FOIA Number: 2013-0661-F

FOIA MARKER

This is not a textual record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

Collection/Record Group: Clinton Presidential Records

Subgroup/Office of Origin: National Service

Series/Staff Member: Eli Segal

Subseries:

OA/ID Number: 1293

FolderID:

Folder Title:
3/24-25 Chicago Trip

Stack:	Row:	Section:	Shelf:	Position:
S	66	2	7	1

Withdrawal/Redaction Sheet
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. form	[Personally Identifiable Information] [partial] (3 pages)	03/00/1993	b(6)

COLLECTION:
Clinton Presidential Records
National Service
Eli Segal
OA/Box Number: 1293

FOLDER TITLE:
3/24-25 Chicago Trip

2013-0661-F
rs2931

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Withdrawal/Redaction Marker
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. form	[Personally Identifiable Information] [partial] (3 pages)	03/00/1993	b(6)

COLLECTION:
Clinton Presidential Records
National Service
Eli Segal
OA/Box Number: 1293

FOLDER TITLE:
3/24-25 Chicago Trip

2013-0661-F
rs2931

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

TRAVEL VOUCHER

(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU DIVISION OR OFFICE: NATIONAL SERVICE

2. TYPE OF TRAVEL
- ☐ TEMPORARY DUTY
- ☐ PERMANENT CHANGE OF STATION

3. VOUCHER NO.: [illegible]

4. SCHEDULE NO.:

5. TRAVELER (PAYEE)
- a. NAME *(Last, first, middle initial)*: SEGAL, ELI J.
- b. SOCIAL SECURITY NO.: (b)(6)
- c. MAILING ADDRESS *(Include ZIP Code)*: 1535 28th ST. NW WASHINGTON, DC 20007
- d. OFFICE TELEPHONE NO.: 202/456-6444
- e. PRESENT DUTY STATION: WASHINGTON, D.C.
- f. RESIDENCE *(City and State)*: WASHINGTON, DC

6. PERIOD OF TRAVEL
- a. FROM: 3/24
- b. TO: 3/25

7. TRAVEL AUTHORIZATION
- a. NUMBER(S): 05522
- b. DATE(S): 3-9-93

8. TRAVEL ADVANCE
- a. Outstanding
- b. Amount to be applied
- c. Amount due Government *(Attached: ☐ Check ☐ Cash)*
- D. Balance outstanding

9. CASH PAYMENT RECEIPT
- a. DATE RECEIVED
- b. AMOUNT RECEIVED $
- c. PAYEE'S SIGNATURE

10. CHECK NO.

11. PAID BY

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side.)*

I hereby assign to the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials*

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
				DCA	CHICAGO
				CHICAGO	CHAMPAIGN
				CHAMPAIGN	CHICAGO
				CHICAGO	DCA

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 4/5/93 AMOUNT CLAIMED ▶ $ 160 44

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ DATE

17. FOR FINANCE OFFICE USE ONLY COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* $

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION $ 160 44
Certifier's initials: JM

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol)*: $

d. NET TO TRAVELER ▶ $ 160 44

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ [signature] DATE 4/4

18. ACCOUNTING CLASSIFICATION

0052 3.48
0022 57.00
0024 99.96

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self-explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationship to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel

Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE ____ OF ____ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME

DATE 1993 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS BREAKFAST (d)	MEALS LUNCH (e)	MEALS DINNER (f)	MEALS TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: ¢ NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
3/24	11:15 PM.	DPT DC CHICAGO						103.44	103.44			103.44	
3/26	1:00 AM	RTN DC											
									SUBTOTALS ▶			103.44	
									TOTALS ▶			103.44	

If additional space is required, continue on another SF 1012-A BACK. leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ $1

PHOTOCOPY PRESERVATION

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel: and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

THE WHITE HOUSE OFFICE
TRAVEL AUTHORIZATION

NO. 65522

Date of Request MARCH 9, 1993

1. **TRAVELER:**

Name: ELI J. SEGAL ☒ White House Staff

Extension: 456-6444 Room: 145 OEOB ☐ Other: _____

2. **PURPOSE(s) and DATE(s):** COOL (CAMPUS OUTREACH OPPORTUNITY LEAGUE) NATIONAL CONFERENCE MARCH 25-27 IN CHAMPAIGN, IL. ELI IS DELIVERING REMARKS

3. **ITINERARY:** CHICAGO, IL. CHAMPAIGN, IL.
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
3/24	LATE FLIGHT	COMMERCIAL	3/25/93	LAST FLIGHT	COMMERCIAL

5. **FUNDING SOURCE:**

☒ OFFICIAL ☐ POLITICAL ☐ 501 (c) (3) ☐ OTHER _____

6. **SPECIAL EXPENSES**

☐ Commercial Car Rental ☑ Taxi $50

☒ Hotel Name: $100

PD ☑ Other: $47.50

TRAVEL ADVANCE REQUESTED

☐ Yes ☐ No ☐ Amount $_____

Recipient's Signature: _____

Date: _____

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:** Eli J. Segal
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head: _____

Approving Official (Political or Foreign Travel): _____

Special Assistant to the President and Director of White House Operations: _____

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No.: A1-646-070 Account: 0915408903940 442.00

(REV. 6/21/89)

585 $650 1303 **ORIGINAL (Return with Voucher)**

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. ADVANCES FOR OFFICIAL TRAVEL ONLY

   Cash travel advances will not be provided for political trips.

   Advances will not be provided to anyone with an outstanding unaccounted-for advance.

   Advances over $250 require 48-hour notice to White House Administrative Office, Extension 2500.

2. ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS

   Any travel advance which is neither repaid nor accounted for in full by an expense voucher within 15 days after return may be deducted from the staff member's salary.

3. GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY

   Government-issued tickets shall be used for official trips only (i.e., no political or personal travel). The entire cost of any government-issued tickets that are used for unofficial travel will be considered a personal travel advance and treated accordingly.

4. TO OBTAIN REIMBURSEMENT, RECEIPTS ARE REQUIRED FOR ALL EXPENDITURES REGARDLESS OF THE AMOUNT

5. FOR DETAILED INFORMATION REGARDING TRAVEL REGULATIONS AND POLICIES, PLEASE REFER TO THE WHITE HOUSE TRAVEL HANDBOOK
   (Additional copies available by calling Extension 2500.)

TRAVEL VOUCHER WORKSHEET

TRAVELLER: Segal TRIP #: M303 TA#: 65522

Travel Schedule:	DATES	TIMES	PER DIEM
From:	24-Mar-93	19:15	38.00
To:	26-Mar-93	01:00	

	TOTAL EXPENSES	OFFICIAL	POLITICAL
Per Diem (22):	57.00	57.00	0.00
Hotel (24):	99.96	99.96	0.00
Air/Rail Fare (21):	0.00	0.00	0.00
Taxi (25):	0.00	0.00	0.00
POV Mileage (25):	0.00	0.00	0.00
Autorental (26):	0.00	0.00	0.00
Parking (29):	0.00	0.00	0.00
Phone Calls (52):	3.48	3.48	0.00
Other:	0.00	0.00	0.00
LESS ADVANCE:	0.00	0.00	
	160.44	160.44	0.00

Comments: Govt. rate hotel is $104.

TRAVEL VOUCHER

(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU DIVISION OR OFFICE: NATIONAL SERVICE

2. TYPE OF TRAVEL
☐ TEMPORARY DUTY
☐ PERMANENT CHANGE OF STATION

3. VOUCHER NO.

4. SCHEDULE NO.

5. TRAVELER (PAYEE)

a. NAME *(Last, first, middle initial)*: SEGAL, ELI J.

b. SOCIAL SECURITY NO.: (b)(6)

c. MAILING ADDRESS *(Include ZIP Code)*: 1535 38th ST. NW
WASHINGTON, DC 20007

d. OFFICE TELEPHONE NO.

6. PERIOD OF TRAVEL
a. FROM: 3/1/93
b. TO: 3/1/93

7. TRAVEL AUTHORIZATION
a. NUMBER(S): 65523
b. DATE(S): 3-1-93

e. PRESENT DUTY STATION: WASHINGTON DC

f. RESIDENCE *(City and State)*: WASHINGTON DC

10. CHECK NO.

8. TRAVEL ADVANCE
a. Outstanding
b. Amount to be applied
c. Amount due Government *(Attached: ☐ Check ☐ Cash)*
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

11. PAID BY

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side.)*

I hereby assign to the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials*

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
				DC	NJ
				NJ	DC.

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 4-5-93 AMOUNT CLAIMED ▶ $ 15 00

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ DATE

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* $

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. | b. D.O. SYMBOL | c. MONTH & YEAR

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: TH $ 15 00

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ [signature] DATE 4/9

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol)*: $

d. NET TO TRAVELER ▶ $ 15 00

18. ACCOUNTING CLASSIFICATION

0C 22 15.00

1012-116 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77)

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self-explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationship to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel

Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE ____ OF ____ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME

DATE 19____ (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	ITEMIZED SUBSISTENCE EXPENSES							MILEAGE RATE: ¢ NO. OF MILES (k)	AMOUNT CLAIMED		
			MEALS				MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)		MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
			BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)							
3/1	9 AM	DPT DC											
3/1	7:30 PM	ARR DC											
										SUBTOTALS ▶			
										TOTALS ▶			

If additional space is required, continue on another SF 1012-A BACK, leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶

PHOTOCOPY PRESERVATION

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel; and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

THE WHITE HOUSE OFFICE
TRAVEL AUTHORIZATION

NO. 65523

Date of Request 3-9-93

1. **TRAVELER:**

Name: ELI J. SEGAL ☒ White House Staff

Extension: 456-6444 Room: 145 OEOB ☐ Other: _____

2. **PURPOSE(s) and DATE(s):** ACCOMPANY THE PRESIDENT TO RUTGERS UNIV. FOR NATIONAL SERVICE SPEECH

3. **ITINERARY:** _____
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
3/1/93	AM	AIR FORCE ONE	3/1/93	PM	AIR FORCE ONE

5. **FUNDING SOURCE:**

☒ OFFICIAL ☐ POLITICAL ☐ 501 (c) (3) ☐ OTHER _____

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $_____
☐ Hotel Name: _____	Recipient's Signature: _____
PD ☑ Other: $15	Date: _____

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. TRAVELER'S SIGNATURE: E J Segal
(I have read and agree to the terms set forth on the reverse side.)

8. APPROVING SIGNATURES:

Office Head: _____

Approving Official (Political or Foreign Travel): _____

Special Assistant to the President and Director of White House Operations: _____

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No.: _____ Account: _____

(REV. 6/21/89)

585 $15 C3/11/U **ORIGINAL (Return with Voucher)**

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. **ADVANCES FOR OFFICIAL TRAVEL ONLY**

   Cash travel advances will not be provided for political trips.

   Advances will not be provided to anyone with an outstanding unaccounted-for advance.

   Advances over $250 require 48-hour notice to White House Administrative Office, Extension 2500.

2. **ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS**

   Any travel advance which is neither repaid nor accounted for in full by an expense voucher within 15 days after return may be deducted from the staff member's salary.

3. **GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY**

   Government-issued tickets shall be used for official trips only (i.e., no political or personal travel). The entire cost of any government-issued tickets that are used for unofficial travel will be considered a personal travel advance and treated accordingly.

4. **TO OBTAIN REIMBURSEMENT, RECEIPTS ARE REQUIRED FOR ALL EXPENDITURES REGARDLESS OF THE AMOUNT**

5. **FOR DETAILED INFORMATION REGARDING TRAVEL REGULATIONS AND POLICIES, PLEASE REFER TO THE WHITE HOUSE TRAVEL HANDBOOK**
   (Additional copies available by calling Extension 2500.)

TRAVEL VOUCHER WORKSHEET

TRAVELLER: Segal TRIP #: C304 TA#: 65523

Travel Schedule:	DATES	TIMES	PER DIEM
From:	1-Mar-93	09:00	30.00
To:	1-Mar-93	19:30	

	TOTAL EXPENSES	OFFICIAL	POLITICAL
Per Diem (22):	15.00	15.00	0.00
Hotel (24):	0.00	0.00	0.00
Air/Rail Fare (21):	0.00	0.00	0.00
Taxi (25):	0.00	0.00	0.00
POV Mileage (25):	0.00	0.00	0.00
Autorental (26):	0.00	0.00	0.00
Parking (29):	0.00	0.00	0.00
Phone Calls (52):	0.00	0.00	0.00
Other:	0.00	0.00	0.00
LESS ADVANCE:	0.00	0.00	
	15.00	15.00	0.00

Comments:

TRAVEL VOUCHER

(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU DIVISION OR OFFICE	2. TYPE OF TRAVEL	3. VOUCHER NO.
NATIONAL SERVICE	☐ TEMPORARY DUTY ☐ PERMANENT CHANGE OF STATION	4. SCHEDULE NO.

5. TRAVELER (PAYEE)

a. NAME *(Last, first, middle initial)*	b. SOCIAL SECURITY NO.	6. PERIOD OF TRAVEL
SEGAL, ELI J.	(b)(6)	a. FROM 4/1/93 b. TO 4/7/93
c. MAILING ADDRESS *(Include ZIP Code)* 1535 28th ST. NW WASHINGTON, DC 20016	d. OFFICE TELEPHONE NO. 202/456-6444	7. TRAVEL AUTHORIZATION a. NUMBER(S) 185555 b. DATE(S) 3/31
e. PRESENT DUTY STATION WASHINGTON DC	f. RESIDENCE *(City and State)* Washington DC	10. CHECK NO.

8. TRAVEL ADVANCE		9. CASH PAYMENT RECEIPT		11. PAID BY
a. Outstanding		a. DATE RECEIVED	b. AMOUNT RECEIVED $	
b. Amount to be applied				
c. Amount due Government *(Attached: ☐ Check ☐ Cash)*		c. PAYEE'S SIGNATURE		
D. Balance outstanding				

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side.)*

I hereby assign to the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials*

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER *(Initials)* (b)	MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
				DCA Pittsburgh Detroit Chicago New Orleans Cincinnati	PITTSBURGH Lansing Chicago New Orleans Cincinnati DCA

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ | DATE | AMOUNT CLAIMED ▶ $

NOTE: Falsification of an item in an expense account works a forfeiture of claim (26 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ | DATE

17. FOR FINANCE OFFICE USE ONLY

COMPUTATION $

a. DIFFERENCES, IF ANY *(Explain and show amount)*

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION *Certifier's initials:* $

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol):* $

d. NET TO TRAVELER ▶ $

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ | DATE

18. ACCOUNTING CLASSIFICATION

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self-explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationship to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel

Col. (d) thru (g) Show amounts incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE ____ OF ____ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME

DATE 19 93 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS BREAKFAST (d)	MEALS LUNCH (e)	MEALS DINNER (f)	MEALS TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: ¢ NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
4/1	5:15 PM	Depart DCA											
4/4	4pm	ARRIVE DCA											
										SUBTOTALS ▶			
										TOTALS ▶			

If additional space is required, continue on another SF 1012-A BACK. leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

Contact person:
Phone number:
Date of request:

ACCEPTANCE OF TRAVEL EXPENSES FROM OUTSIDE SOURCE

In order to consider whether the Government may accept from an outside source payment of your travel, subsistence and related expenses under the GSA travel rule, you must complete the information below. The outside source need not be a 501(c)(3) organization, but if it is, please state so on this form and include the IRS determination letter.

Please include a copy of the letter of invitation if one was received.

Your name and position:

Nature of meeting or similar function and how it relates to your official duties:

Date and place(s) of travel:

Persons or entity making the payment (please also note any financial interests of the person or entity known to you that may be affected by the exercise of your Government responsibilities):

Nature of expense(s) paid for:

Method and approximate amount of payment (payment may be made either in-kind or by check made payable to U.S. Treasury; you may not directly receive payment in cash or check made out to you):

This form and any accompanying memorandum of approval must be attached to your travel authorization. You must complete a travel voucher following the trip. Please send completed form to Room 128, OEOB, at least 3 days before commencement of travel.

THE WHITE HOUSE OFFICE
TRAVEL AUTHORIZATION

NO. 65555

Date of Request March 31, 1993

1. **TRAVELER:**

Name: ELI J. SEGAL ☒ White House Staff

Extension: 456-6444 Room: 145- OEOB ☐ Other:

2. **PURPOSE(s) and DATE(s):** KEYNOTE ADDRESS AT CAMPUS COMPACT IN E. LANSING, MI

MEETING W/LT.GOV. OF LA; VISIT TO XAVIER UNIV. MENTORING PROGRAM; MEETING W/LOUISIANA

SERVE. APRIL 1-4, 1993

3. **ITINERARY:** DCA - E.LANSING - NEW ORLEANS - DCA

(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
4/1	6 PM	COMMERCIAL	4/4	AFTERNOON	COMMERCIAL

5. **FUNDING SOURCE:**

☒ OFFICIAL ☐ POLITICAL ☐ 501 (c) (3) ☐ OTHER

6. **SPECIAL EXPENSES**

☒ Commercial Car Rental ☑ Taxi $50

$66 ☒ Hotel Name: $198

PP ☐ Other: $90.00

TRAVEL ADVANCE REQUESTED

☐ Yes ☐ No ☐ Amount $

Recipient's Signature:

Date:

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. TRAVELER'S SIGNATURE: [signature]

(I have read and agree to the terms set forth on the reverse side.)

8. APPROVING SIGNATURES:

Office Head: [signature]

Approving Official (Political or Foreign Travel):

Special Assistant to the President and Director of White House Operations: [signature]

9. *FOR TRANSPORTATION OFFICE USE ONLY:* 0054OF 903165/166

Control No.: 91-686-020 Account: $1013.00

(REV. 6/21/89)

585 $1,300 M3/4 **ORIGINAL (Return with Voucher)**

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. ADVANCES FOR OFFICIAL TRAVEL ONLY

   Cash travel advances will not be provided for political trips.

   Advances will not be provided to anyone with an outstanding unaccounted-for advance.

   Advances over $250 require 48-hour notice to White House Administrative Office, Extension 2500.

2. ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS

   Any travel advance which is neither repaid nor accounted for in full by an expense voucher within 15 days after return may be deducted from the staff member's salary.

3. GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY

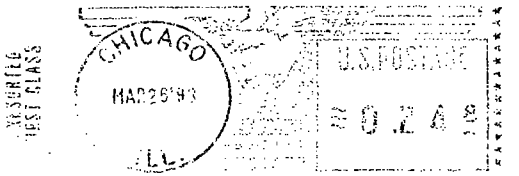
   Government-issued tickets shall be used for official trips only (i.e., no political or personal travel). The entire cost of any government-issued tickets that are used for unofficial travel will be considered a personal travel advance and treated accordingly.

4. TO OBTAIN REIMBURSEMENT, RECEIPTS ARE REQUIRED FOR ALL EXPENDITURES REGARDLESS OF THE AMOUNT

5. FOR DETAILED INFORMATION REGARDING TRAVEL REGULATIONS AND POLICIES, PLEASE REFER TO THE WHITE HOUSE TRAVEL HANDBOOK
   (Additional copies available by calling Extension 2500.)

THE PALMER HOUSE HILTON
17 East Monroe Street, Chicago, Illinois 60603

The Palmer House Hilton



HILTON

CONRAD
HOTELS
Conrad International Hotels
The International Subsidiary of Hilton USA

HILTON SUITES

CREST HILL
BY HILTON

RESERVATIONS

1-800/HILTONS

FAMILY PLAN

Children stay free regardless of age,
when they occupy the same room as their parents.

March 24-25 Trip Details

March 24

7:00pm	Leave for National Airport
8:00pm	Depart, American Airlines flight # 673, seat #20A
9:01pm	Arrive, O'Hare Airport, Chicago
9:20pm	Take taxi to Palmer House, 17 E. Monroe St., Chicago, 312-726-7500, room reservation #185681250

March 25

7:55am	check luggage
8:00am	breakfast with Charles Moskos, French Quarter restaurant, Palmer House
9:30-10:30	Meeting with Adele Simmons, President, MacArthur Foundation, Suite 700, 140 South Dearborn St., 312-726-8000, contact: Kelly, agenda? (Susan)
10:30-11:30	Meeting with community representatives at Adele Simmon's invitation, MacArthur Foundation: Tom Lenz, Exec. Director, Chicago Local Initiative Support Corp. Mary Nelson, Exec. Director, Bethel New Life Rebecca Riley, Vice President, Chicago Affairs Elsbeth Revere, MacArthur Foundation Dorris Pickens (invited), The Neighborhood Institute
11:45-12:30	Meeting with media at Palmer House (Diana) • 11:45-12:15 The Chicago Defender, Marian Moore, Palmer House concierge desk in lobby, contact: Eugene Scott, 312-225-2400 • 12:15-12:45 The Chicago Sun Times, Roger Flatery, national news desk/education reporter, contact ?, meet at concierge desk
1:00-2:00pm	Billy Daley, Palmer House dining room; Billy Daley to invite others at Eli's suggestion
2:00pm	Collect luggage at desk and take taxi to O'Hare Airport
3:15pm	Depart American Airlines flight # 4080, seat # 7D to Champaign, IL
4:10pm	Arrive Champaigne, IL airport; met by Shirley Ho, Co-chair of Volunteer Illini Projects and Kristin Parrish, Executive Director of COOL at the gate; conference schedule and other information attached
4:30pm	Meeting with representatives of student service organizations (list attached), 404 Illini Union, 1401 W. Green St., Urbana.

5:00-5:15pm	Phone interview with WGN Radio-Chicago with Al Lerner (most popular Chicago talk show show airing nightly between 5-9); Eli must call Dan Falato, 312-644-9710 or 312-644-2468
5:15-5:30pm	Daily Illini (university of Illinois paper) to be confirmed Room 406 Illini Union?
5:30-5:45	WICD Television (Champaigne NBC affiliate), taped television interview, contact: Rick Porter, assignment editor, 217-351-8500; to be confirmed
5:50-6:20pm	preparation for speech, where? (Susan)
6:20pm	Escorted to Foellinger Auditorium
6:30-7:00pm	Keynote speech, Foellinger Auditorium (Eric for speech; attached)
7:00pm	**sharp departure for Champaign airport,** driven by Shirley Ho
7:45pm	Depart American Airlines flight # 4363, seat #5A
8:45pm	Arrive, O'Hare Airport; dinner in airport
9:50pm	Depart American Airlines flight # 1040, seat #11D
12:27am	Arrive National Airport; take taxi home

March 25, 1993
Thursday

8 AM		3 PM	3:15-4:10pm Chicago - Champaign (AA #4080)
9 AM	9:00-9:25am Interview w/NPR radio (WPEZ) 9:30-10:30am Adele Simmons, Pres., MacArthur Foundation	4 PM	4:30-5:45pm COOL Conference Mtgs
10 AM	10:30-11:30am Meet w/Community Reps	5 PM	
11 AM	11:45am-12:15pm Chicago Defender at Palmer House	6 PM	6:00-6:30pm Speech Prep 6:30-7:00pm Keynote Address for COOL
12 PM	12:15-12:45pm Bkft w/Karen Klagus, Tribune	7 PM	7:00pm PROMPT DEPARTURE FOR CHAMPAIGN AIRPORT 7:45-8:45pm Champaign - Chicago (AA #4363)
1 PM	1:00-2:00pm Lunch w/Bill Daley at Palmer House	8 PM	
2 PM	2:00pm Collect luggage & taxi to OHare	9 PM	9:50pm-12:27am Chicago - DCA (AA #1040)

Palmer House, 17 E. Monroe (312-726-7500)

March 24, 1993

Wednesday

8 AM		3 PM	
9 AM	9:15am National Service Staff Meeting	4 PM	4:00pm Steve Waldman, Newsweek
10 AM		5 PM	
11 AM		6 PM	
12 PM		7 PM	7:15pm DEPART FOR NATIONAL AIRPORT
1 PM	1:00-1:30pm Jack Calhoun re: Police Corps	8 PM	8:00-9:01pm Fly to Chicago
2 PM		9 PM	

7:45am White House Senior Staff Meeting

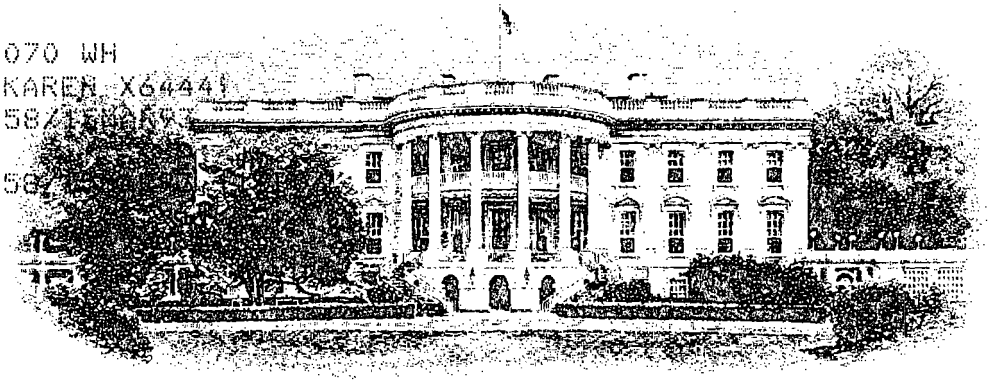
WHITE HOUSE TRAVEL OFFICE

Washington, D.C. 20500

(202) 456-2250

ITINERARY

```
*A
 1.1SEGAL/ELI*WH65522
 1  AA 673V 24MAR W DCAORD SS1    800P  901P /DCAA
 2  AA4080B 25MAR Q ORDCMI SS1    315P  410P /DCAA
 3  AA4363V 25MAR Q CMIORD SS1    745P  845P /DCAA
 4  AA1040V 25MAR Q ORDDCA SS1    950P 1227A  26MAR F /DCAA
TKT/TIME LIMIT
  1.TAW23MAR/
PHONES
  1.WAS202-456-2250-A
REMARKS
  1.-GTR A1-646-070 WH
RECEIVED FROM - KAREN X6444
D9K0.D9K0*AJM 1458/15MAR97
D9K0.D9K0*AJM 1458/15MAR97
```



THE WHITE HOUSE OFFICE
TRAVEL AUTHORIZATION

NO. 65522

Date of Request: MARCH 9, 1993

1. **TRAVELER:**

Name: _____ ☒ White House Staff

Extension: 456-6444 Room: _____ ☐ Other: _____

2. **PURPOSE(s) and DATE(s):** COOL (CAMPUS OUTREACH OPPORTUNITY LEAGUE) NATIONAL CONFERENCE MARCH 25-27 IN CHAMPAIGN, ILL

3. **ITINERARY:** _____
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
3/24	LATE FLIGHT	COMMERCIAL	3/25/93	LAST FLIGHT	COMMERCIAL

5. **FUNDING SOURCE:**

☒ OFFICIAL ☐ POLITICAL ☐ 501 (c) (3) ☐ OTHER _____

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☒ Amount $ _____
☒ Hotel Name: _____	Recipient's Signature: _____
☐ Other: _____	Date: _____

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:** _____
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head: _____

Approving Official
(Political or Foreign Travel): _____

Special Assistant to the President and
Director of White House Operations: _____

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No.: _____ Account: _____

(REV. 6/21/89)

ORIGINATING OFFICE COPY

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. **ADVANCES FOR OFFICIAL TRAVEL ONLY**

   Cash travel advances will not be provided for political trips.

   Advances will not be provided to anyone with an outstanding unaccounted-for advance.

   Advances over $250 require 48-hour notice to White House Administrative Office, Extension 2500.

2. **ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS**

   Any travel advance which is neither repaid nor accounted for in full by an expense voucher within 15 days after return may be deducted from the staff member's salary.

3. **GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY**

   Government-issued tickets shall be used for official trips only (i.e., no political or personal travel). The entire cost of any government-issued tickets that are used for unofficial travel will be considered a personal travel advance and treated accordingly.

4. **TO OBTAIN REIMBURSEMENT, RECEIPTS ARE REQUIRED FOR ALL EXPENDITURES REGARDLESS OF THE AMOUNT**

5. **FOR DETAILED INFORMATION REGARDING TRAVEL REGULATIONS AND POLICIES, PLEASE REFER TO THE WHITE HOUSE TRAVEL HANDBOOK**
   (Additional copies available by calling Extension 2500.)

Wednesday, March 24

LV DCA 8:00 p.m. AA #673
AR CHI 9:01 p.m.

RON: Hotel in Chicago (ask David Wilhelm) Parker House

Thursday, March 25

9:00 ↑
8:00 Breakfast w/Tribune Karen Klagus

Various interviews w/Chicago papers
Visit to Mayor Daley
9:30 a.m. -10:30 Adele Simmons, MacArthur Foundation

LV CHI 3:15 a.m. AA #4080 11 (12) Lunch w/ BILL DALEY
AR Champaign 4:10 p.m.
Cool meet you at airport

6:30 p.m. COOL Event

LV Champaign 7:45 p.m. AA #363
AR Chicago 8:45 p.m.

LV Chicago 9:50 p.m. AA #1060
AR DCA 12:27 a.m.

3/31 issue

Thursday, April 1

LV DCA 6:05 p.m. US Air #1149
AR PIT 7:05 p.m.

✓

LV PIT 7:45 p.m. US Air #251
AR ELA 8:52 p.m.

RON: E. Lansing Hotel Kellogg Ctr - MI STATE UNIV

Friday, April 2

8:00 Breakfast

9:00 a.m. – 10 Keynote address for MI Campus Compact Conference

AA15 Rental car to drive to Ann Arbor 58 miles

2:00 p.m. Visit to service site at Univ. of MI, Ann Arbor w/Cong. Bill Ford

Drive from Ann Arbor to Detroit 29 miles

6:45 – 8:24 NW Coach #

LV DET 7:55 p.m. DL #1507
AR ATL 9:31 p.m.

LV ATL 10:45 p.m. DL #1111
AR New Orleans 11:05 p.m.

Friday, April 2 (cont)

RON: Royal Sonesta, 300 Bourbon Street, New Orleans, LA 70140
Phone: 504-586-0300 Fax: 504-586-0300

Saturday, April 3

Brunch at _____ with Jay Kriegel, Alan Levine, Moon Landrieu

Basketball games begin at 7:30 p.m. in the Superdome

RON: Royal Sonesta

Sunday, April 4

LV	New Orleans	5:05 p.m.	US Air #293	$320
AR	DCA	8:18 p.m.		

x 2250 TRAVEL
John

$713
-174

March 24-25 Trip Book

March 24	
7:00pm	Leave for National Airport (Susan will pick you up at your house in a cab)
8:00pm	Depart, American Airlines flight # 673, seat #
9:01pm	Arrive, O'Hare Airport, Chicago
9:20pm	Take taxi to Palmer House, address?, room reservation #
March 25	
8:00-9:00am	Breakfast meeting, Palmer House coffee shop, with Karen Klagus, Chicago Tribune title?, and Chicago Sun Times?
9:15am	check luggage at hotel desk
9:30-10:30	Meeting with Adele Simmons, President, MacArthur Foundation, address?, agenda?
10:30-11:30	Meeting with media? at MacArthur Foundation?
11:30-12:30	Meeting with community representatives? MacArthur Foundation? agenda? whose invitation?
1:00-2:00pm	Billy Daley, Palmer House restaurant, name?, agenda? – confirmed
2:00pm	Collect luggage at desk and take taxi to O'Hare Airport
3:15pm	Depart American Airlines flight # 4080 to Champaign, IL
4:10pm	Arrive Champaigne, IL airport; met by ? at ?
4:30pm	Arrive COOL conference, address?, met by? conference schedule and other background infor attached
4:30-6:00pm	meeting possibilities: COOL Board; student and youth press (30 min); courtesy call with Morton Weir, President of University of Illinois; invite group of organizations at conference
6:00-6:30pm	preparation for speech, where?
6:30-7:00pm	keynote speech, (Eric for speech; attached)
7:00pm	**sharp departure for Champaign airport,** driver?
7:45pm	Depart American Airlines flight # 4363
8:45pm	Arrive, O'Hare Airport; dinner in airport
9:50pm	Depart American Airlines flight # 1040
12:27am	Arrive National Airport; take taxi home

Palmer House Hilton
Chicago
312-726-7500

17 EAST MONROE
Chicago, IL

$87

185681250 conf #1
185681262 conf #2