

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: 21071

FolderID:

Folder Title:

10/14/1999 - 10/16/1999 Detroit

Stack:

S

Row:

67

Section:

1

Shelf:

2

Position:

3

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. form	re: Travel authorization [Personally Identifiable Information] [partial] (1 page)	10/13/1998	b(6)
002. form	re: Travel voucher [Personally Identifiable Information] [partial] (1 page)	10/13/1998	b(6)
003. invoices	re: Omni Hotels (Personal credit card numbers) (2 pages)	02/11/1999	b(6)
004. form	re: Travel authorization [Personally Identifiable Information] [partial] (1 page)	10/13/1998	b(6)
005. invoice	re: St. Moritz on the Park (Personal credit card number) (1 page)	10/14/1998	b(6)
006. invoice	re: American Express Travel (Personal credit card number) (1 page)	10/13/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 21071

FOLDER TITLE:

10/14/1999 - 10/16/1999 Detroit

2018-0764-F

jm2204

RESTRICTION CODES

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

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

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.

b(1) National security classified information [(b)(1) of the FOIA]
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EXECUTIVE OFFICE OF THE PRESIDENT
OFFICIAL TRAVEL AUTHORIZATION
(Privacy Act Statement on back)

1. TRAVEL AUTHORIZATION NO.
TA003807

2. DATE
10/13/98

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)

7. AGENCY

736 Jackson Plac

8. DIVISION

OPD

9. OFFICE PHONE

395-1441

10. OFFICIAL DUTY STATION

WASHINGTON, DC

11. ☒ Per Diem

☐ Actual Subsistence (unusual circumstances)*

Rate(s):

12. TRAVEL INFORMATION

PURPOSE: New York: Speaking to the GMHC Board of Directors, Interview with Vogue
Mag./Michigan: Events with Mayor Archer (see itinerary)

DATE(S): Travel Begin On 10/14/1998

Travel End On 10/16/1998

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

From: Washington, DC

To: DETROIT, MI 89/ 38

To:

To:

To:

To:

To: NEW YORK CITY, NY 198/ 42

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	\$ 287.00
Per Diem/M&IE	98.00
Transportation	428.00
Rental Car	0.00
Miscellaneous	0.00
TOTAL	\$ 813.00

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)

119 2200 3108 E

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. Travelers copy

EASYLINK 8330662L001 13OCT98 14:13/14:14 EST
FROM: 62029160
AMERICAN EXPRESS TRAVEL
TO: 2024562439

SALES PERSON: 71
CUSTOMER NBR: 1695000023

ITINERARY

UXMJVD

DATE: 13 OCT 98
PAGE: 01

TO: WHITE HOUSE TRAVEL
1600 PENNSYLVANIA AVE
WASH DC 20500

FOR: THURMAN/SANDY

14 OCT 98 - WEDNESDAY

AIR DELTA AIR LINES INC FLT:1746 COACH
LV WASHINGTON REAGAN 930A
DEPART: TERMINAL B/C
AR NEW YORK LGA 1030A
ARRIVE: MARINE AIR TERMINAL

SNACK/BRUNCH
EQP: 727 STRETCH
01HR 00MIN
NON-STOP
REF: SPBDMX

15 OCT 98 - THURSDAY

AIR NORTHWEST AIRLINES FLT:69 COACH
LV NEW YORK LGA 930A
DEPART: DELTA TERMINAL
AR DETROIT METRO 1123A
ARRIVE: MAIN TERMINAL
THURMAN/SANDY SEAT-20F

EQP: BOEING 757
01HR 53MIN
NON-STOP
REF: DPXEGD

16 OCT 98 - FRIDAY

AIR NORTHWEST AIRLINES FLT:1478 COACH
LV DETROIT METRO 500P
DEPART: MAIN TERMINAL
AR WASHINGTON REAGAN 630P
ARRIVE: MAIN TERMINAL

EQP: DC-9 STRETCH
01HR 30MIN
NON-STOP
REF: DPXEGD

16 APR 99 - FRIDAY

OTHER WASHINGTON

THIS DATE IS FOR AMERICAN EXPRESS HISTORICAL DATA ONLY.

CONTINUED ON PAGE 2

KORN/FERRY INTERNATIONAL

October 7, 1998

Ms. Sandy Thurman
Office of the White House AIDS Program
736 Jackson Place NW
Washington, DC 20503

Dear Sandy:

I am pleased to confirm your appointment with the GMHC Search Committee on Wednesday, October 14th at 11:30 a.m. The meeting will be held at the office of Vaughn Williams, Chair of the Search Committee.

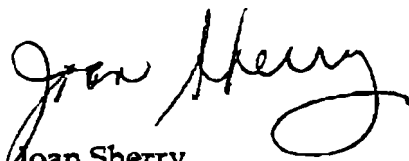
Skadden, Arps, Slate, Meagher & Flom
919 Third Avenue - 33rd Floor
(enter on 55th Street)
New York, NY 10022
(212) 735-3470

Please arrive at 11:00 a.m. in the event the Search Committee wishes to start a little earlier. Plan to spend between one and one and a half hours with the Committee.

I have enclosed for your review:

- List of Search Committee members
- Additional GMHC materials

Sincerely,


Joan Sherry
Senior Associate

enclosures

200 PARK AVENUE, 37TH FLOOR, NEW YORK, NY 10166
TEL: 212-687-1834 FAX: 212-986-5684

NORTH AMERICA

ATLANTA
BOSTON
CHICAGO
DALLAS
HOUSTON
LOS ANGELES
MENLO PARK
MIAMI
MINNEAPOLIS
NEW YORK
NEWPORT BEACH
PHILADELPHIA
PRINCETON
SAN FRANCISCO
SEATTLE
STAMFORD
TORONTO
WASHINGTON, D.C.

EUROPE

AMSTERDAM
ATHENS
BARCELONA
BIRMINGHAM
BRATISLAVA
BRUSSELS
BUCHAREST
BUDAPEST
DUSSELDORF
FRANKFURT
GENEVA
GOTHENBURG
ISTANBUL
LONDON
LUXEMBOURG
MADRID
MILAN
MOSCOW
OSLO
PARIS
PRAGUE
ROME
STOCKHOLM
VIENNA
WARSAW
ZURICH

ASIA/PACIFIC

BANGKOK
BEIJING
BOMBAY
HONG KONG
JAKARTA
KUALA LUMPUR
MELBOURNE
NEW DELHI
SEOUL
SHANGHAI
SINGAPORE
SYDNEY
TOKYO
WELLINGTON

LATIN AMERICA

BOGOTA
BUENOS AIRES
CARACAS
LIMA
MEXICO CITY
MONTERREY
SANTIAGO
SAO PAULO

Friday's invitation to address info: FYI

**THE WHITE HOUSE
WASHINGTON**



Sandra L. Thurman
Director
Office of National AIDS Policy

Sandra L. Thurman was appointed by the President on April 7, 1997 as the Director of the Office of National AIDS Policy at the White House

For more than a decade, Ms. Thurman has been a leader and advocate for people with AIDS at the local, state and federal levels.

Most recently, Ms. Thurman served as the Director of Citizen Exchanges at the United States Information Agency From 1993 to 1996 Ms. Thurman was the Director for Advocacy Programs at The Task Force for Child Survival and Development at the Carter Center In Atlanta, Georgia. As Director, she focused on the global health concerns of children, including immunization and the eradication of polio.

From 1988 to 1993, Ms. Thurman, of Atlanta, Georgia, served as the Executive Director of AID Atlanta, a community-based nonprofit organization that provides health and support services to people living with HIV/AIDS and offers an array of HIV prevention programs. Under her leadership, AID Atlanta, the largest and oldest AIDS service organization in the south, tripled in size, and became a multimillion dollar, direct-service agency with 90 staff members and more than 1,000 volunteers.

Ms. Thurman was a Member of the Presidential Advisory Council on HIV/AIDS and of the Georgia State AIDS Task Force, the Fulton County HIV Planning Council, and the Executive Committee of Cities Advocating Emergency AIDS Relief (CAFAR). She has also served on the Board of Directors of the National Episcopal AIDS Coalition, AID Atlanta, Sisterlove, Inc. and the Atlanta AIDS Interfaith Network, among others. She is a recognized expert on AIDS issues and has provided testimony before the United States Senate, the White House Conference on HIV/AIDS and the National Commission on AIDS.

Ms. Thurman earned a Bachelor's degree from Mercer University.

The Board of Directors and Staff of
MICHIGAN AIDS FUND,
a supporting organization of the Council of Michigan Foundations
cordially invites you to welcome

SANDRA L. THURMAN

Director of the Office of National AIDS Policy at the White House

as she presents an
Official White House HIV/AIDS Policy Address and Luncheon

Friday, October 16, 1998
12 Noon

GEM Theatre, Downtown Detroit
333 Madison Ave., Phone 313-963-9800

Please RSVP by Friday, October 9, 1998 with the enclosed card
or by calling John Joannette at 248-549-7266

Itinerary for Thursday, October 15th

2:00 - 3:30 pm Wrap-up for AIDS Walk Michigan 1998, location TBA

3:30 - 5:00 pm Cocktail Reception with Sandra Thurman-Director, Office of National
AIDS Policy, location TBA

Itinerary for Friday, October 16th

10:00 - 10:30 am News Conference at the Gem Theatre, Detroit
Sandra Thurman, Mayor Archer, Representatives from Michigan
AIDS Fund and the Detroit Health Department

10:30 - 11:00 am Question and Answer and Press Interviews with Sandra Thurman
and Mayor Archer

noon - 2:00 pm Luncheon followed by Address by Sandra Thurman



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TRAVEL VOUCHER (Read Privacy Act Statement on the back)		1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE OPD		2. TYPE OF TRAVEL ☒ TEMPORARY DUTY ☐ PERMANENT CHANGE OF STATION		3. VOUCHER NO. TA003807	
						4. SCHEDULE NO.	
5. a. NAME (Last, first, middle initial) THURMAN, SANDRA L. [002]		b. SOCIAL SECURITY NO. (b)(6)		6. PERIOD OF TRAVEL a. FROM 10/14/98		b. TO 10/16/98	
c. MAILING ADDRESS (Include ZIP Code) OEOB, ROOM 145 MGT&ADMIN WASHINGTON, DC 20502		d. OFFICE TELEPHONE NO. 395-1441		7. TRAVEL AUTHORIZATION a. NUMBER(S) TA003807		b. DATE(S) 10/13/98	
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 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) TO (f)	
1193533131		428.00			10/13/98	DCA-Washingt	LGA/DTW-Detr
COMMENTS: Detroit hotel overcharged traveler. Corrected receipt and credit attached.							
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 ▶	433.92
NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2614) 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 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. 680e).)					17. FOR FINANCE OFFICE USE ONLY		
					COMPUTATION		
15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR					a. DIFFERENCES, IF ANY (Explain and show amount)		
16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE					b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION		
					Certifier's Initials:		
					c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol):		
					0.00		
					d. NET TO TRAVELER ▶		
					433.92		
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 relationships 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 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 2
OF _____
PAGES

TRAVEL AUTHORIZATION NO.

TA003807

TRAVELER'S LAST NAME**THURMAN**[illegible]

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

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 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 ▶	433.92
---------------------------------------	---------------

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(Privacy Act Statement on back)

1. TRAVEL AUTHORIZATION NO.
TA003807

2. DATE
10/13/98

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)

7. AGENCY

736 Jackson Plac

8. DIVISION

OPD

9. OFFICE PHONE

395-1441

10. OFFICIAL DUTY STATION

WASHINGTON, DC

11. ☒ Per Diem

☐ Actual Subsistence (unusual circumstances)*

Rate(s):

12. TRAVEL INFORMATION

PURPOSE: New York: Speaking to the GMHC Board of Directors, Interview with Vogue
Mag./Michigan: Events with Mayor Archer (see itinerary)

DATE(S): Travel Begin On 10/14/1998

Travel End On 10/16/1998

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

From: Washington, DC

To: DETROIT, MI 89/ 38

To:

To:

To:

To:

To: NEW YORK CITY, NY 198/ 42

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	\$ 287.00
Per Diem/M&IE	98.00
Transportation	428.00
Rental Car	0.00
Miscellaneous	0.00
TOTAL	\$ 813.00
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)

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)

2. FMD copy

3. Advance of funds

4. Teleticketing Office

5. Funds Manager copy

6. Travelers copy

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
005. invoice	re: St. Moritz on the Park (Personal credit card number) (1 page)	10/14/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 21071

FOLDER TITLE:

10/14/1999 - 10/16/1999 Detroit

2018-0764-F
jm2204

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]

KC5SX0003807

PASSENGER RECEIPT

169500023 0036223 A71
X BOARDING PASS

ISSUED BY
NAME OF ISSUING AGENT
NAME OF PASSENGER
THURMAN/SANDY
TO FROM
XO TO
NOT VALID FOR
TRANSPORTATION
ENDORSEMENTS/RESTRICTIONS

ARC FLIGHT
COUPON

X X^{OP} X X X

TOUR CODE

AGENT CODE

AD 9910935
NO CODE DATE OF ISSUE
US 13 OCT 98

NAME OF PASSENGER
THURMAN/SANDY

PNMCARRIER CODE

WASHINGTON

PLACE OF ISSUE

NO CODE DATE OF ISSUE
US 13 OCT 98

X/O FROM HURMAN/SANDY
 ** NOT VALID FOR **
 X/O TO
 ** TRANSPORTATION **
 ENDORSEMENTS/RESTRICTIONS

CARRIER FLIGHT

VD/AA MULT

FARE BASIS/TICKET DESIGNATOR

DC 0513 OCT 98

****TRANSPORTATION***
ENDORSEMENTS/RESTRICTIONS

THIS IS YOUR RECEIPT

ISSUING AGENT ID
KC52*47

FP AX378391361201004*1299/ 922753 /FCWAS DL NYC30
.56YCALGADC NW DTT133.33YCALGA NW WAS218.52YCADCA 3
82.41 END ZPDCA2LGA2DTW2 XFDCALGA3DTW3

FARE	XF	9.00
TAX	USD	382.41
TAX	US	30.59
TOTAL	ZP	6.00
	USD	428.00

EQUIV. FARE PD

STOCK CONTROL NO. TX 889

CPN

ALLOW PCS WT UNCK
 ★ ★ ★ ★ ★ ★ ★ ★ ★ ★
 DOCUMENT NUMBER

0 012 1193533131 6

CARRIER *****
CARRIER ***** FLIGHT CLASS ***** DATE ***** TIME *****

DATE ***** SEAT ***** SMOKE *****

PCGS WT UNLCKD BAGGAGE ID NUMBER
NOT VALID FOR TRAVEL
0 012 1193533131 6
A009910935

IT IS UNLAWFUL TO PURCHASE OR RESALE THIS TICKET FROM/TO ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS.



**Travel
Management
Services**

INVOICE / ITINERARY

American Express
Travel Related Services Company, Inc.
White House Travel Office
Old Executive Office Building, Room 87
Washington, D.C. 20500-0001
Telephone: 202 456-2250
Fax: 202 456-6670
After Hours Emergency: 800 847-0242
Your code number is KC52

SALES PERSON: 71 ITINERARY/INVOICE NO. 0036223
CUSTOMER NBR: 1695000023 UXHJVD

DATE: 13 OCT 98
PAGE: 02

TO: WHITE HOUSE TRAVEL
1600 PENNSYLVANIA AVE
WASH DC 20500

FOR: THURMAN/SANDY

REF: KC5SXD003807

AIR FARE SUBJECT TO CHANGE. PLEASE CALL FOR CORRECT
FARE BEFORE PROCESSING TRAVEL AUTHORIZATION.

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.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
006. invoice	re: American Express Travel (Personal credit card number) (1 page)	10/13/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 21071

FOLDER TITLE:

10/14/1999 - 10/16/1999 Detroit

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