Marilyn Yeager

Ashley L. Raines

10/20/98 04:18:19 PM

Record Type: Record

To: Teresa M. Jones/OPD/EOP

cc: Douglas R. Matties/OA/EOP

Subject: Re: Chris and Sarah's Travel to Nashville

Doug is working on this issue with Moe. He'll contact you if we need anymore information from you. Thanks for bringing it to our attention.

Cathy R. Mays

10/20/98 03:47:26 PM

Record Type: Record

To: Teresa M. Jones/OPD/EOP

cc:

Subject: Re: Travel Vouchers

If you haven't already done so, please send a copy of this voucher and an supporting documents to Doug in Room 145, with a note that is was previously submitted.

statement

WHITE HOUSE
AIRLIFT OPERATIONS
OEOB/ROOM 405
WASHINGTON, D.C. 20502

(202) 757-1263

DATE
7/29/98

TO:

CHRISTOPHER C. JENNINGS
OEOB/ROOM #213
Washington, D.C. 20500

PAYMENT DUE UPON RECEIPT. MAKE CHECKS PAYABLE TO WHAO.
DETACH AND FORWARD WITH PAYMENT TO ABOVE ADDRESS.

AMOUNT DUE	AMOUNT ENC.
$13.65	

DATE	TRANSACTION	AMOUNT	BALANCE
3/31/98	Balance forward		0.00
7/17/98	INV #22480 - 22 JUN 98 AF-1/ADW TO NASHVILLE, TN TO ADW	13.65	13.65

CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	AMOUNT DUE
0.00	13.65	0.00	0.00	0.00	$13.65

Ashley L. Raines

07/30/98 07:04:28 PM

Record Type: Record

To: Moe Vela/OVP @ OVP

cc: Donna L. Geisbert/OPD/EOP

Subject: Re: Travel to Nashville

Sarah and Chris did not receive approval from WH counsel before traveling to accept payment for any expenses. OPD will have to pay for these expenses. The best thing to do would be for the hotel to credit the organization that paid for their bill and send the bill to me. How can we handle this billing problem?

Ashley 8/6

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

1. TYPE OF AUTHORIZATION

☐ TDY ☒ Amendment *(Show items amended)*

☐ Invitational *(Non EOP Employees Only)* ☐ Relocation

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

Sarah Bianchi

3. Title of Traveler

Assistant Director

4. AGENCY/DIVISION

OPD/DPC

5. Office Phone

456-5585

6. Official Duty Station

Washington, D.C.

7. ☐ Per Diem
☒ Actual Subsistence *(unusual circumstances)** Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the VP's Family Conference in Nashville, TN

DATE(S): Travel Begin On 6 /21 / 98 Travel End On 6 /23 / 98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN

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

9. MODE OF TRAVEL

(a) Commercial Transportation

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

‡ 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	$ 300.00 /
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ 300.00

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.)*

NPR took care of airline and room. Lisa Mallory NPR 6-9007 or 6-2816
Government rate not available for lodging.

14(a) Requested by

Paul J. Weinstein Jr.

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

18. Travel Authorization No.

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)*
Sarah Bianchi

3. Title of Traveler
Assistant Director

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5585

6. Official Duty Station
Washington, D.C.

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

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 /20 /98 Travel End On 06 /23 /98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN
--

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 ‡
		AF2		

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville with the Vice President; Air Force Two.

14(a) Requested by [signature]
Paul Weinstein

15. Accounting data *(Appropriation, division, project, vendor number)*
11 82200 J123A

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)*
[signature]

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

17. Date
6/19/98

18. Travel Authorization No.
XD8A0015

OA FORM 22
REVISED FEBRUARY 1993

ORIGINAL (RETURN WITH TRAVEL VOUCHER)

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.

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

1. TYPE OF AUTHORIZATION

☑ TDY ☐ Amendment *(Show items amended)*

☐ Invitational *(Non EOP Employees Only)* ☐ Relocation

2. Traveler *(First name, middle initial, last name)*
Sarah Bianchi

3. Title of Traveler
Assistant Director

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5585

6. Official Duty Station
Washington, D.C.

7. ☐ Per Diem
☐ Actual Subsistence *(unusual circumstances)**
Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 / 21 / 98 Travel End On 06 / 23 / 98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN
--

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 ‡
		AF2		

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville with the Vice President; Air Force Two.

14(a) Requested by [signature]
Paul Weinstein

15. Accounting data *(Appropriation, division, project, vendor number)*
11 822C0 J123A

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)*
[signature]

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

17. Date
6/19/98

18. Travel Authorization No.
XD8A0015

OA FORM 22
REVISED FEBRUARY 1993

ADVANCE OF FUNDS

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.

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

1. TYPE OF AUTHORIZATION

☒ TDY ☐ Amendment *(Show items amended)*

☐ Invitational *(Non EOP Employees Only)* ☐ Relocation

2. Traveler *(First name, middle initial, last name)*
Sarah Bianchi

3. Title of Traveler
Assistant Director

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5585

6. Official Duty Station
Washington, D.C.

7. ☐ Per Diem
☐ Actual Subsistence *(unusual circumstances)**
Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 / 20 98 Travel End On 06 /23 /98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN

--

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 ‡
		AF2		

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville with the Vice President; Air Force Two.

14(a) Requested by [signature]
Paul Weinstein

15. Accounting data *(Appropriation, division, project, vendor number)*
11 8 2 2 C C 3 1 2 3 A

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)*
[signature]

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

17. Date
6/19/98

18. Travel Authorization No.
X 08 A0015

OA FORM 22
FEBRUARY 1993

TELETICKETING OFF CE

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.

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

1. TYPE OF AUTHORIZATION

☒ TDY ☐ Amendment *(Show items amended)*

☐ Invitational *(Non EOP Employees Only)* ☐ Relocation

2. Traveler *(First name, middle initial, last name)*
Sarah Bianchi

3. Title of Traveler
Assistant Director

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5585

6. Official Duty Station
Washington, D.C.

7. ☐ Per Diem
☐ Actual Subsistence *(unusual circumstances)**
Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06/20/98 Travel End On 06/23/98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN

--

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 ‡
		AF2		

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville with the Vice President; Air Force Two.

14(a) Requested by
Paul Weinstein

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

18. Travel Authorization No.

OA FORM 22
ARY 1993

FUNDS MANAGER

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.

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)*
Sarah Bianchi

3. Title of Traveler
Assistant Director

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5585

6. Official Duty Station
Washington, D.C.

7. ☐ Per Diem
☐ Actual Subsistence *(unusual circumstances)**
Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 /2? /98 Travel End On 06 /23 /98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN

--

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

9. MODE OF TRAVEL

(a) Commercial Transportation

Rail		Air		
Coach	Extra Fare*	Coach Tourist	Business *	First Class ‡
		AF2		

‡ 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

10. ESTIMATED COST	AMOUNT
Per Diem/Actual Subsistence	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville with the Vice President; Air Force Two.

14(a) Requested by
Paul Weinstein

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

18. Travel Authorization No.

OA FORM 22
REVISED FEBRUARY 1993

TRAVELER'S COPY

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.

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)*
Chris Jennings

3. Title of Traveler
Deputy Assistant to the President

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5560

6. Official Duty Station
Washington, D.C.

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

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 /22/ 98 Travel End On 06 /23 / 98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN
--

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

9. MODE OF TRAVEL

(a) Commercial Transportation

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

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville on Air Force One -- returning to Washington on Air Force Two.

14(a) Requested by Paul Weinstein
Paul Weinstein

15. Accounting data *(Appropriation, division, project, vendor number)*
1182200J723A

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
6/19/98

18. Travel Authorization No.
XD8A0016

OA FORM 22
REVISED FEBRUARY 1993

ORIGINAL (RETURN WITH TRAVEL VOUCHER)

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.

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

1. TYPE OF AUTHORIZATION

☒ TDY ☐ Amendment *(Show items amended)*

☐ Invitational *(Non EOP Employees Only)* ☐ Relocation

2. Traveler *(First name, middle initial, last name)*
Chris Jennings

3. Title of Traveler
Deputy Assistant to the President

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5560

6. Official Duty Station
Washington, D.C.

7. ☐ Per Diem
☐ Actual Subsistence *(unusual circumstances)** Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06/22/98 Travel End On 06/23/98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN
--

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

9. MODE OF TRAVEL

(a) Commercial Transportation

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

‡ 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

10. ESTIMATED COST	AMOUNT
Per Diem/Actual Subsistence	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville on Air Force One -- returning to Washington on Air Force Two.

Cathy 65542

14(a) Requested by [signature]
Paul Weinstein

15. Accounting data *(Appropriation, division, project, vendor number)*
1182 200 A11253A

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)*
[signature]

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

17. Date
6/19/98

18. Travel Authorization No.
XD8A0016

OA FORM 22
RY 1993

ADVANCE OF FUNDS

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.

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)*
Chris Jennings

3. Title of Traveler
Deputy Assistant to the President

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5560

6. Official Duty Station
Washington, D.C.

7. ☐ Per Diem
☐ Actual Subsistence *(unusual circumstances)**
Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 / 22 / 98 Travel End On 06 / 23 / 98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN
--

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

9. MODE OF TRAVEL

(a) Commercial Transportation

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

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville on Air Force One -- returning to Washington on Air Force Two.

14(a) Requested by
Paul Weinstein

15. Accounting data *(Appropriation, division, project, vendor number)*
1182 CC JHG2 A

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
6/19/98

18. Travel Authorization No.
X08 AC 16

OA FORM 22
1993

TELETICKETING 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.

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

1. TYPE OF AUTHORIZATION

☒ TDY ☐ Amendment *(Show items amended)*

☐ Invitational *(Non EOP Employees Only)* ☐ Relocation

2. Traveler *(First name, middle initial, last name)*
Chris Jennings

3. Title of Traveler
Deputy Assistant to the President

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5560

6. Official Duty Station
Washington, D.C.

7. ☐ Per Diem
☐ Actual Subsistence *(unusual circumstances)**
Rate(s):

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 / 22 / 98 Travel End On 06 / 23 / 98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN

--

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

9. MODE OF TRAVEL

(a) Commercial Transportation

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

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*

Traveling to Nashville on Air Force One -- returning to Washington on Air Force Two.

14(a) Requested by
Paul Weinstein

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
[illegible]

18. Travel Authorization No.
[illegible]

OA FORM 22
REVISED FEBRUARY 1993

FUNDS MANAGER

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.

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)*
Chris Jennings

3. Title of Traveler
Deputy Assistant to the President

4. AGENCY/DIVISION
OPD/DPC

5. Office Phone
456-5560

6. Official Duty Station
Washington, D.C.

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

8. TRAVEL INFORMATION

PURPOSE: To participate in the Vice President's Family Conference in Nashville, TN.

DATE(S): Travel Begin On 06 /22/ 98 Travel End On 06 /23 / 98

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

Place(s) of Official Visitation *(City, State)* Nashville, TN
--

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

9. MODE OF TRAVEL

(a) Commercial Transportation

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

‡ 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	$
Transportation	
Rental Car	
Miscellaneous	
TOTAL	$ -0-

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.)*
Traveling to Nashville on Air Force One -- returning to Washington on Air Force Two.

14(a) Requested by
Paul Weinstein

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

18. Travel Authorization No.

OA FORM 22
REVISED FEBRUARY 1993

TRAVELER'S COPY

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.