

1. **Name:** Capt. Chris A. Kolenske
2. **Title:** Deputy State Director of Emergency Management and Homeland Security
3. **Organization you are representing:** National Governors Association, Governors Homeland Security Advisors Council
4. **Date of hearing:** February 14, 2017

5. The amount and source of each Federal grant (or subgrant thereof) or contract (or subcontract thereof) related to the subject matter of the hearing, received by you or an entity represented by the witness during the prior two calendar years (2015 and 2016): (attach additional pages as necessary).

6. The amount and country of origin of any payment or contract related to the subject matter of the hearing originating with a foreign government, received by you or an entity represented by the witness during the prior two calendar years (2015 and 2016): (attach additional pages as necessary)

Signature of Witness: _____

REDACTED

Your signature WILL NOT be made posted to the Committee website.