

Committee on Ways and Means  
 Witness Disclosure Requirement – “Truth in Testimony”  
 Required by House Rule XI, Clause 2(g)

Your Name: Ethel Zelenske			
1. Are you testifying on behalf of a Federal, State, or Local Government entity? a. Name of entity(ies).  b. Briefly describe the capacity in which you represent this entity.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
2. Are you testifying on behalf of any non-governmental entity(ies)? a. Name of entity(ies). The Consortium for Citizens with Disabilities (CCD) Social Security Task Force  b. Briefly describe the capacity in which you represent this entity. I am one of the Co-Chairs of the Task Force.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
3. Please list any Federal grants or contracts (including subgrants or subcontracts) which <u>you have received</u> during the current fiscal year or either of the two previous fiscal years:  NONE			
4. Please list any offices or elected positions you hold. I am a Co-Chair of the CCD Social Security Task Force.			
5. Does the entity(ies) you represent, other than yourself, have parent organizations, subsidiaries, or partnerships you are not representing? CCD has other Task Forces. I am testifying only on behalf of the CCD Social Security Task Force and the CCD member organizations who signed on to the written testimony.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
6. Please list any Federal grants or contracts (including subgrants or subcontracts) which were received by the entity(ies) you represent during the current fiscal year or either of the two previous fiscal years, which exceed 10 percent of entity(ies) revenues in the year received. Include the source and amount of each grant or contract. Attach a second page if necessary.  NONE			

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Name: Ethel Zelenske

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1025 Connecticut Avenue, NW Suite 709  
Washington, DC 20036

Signature: Ethel Zelenske

Date: June 26, 2012