10/15/2023
NOTE: If you plan to extend the trip for any reason you **must** notify the Committee.

Explain how this trip is specifically connected to the traveler's official or representational duties.

Senator Booker is Chair of the Africa and Global Health Subcommittee. The programs we will be learning about on this trip fall directly under the jurisdiction of this subcommittee. As a staffer on the Senator's foreign policy team, this trip will provide useful insight that will enable me to better advise the Senator on these issues.

Do you have an accompanying family member or spouse on this trip?
No

Name and Relationship to Traveler:
N/A

I certify that the information contained in this form is true, complete and correct to the best of my knowledge.

09-05-2023
Date

Signature of Employee

TO BE COMPLETED BY SUPERVISING MEMBER/OFFICER
(President of the Senate, Secretary of the Senate, Sergeant at Arms, Secretary for the Majority, Secretary for the Minority, and Chaplain)

I Senator Cory A. Booker (Print Senator's/Officer's Name) hereby authorize Samir Hammoud (Print Traveler's Name)

an employee under my direct supervision, to accept payment or reimbursement for necessary transportation, lodging, and related expenses for travel to the event described above. I have determined that this travel is in connection with his or her duties as a Senate employee or an officeholder, and will not create the appearance that he or she is using public office for private gain.

I have also determined that the attendance of the employee's spouse or child is appropriate to assist in the representation of the Senate.

☒ (signify "yes" by checking box)

09-05-2023
Date

Signature of Supervising Senator/Officer