

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 AIDS Policy Office

Series/Staff Member:

Subseries:

OA/ID Number: 21073

FolderID:

Folder Title:

3/2/1998 Georgia to Vice President

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 voucher [Personally Identifiable Information] [partial] (1 page)	03/02/1998	b(6)
002. form	re: Travel authorization [Personally Identifiable Information] [partial] (1 page)	03/02/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 21073

FOLDER TITLE:

3/2/1998 Georgia to Vice President

2018-0764-F

jm2175

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(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]

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SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED	INSTRUCTIONS TO TRAVELER <i>(Unlisted items are self explanatory)</i>										Complete this information if this is a continuation sheet.		
	<i>Col. (c)</i> If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)										<i>Complete only for actual expense travel</i>		PAGE <u>2</u>
	<i>Col. (d) thru (n)</i> Show amount incurred for each meal, including tax and tips, and daily total meal cost. <i>(h)</i> Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals). <i>(i)</i> Complete for per diem and actual expense travel. <i>(j)</i> Show total subsistence expense incurred for actual expense travel. <i>(m)</i> Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate. <i>(n)</i> 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.										OF _____ PAGES		
	TRAVEL AUTHORIZATION NO. TA002377												
TRAVELER'S LAST NAME THURMAN													

DATE 98 19	TIME (Hour and am/pm)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses)	ITEMIZED SUBSISTENCE EXPENSES							MILEAGE RATE: 0.000 NO. OF MILES	AMOUNT CLAIMED		
			MEALS				MISCELLANEOUS SUBSISTENCE	LODGING	TOTAL SUBSISTENCE EXPENSE		MILEAGE	SUBSISTENCE	OTHER
			BREAK-FAST	LUNCH	DINNER	TOTAL							
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)
03/02	7:55A	D- :Andrews AFB											
03/02	2:00P	A- :ATLANTA, GA											
03/02		:			Air Force II								
03/02	9:15P	D- :ATLANTA, GA											
03/02	8:15P	A- :COLUMBUS, GA				28.50			28.50			28.50	
03/02	1:30P	D- :COLUMBUS, GA											
03/02	10:35P	A:Andrews AFB											

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

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 you 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.

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

TOTAL AMOUNT CLAIMED ▶

28.50

Ashley L. Raines

03/02/98 11:31:11 AM

Record Type: Record

To: Sarah T. Holewinski/OPD/EOP

cc:

Subject: Sandy's trip

Here's the scoop on the trip with the VPOTUS:

7:55am	depart Andrews AFB to Columbus, Georgia for education events and
meetings	with education leaders
1:30pm	depart Columbus for Atlanta for more education events and Georgia
Democratic	party events and a JJ(?) dinner
9:15pm	depart Atlanta
10:35pm	arrive Andrews AFB

Please get a TA over to me ASAP. Thanks.

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EXECUTIVE OFFICE OF THE PRESIDENT
OFFICIAL TRAVEL AUTHORIZATION

(Privacy Act Statement on back)

1. TRAVEL AUTHORIZATION NO.
TA002377

2. DATE
03/02/98

3. TYPE OF TRAVEL

- ☒ Official
☐ Relocation
☐ Mixed
☐ Political

- ☐ Invitational
(Non EOP Employees Only)
☐ Amendment
(Show items amended)
☐ Funded by
Non-Federal Sources

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

SANDRA L. THURMAN

5. TITLE OF TRAVELER

DIRECTOR, AIDS POLICY

6. SOCIAL SECURITY NUMBER

(b)(6)

[002]

7. AGENCY

750 17TH STREET, OPD

8. DIVISION

OPD

9. OFFICE PHONE

632-1090

10. OFFICIAL DUTY STATION

WASHINGTON, DC

11. ☒ Per Diem

☐ Actual Subsistence (unusual circumstances)*

Rate(s):

12. TRAVEL INFORMATION

PURPOSE: Columbus: events with educational leaders/Atlanta: educational events and Georgia Democratic Party events.

DATE(S): Travel Begin On 3 / 2 / 1998

Travel End On 3 / 2 / 1998

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

From: Andrews AFB

To: ATLANTA, GA 97 / 38

To: COLUMBUS, GA 63 / 30

To:

To:

To:

To:

To:

To:

To:

To:

Return to: Andrews AFB

13. MODE OF TRAVEL

☐ Commercial Air

☐ Private Vehicle 0.000 Mileage Rate

☐ Rail

☒ Military Air / AIR FORCE II

☐ 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	\$ 0.00
Per Diem/M&IE	28.50
Transportation	0.00
Rental Car	0.00
Miscellaneous	0.00
TOTAL	\$ 28.50
16. ADVANCE REQUESTED	\$ 0.00

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

~~Travel expenses approved by the Office of the Vice President. Traveler will~~
1 receive reimbursement for per diem only.

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

1182200 JOSE

19. REQUESTED BY

21. Funds are available to defray travel cost specified above

Funds Manager's Certification (Signature)

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)

OA FORM 22

REVISED JUNE 1994

1. Original (Return with voucher)

4. Ticketing Office

2. FMD copy

5. Funds Manager copy

3. Advance of funds

6. Traveler's copy

Ashley L. Raines

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