FOIA Number: 2018-0764-F

FOIA MARKER

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Collection/Record Group: Clinton Presidential Records

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OA/ID Number: 21071

FolderID:

Folder Title:
11/12/1999 - 11/13/1999 Atlanta

Stack:	Row:	Section:	Shelf:	Position:
S	67	1	2	3

EXECUTIVE OFFICE OF THE PRESIDENT
OFFICIAL TRAVEL AUTHORIZATION
(Privacy Act Statement and instructions on back)

1. TYPE OF AUTHORIZATION

[x] TDY [ ] Amendment *(Show items amended)*

[ ] Invitational *(Non EOP Employees Only)* [ ] Relocation

2. Traveler *(First name, middle initial, last name)*
Sandra L. Thurman

3. Title of Traveler
Director

4. AGENCY/DIVISION
OPD/NDS Policy

5. Office Phone
62959

6. Official Duty Station
736 Jackson Place

7. [x] Per Diem
[ ] Actual Subsistence *(unusual circumstances)**
Rate(s):

8. TRAVEL INFORMATION

PURPOSE: Meeting w/ Jim Curran, Dean of Rollins Public Health, & Emory U. re: [illegible] global response to AIDS pandemic & [illegible] See attached

DATE(S): Travel Begin On 11/12/99 Travel End On 11/13/99

ITINERARY: Point of Origin *(City, State)* Washington, DC

Place(s) of Official Visitation *(City, State)* Atlanta, GA

Point of Return *(City, State)* Washington, DC

9. MODE OF TRAVEL

(a) Commercial Transportation

Rail: Coach	Rail: Extra Fare*	Air: Coach Tourist	Air: Business *	Air: First Class ‡
		C		

‡ **First Class must have approval of Agency Head or Deputy**

(b) Privately Owned Vehicle

Auto	Other	Rate auth per mile	
			[ ] Determined more advantageous to government * [ ] For convenience of traveler NTE common carrier cost

(c) [ ] **Gov't Owned Vehicle**

(d) [ ] **Other (specify)**

10. ESTIMATED COST	AMOUNT
Per Diem/Actual Subsistence	$ 38.00
Transportation	522.50
Rental Car	35.00
Miscellaneous	—
TOTAL	$ 595.50

11. SPECIAL EXPENSE AUTHORIZED

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

12. ADVANCE REQUESTED *(meals and miscellaneous expenses only)* $

13. * Special Provisions/Remarks *(Justification for first class /business /extra fare travel, annual leave enroute, actual subsistence, etc.)*

No lodging costs associated with trip to Atlanta - Traveler will stay with acquaintance

14(a) Requested by
[signature]

15. Accounting data *(Appropriation, division, project, vendor number)*

14(b) I certify that the travel herein was reviewed and determined to be essential for the accomplishment of agency programs and missions
Approval Official *(Signature and Title)*

16. Funds are available to defray travel cost specified above
Funds Manager's Certification *(Signature)*

17. Date
November 8, 1999

18. Travel Authorization No.
TOJONA08

PHOTOCOPY PRESERVATION

OA FORM 22
REVISED FEBRUARY 1993

ORIGINATING OFFICE

PRIVACY ACT STATEMENT — The information requested is required to document the authorization and reimbursement of the individuals who travel at government expense on official business. Its routine use is restricted to officers and employees of Executive Office of the President agencies for performance of their official duties. Disclosure is voluntary, but failure to provide all or part of the information may delay or prevent authorization of travel. This information is collected under the authority of 31 U.S.C. 66a, 41 U.S.C. 3101, 3102, 3309; and General Accounting Office and General Services Administration policies and procedures.

Instructions for Completing Travel Authorization

ITEM 1	—	Check: TDY block if travel is of routine nature by an employee of your agency. Invitational block if travel is to be performed by a person who is not employed by your agency. Relocation block if authorization is for a person being transferred from or to another geographical locality. Amendment block if making change to existing Travel Authorization.
ITEMS 2 – 6	—	Self Explanatory.
ITEM 7	—	Check appropriate box for the type of reimbursement authorized. List rate or rates applicable.
ITEM 8	—	Provide information on travel itinerary.
ITEM 9	—	Check mode of travel authorized.
ITEM 10	—	Compute cost of per diem or actual subsistence utilizing the information in **Item 10**. Transportation is cost of airline ticket, privately owned vehicle mileage, or other transportation cost. Miscellaneous could include rental car, registration fees, taxi cabs, etc.
ITEM 11	—	Check appropriate box for any special expenses authorized.
ITEM 12	—	Complete **only** if an advance of funds is requested.
ITEM 13	—	Space provided for justifications and other miscellaneous information.
ITEM 14(a)	—	Signature of Traveler.
14(b)	—	Signature of Approving Official.
ITEMS 15 & 16	—	Self Explanatory.
ITEMS 17 & 18	—	To be completed by personnel assigning T/A numbers.

THE WHITE HOUSE

WASHINGTON

MEMORANDUM FOR OFFICE OF MANAGEMENT & ADMINISTRATION

From: Sandra Thurman
Director
Office of National AIDS Policy
(202) 456-2437

Date: November 8, 1999

Re: Travel Authorization – TOJONA08

This TA requests authorization for me to travel to Atlanta, Georgia on November 12 & 13, 1999.

I will be meeting with Jim Curran, the former Director of the Centers for Disease Control's HIV/AIDS Division, and current Dean of The Rollins School of Public Health at Emory University. As a leading expert in strategic health planning, we will discuss the reconstruction of our global battle against the AIDS pandemic with an increased emphasis on participation within both the private sector and our national NGOs. We will also discuss the Administration's plans with regard to international development and implementation of the Administration's recently announced 'Global AIDS Initiative'.

As the AIDS community gears up for the impact of FY2000 Appropriations, I will also meet with Ryan White CARE Act city planners on Friday evening for a business dinner. This meeting will afford me the unique opportunity to relay the Administration's position with regard to reauthorization of the Ryan White CARE Act and to update the planning committee on current plans for domestic policy.

Please let me know if you have any questions.

EASYLINK 4599530S001 8NOV99 16:19/16:19 EST
FROM: 62029160
AMERICAN EXPRESS TRAVEL
TO: 2024562439

SALES PERSON: SV ITINERARY DATE: 08 NOV 99
CUSTOMER NBR: 1695000043 TWYNQQ PAGE: 01

TO: AMERICAN EXPRESS TRAVEL

FOR: THURMAN/SANDRA

12 NOV 99 - FRIDAY

AIR	DELTA AIR LINES INC	FLT:585	COACH	SNACK
	LV WASHINGTON REAGAN		800A	EQP: BOEING 727-200
	DEPART: TERMINAL B			01HR 49MIN
	AR ATLANTA		949A	NON-STOP
				REF: LFTDCB
	THURMAN/SANDRA	SEAT-12D		
CAR	ATLANTA		NATIONAL CAR RENTAL	CORP ID-5003241
	PICK UP-0949		1-INTER CAR AUTO A/C	
	RETURN-13NOV/1025			
	RATE IS GUARANTEED			
	DAILY RATE-USD35.00		UNLIMITED MILEAGE	
	CONFIRMATION NUMBER		0304255807COUNT	

13 NOV 99 - SATURDAY

AIR	DELTA AIR LINES INC	FLT:624	COACH	
	LV ATLANTA		1025A	EQP: MD-80
				01HR 44MIN
	AR WASHINGTON REAGAN		1209P	NON-STOP
	ARRIVE: TERMINAL B			REF: LFTDCB
	THURMAN/SANDRA	SEAT-12C		

14 MAY 00 - SUNDAY
OTHER WASHINGTON
AMERICAN EXPRESS WISHES YOU A SUCCESSFUL TRIP

CONTINUED ON PAGE 2

SALES PERSON: SV ITINERARY DATE: 08 NOV 99
CUSTOMER NBR: 1695000043 TWYNQQ PAGE: 02

TO: AMERICAN EXPRESS TRAVEL

FOR: THURMAN/SANDRA

.FARE QUOTED 522.50
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.
.
. 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.
.
.....
AMERICAN EXPRESS TRAVEL
OEOB ROOM 87
WASHINGTON DC 20502
TEL 202-456-2250/FAX 202-456-6670
.....
FOR AFTER HOURS EMERGENCIES
CALL 800-847-0242/YOUR HOTLINE CODE IS KC52
.....
THANK YOU FOR TRAVELING WITH AMERICAN EXPRESS.