

FOIA MARKER

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Collection/Record Group: Clinton Presidential Records

Subgroup/Office of Origin: National AIDS Policy Office

Series/Staff Member:

Subseries:

OA/ID Number: 21073

FolderID:

Folder Title:

10/17/1997 - 10/20/1997 Atlanta

Stack:

S

Row:

67

Section:

1

Shelf:

1

Position:

2

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. form	re: Travel authorization [Personally Identifiable Information] [partial] (1 page)	10/14/1997	b(6)
002. form	re: Travel voucher [Personally Identifiable Information] [partial] (1 page)	11/17/1997	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 21073

FOLDER TITLE:

10/17/1997 - 10/20/1997 Atlanta

2018-0769-F

im2164

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]
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- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
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EXECUTIVE OFFICE OF THE PRESIDENT
OFFICIAL TRAVEL AUTHORIZATION
(Privacy Act Statement on back)

1. TRAVEL AUTHORIZATION NO. TA001748
2. DATE 10/14/97

4. TRAVELER (First name, middle initial, last name)

SANDRA L. THURMAN

5. TITLE OF TRAVELER

DIRECTOR, AIDS POLICY

6. SOCIAL SECURITY NUMBER

(b)(6)

7. AGENCY

750 17TH STREET,

8. DIVISION

OPD

9. OFFICE PHONE

632-1090

10. OFFICIAL DUTY STATION

WASHINGTON, DC [001]

11. Per Diem

Actual Subsistence (unusual circumstances)*

Rate(s):

12. TRAVEL INFORMATION

PURPOSE: Atlanta AIDS Walk - Speaker & other events

DATE(S): Travel Begin On 10/17/1997

Travel End On 10/20/1997

ITINERARY: (Point of Origin/Place(s) of Official Visitation/Point of Return)

From: WASHINGTON, DC

To: ATLANTA, GA 96/38

To:
To:
To:
To:
To:

To:
To:
To:
To:

Return to: WASHINGTON, DC

13. MODE OF TRAVEL

Commercial Air

Private Vehicle 0.000 Mileage Rate

Rail

Military Air

Government Owned Vehicle

Other (specify)

14. SPECIAL EXPENSE AUTHORIZED

- Registration Fees (meeting, training, etc.)
- Commercial Rental Car
- Excess Baggage not to exceed
- Other (Please identify)

15. ESTIMATED COST

AMOUNT

Per Diem/Lodging	\$ 384.00
Per Diem/M&IE	171.00
Transportation	520.00
Rental Car	0.00
Miscellaneous	0.00
TOTAL	\$ 1,075.00

16. ADVANCE REQUESTED (meals and miscellaneous expenses only) \$ 0.00

17. * SPECIAL PROVISIONS/REMARKS (Justification for first class/business/extra fare travel, annual leave enroute, actual subsistence, etc.)

18. ACCOUNTING DATA (Appropriation, division, project, vendor number)

1182200 J108E

19. REQUESTED BY

21. Funds are available to defray travel cost specified above

Funds Manager's Certification (Signature)

Asley Lewis 10/16/97

20. I certify the travel herein was reviewed and determined

to be essential for the accomplishment of agency programs and missions in the most economical means available.

Approval Official (Signature and Title)

Paul J. ...

OA FORM 22

REVISED JUNE 1994

1. Original (Return with voucher)

4. Teleticketing Office

2. FMD copy

5. Funds Manager copy

3. Advance of funds

6. Travelers copy

EASYLINK 1437109L001 14OCT97 08:28/08:28 EST
FROM: 62029160
AMERICAN EXPRESS TRAVEL
TO: 2026321096

SALES PERSON: 42 ITINERARY DATE: 14 OCT 97
CUSTOMER NBR: 1695000023 STZGUQ PAGE: 01

TO: WHITE HOUSE TRAVEL
1500 PENNSYLVANIA AVE
WASH DC 20500

FOR: THURMAN/SANDRA

16 OCT 97 - THURSDAY

AIR DELTA AIR LINES INC FLT:801 COACH
LV WASHINGTON NATL 400P EQP: BOEING 757
DEPART: NEW TERMINAL
AR ATLANTA 551P NON-STOP
THURMAN/SANDRA SEAT-37E

OTHER ATLANTA

AISLE/WINDOW SEAT NOT AVAILABLE ON DELTA FLIGHT 801. A
CENTER SEAT HAS BEEN CONFIRMED.

20 OCT 97 - MONDAY

AIR DELTA AIR LINES INC FLT:690 COACH
LV ATLANTA 825A EQP: BOEING 757
AR WASHINGTON NATL 1000A NON-STOP
ARRIVE: NEW TERMINAL
THURMAN/SANDRA SEAT-34F

14 APR 98 - TUESDAY

OTHER WASHINGTON
THANK YOU FOR USING AMERICAN EXPRESS.

SALES PERSON: 42
CUSTOMER NBR: 1695000023

ITINERARY
STZGUQ

DATE: 14 OCT 97
PAGE: 02

TO: WHITE HOUSE TRAVEL
1500 PENNSYLVANIA AVE
WASH DC 20500

TAG001748

FOR: THURMAN/SANDRA

. TOTAL AIR FARE USD520.00

. SECURITY ALERT INFORMATION
DUE TO THE FAA MANDATED INCREASE IN AIRPORT SECURITY
YOU MAY BE REQUIRED TO PRODUCE A PHOTO IDENTIFICATION
AT AIRPORT CHECKIN.

FOR AFTER HOUR EMERGENCIES
CALL 800-847-0242/YOUR HOTLINE CODE IS S-KC52

. REMINDER
ALL FREQUENT FLYER BENEFITS EARNED ON OFFICIAL TRAVEL
ARE THE SOLE PROPERTY OF THE U.S. GOVERNMENT AND CANNOT
BE REDEEMED FOR PERSONAL USE.

. ALL UNUSED TICKETS ARE TO BE RETURNED TO AMERICAN
EXPRESS OR YOUR TRAVEL COORDINATOR IMMEDIATELY UPON
RETURN FROM TRAVEL OR WHEN TRIP HAS BEEN CANCELED.

. THANK YOU FOR TRAVELING WITH AMERICAN EXPRESS.

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TRAVEL VOUCHER <small>(Read Privacy Act Statement on the back)</small>		1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE OPD		2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> PERMANENT CHANGE OF STATION		3. VOUCHER NO. TA001748	
5. a. NAME (Last, first, middle initial) THURMAN, SANDRA L. [002]		b. SOCIAL SECURITY NO. (b)(6)		4. SCHEDULE NO.		6. PERIOD OF TRAVEL a. FROM 10/17/97 b. TO 10/20/97	
c. MAILING ADDRESS (Include ZIP Code) OEOB, ROOM 145 MGT&ADMIN WASHINGTON, DC 20502		d. OFFICE TELEPHONE NO. 632-1090		7. TRAVEL AUTHORIZATION a. NUMBER(S) TA001748 b. DATE(S) 11/17/97		10. CHECK NO.	
e. PRESENT DUTY STATION WASHINGTON, DC		f. RESIDENCE (City and State) Washington, DC		11. PAID BY			
8. TRAVEL ADVANCE		9. CASH PAYMENT RECEIPT					
a. Outstanding 0.00		a. DATE RECEIVED		b. AMOUNT RECEIVED \$			
b. Amount to be applied 0.00		c. PAYEE'S SIGNATURE					
c. Amount due Government (Attached <input type="checkbox"/> Check <input type="checkbox"/> Cash)							
D. Balance outstanding							

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH <small>(List by number below and attach passenger coupon; if cash is used show claim on reverse side)</small>	I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FFMR 101-7) ▶ <i>Traveler's Initials</i>					
	AGENT'S VALUATION OF TICKET <small>(a)</small>	ISSUING CARRIER <small>(Initials)</small>	MODE CLASS OF SERVICE AND ACCOMMODATIONS <small>(c)</small>	DATE ISSUED <small>(d)</small>	POINTS OF TRAVEL	
006214643685 1	520.00			10/17/97	DCA-Washingt	ATL-Atlanta,

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.			DATE	AMOUNT CLAIMED	245.87
SIGN HERE ▶					
<small>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).</small>					

14. This voucher is approved. Long distance phone 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).)			17. FOR FINANCE OFFICE USE ONLY COMPUTATION		
APPROVING OFFICIAL SIGN HERE ▶			a. DIFFERENCES, IF ANY (Explain and show amount)		
DATE			\$		
15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION			b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION		
a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR	Certifier's initials: \$		
16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT			c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): \$ 0.00		
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶			d. NET TO TRAVELER ▶ \$ 245.87		
DATE					

18. ACCOUNTING CLASSIFICATION					
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