

FEDERAL CONTRIBUTIONS ACTIVITY REPORT

Reporting Period: _____

Name: _____

Signature: _____

Title:

E-Mail:

Telephone:

Do you or your unit have any contributions to report for the Reporting Period?

(Check one) ___ **Yes** or ___ **No**

If yes, please complete the attached Report Form for each reportable contribution.

If no, please sign and return this form.

Reportable Contribution Categories

Information regarding the following types of activities needs to be reported by the University and should, therefore, be included on the attached form.

Please Note: Personal contributions and activities by University employees as private citizens do not need to be reported, but contributions and activities by University employees, on behalf of the University, do.

1. Contributions to any federal candidate or officeholder, leadership PAC, or political party committee if the amount equals or exceeds \$200 for the period;
2. Funds paid for an event to honor or recognize a **covered federal official**;
3. Funds paid to an entity that is named for or in recognition of a **covered Legislative Branch official**;
4. Funds paid to an entity established, financed, maintained, controlled or designated by a **covered federal official**;
5. Funds paid for a meeting, retreat, conference, or other similar event held by, or in the name of, one or more **covered federal official(s)**; and
6. Contributions to a Presidential library foundation or Presidential inaugural committee if the amount equals or exceeds \$200 for the period.

Covered federal officials include the following:

Covered Legislative Branch officials: Members of Congress and Congressional staff; and/or

Covered Executive Branch officials: The President and Vice President and their staffs, officials serving in Executive Level I through V positions (generally political appointees)

serving in jobs at the assistant secretary or deputy director level or above), military officers with a rank of Brigadier General or Rear Admiral, or above, and other federal employees serving in a “confidential, policy-determining, policy-making, or policy-advocating character,” including all so-called “Schedule C” employees.

FEDERAL CONTRIBUTIONS ACTIVITY REPORT FORM

Reporting Period: _____

Name: _____

Title: _____

Signature: _____

Contribution Description and Category (from page 1): _____

Date: _____

Amount: _____

Payee/Recipient Name: _____

Honoree Name: _____

Contribution Description and Category (from page 1): _____

Date: _____

Amount: _____

Payee/Recipient Name: _____

Honoree Name: _____

Contribution Description and Category (from page 1): _____

Date: _____

Amount: _____

Payee/Recipient Name: _____

Honoree Name: _____

Please add additional pages if necessary to complete your responses.

Please direct any questions or send the completed report to Amina DeHarde, Assistant Director of Government Relations, Office of the President, 1127 Main Administration Building, University of Maryland, College Park MD 20742; Phone: 301.405.8359; Fax: 301.314.9560; adeharde@umd.edu.