

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

Your Name:
 Ginger Zielinskie

1. Are you testifying on behalf of a Federal, State, or Local Government entity?

Yes No

a. Name of entity(ies).

b. Briefly describe the capacity in which you represent this entity.

2. Are you testifying on behalf of any non-governmental entity(ies)?

Yes No

a. Name of entity(ies).
 Benefits Data Trust

b. Briefly describe the capacity in which you represent this entity.
 Executive Director

3. Please list any Federal grants or contracts (including subgrants or subcontracts) which you have received during the current fiscal year or either of the two previous fiscal years:

Program/Project	Funding Source	CFDA #	Total Award Amount	Award Period
UC/L&I State SNAP Outreach	PA Dept of Public Welfare	10.580	391,992	11/01/11 - 06/30/12
NCOA/NCBOE	National Council on Aging, Inc	93.048	99,998	03/01/09 - 02/28/10
NCOA/NCBOE	National Council on Aging, Inc	93.518	50,000	11/01/10 - 10/31/11
BenePhilly SNAP Demo	PA Dept of Public Welfare	10.580	500,000	10/01/09 - 12/31/11
SNAP MIPPA	PA Dept of Public Welfare	10.580	950,532	12/01/10 - 09/13/13
Total Amount Federal Awards			1,992,522	

4. Please list any offices or elected positions you hold.
 Commissioner, City of Philadelphia’s Mayor’s Commission on Aging