

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. form	Standard form 1012 re: travel (partial) (1 page)	12/23/1998	P6/b(6)
001b. receipt	re: airplane ticket (partial) (1 page)	ca.1998	P6/b(6)
002a. paper	re: home address directions (1 page)	10/23/1998	P6/b(6)
002b. agenda	Advisory Board to the Institute for Health Policy re: address (partial) (1 page)	10/23/1998	P6/b(6)
002c. list	re: contact information (partial) (2 pages)	10/23/1998	P6/b(6)
003a. paper	re: home address directions (1 page)	10/23/1998	P6/b(6)
003b. agenda	Advisory Board to the Institute for Health Policy re: address (partial) (1 page)	10/23/1998	P6/b(6)
003c. list	re: contact information (partial) (2 pages)	10/23/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Chris Jennings (Meetings, Trips, Events)
OA/Box Number: 17044

FOLDER TITLE:

Travel - Jennings: Boston, Massachusetts October 30, 1998

2011-0747-S

rc408

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]

Withdrawal/Redaction Marker

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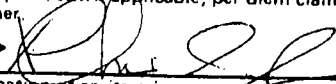
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TRAVEL VOUCHER (Read the Privacy Act Statement on the back)		1. DEPARTMENT OR ESTABLISHMENT, BUREAU DIVISION OR OFFICE DEOB/DPC		2. TYPE OF TRAVEL ☒ TEMPORARY DUTY ☐ PERMANENT CHANGE OF STATION		3. VOUCHER NO.	
						4. SCHEDULE NO.	
TRAVELER (PAYEE)	5. a. NAME (Last, first, middle initial) JENNINGS, CHRISTOPHER C			b. SOCIAL SECURITY NO. P6/(b)(6)		6. PERIOD OF TRAVEL	
	c. MAILING ADDRESS (Include ZIP Code) DEOB - Room 216			d. OFFICE TELEPHONE NO. (410) 456-5560		a. FROM	
	e. PRESENT DUTY STATION WASHINGTON, DC			f. RESIDENCE (City and State) ARLINGTON, VA		b. TO	
						7. TRAVEL AUTHORIZATION	
8. TRAVEL ADVANCE			9. CASH PAYMENT RECEIPT			10. CHECK NO.	
a. Outstanding			a. DATE RECEIVED			11. PAID BY	
b. Amount to be applied			b. AMOUNT RECEIVED				
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 to 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 CAR-RIER (Initials) (b)	MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL		
					FROM (e)	TO (f)	
2037 11967477816		384.00	COACH	10/29/98	WASHINGTON, DC	Boston, MA	
					Boston, MA	WASHINGTON, DC	
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 10-23-98		AMOUNT CLAIMED \$ 42.00	
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).							
14. This voucher is approved. Long distance telephone 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		
APPROVING OFFICIAL SIGN HERE 					COMPUTATION		
DATE					a. DIFFERENCES, IF ANY (Explain and show amount)		
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):		
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE 					d. NET TO TRAVELER		
DATE							
18. ACCOUNTING CLASSIFICATION							

INSTRUCTIONS TO TRAVELER (Unlisted items are self-explanatory)

**Complete
only
for
actual
expense
travel**

Col. (d) thru (g) } Show amount incurred for each meal, including tax and tips, and daily total 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 if 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.

PAGES

TRAVEL AUTHORIZATION NO.**TRAVELER'S LAST NAME**

JENNINGS

SUBTOTALS ▶

TOTALS ▶

42.00

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 furnished to the Government 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 your 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	
CLAS D ▶	42.00

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PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT
NOT TRANSFERABLE

KC5SX09A0001

PASSENGER RECEIPT

1695000023 0036754 A60

XBRAPONE PASS

ISSUED BY

ARC

FLIGHT
COMPANY

TOUR CODE

AGENT CODE

NAME OF PASSENGER

U.S. AIRWAYS

XXXXXX

PLACE OF ISSUE

DATE OF ISSUE

JENNINGS/CHRIS

AMERICAN EXPRESS

PNR/CARRIER CODE

WASHINGTON

DC US29OCT98

JENNINGS/CHRIS

CARRIER

FLIGHT

UXEWXU/AA YCADCA

6 0011/

OBOS US395 Y 380CTYCADCA

NOT VALID FOR
TRANSPORTATION

THIS IS YOUR RECEIPT

ISSUING AGENT ID
KC52*47

FP

P6(b)(6)

013577 /FCWAS US BOS17

3.15 US WAS173.15YCADCA 346.30 END ZPDCA2BOS2 XFDCA
380S3

FARE XF 6.00
TAX USD 346.30
TAX US 27.70
TOTAL ZP 4.00
USD 384.00

EQUIV FARE PD

STOCK CONTROL NO TX 880 CK
51368774612

CPN

ALLOW PCS WT UNCKD

0 037 1196747781 6

U.S. AIRWAYS

PASSENGER TICKET AND BAGGAGE CHECK

ISSUED BY U.S. AIRWAYS NOT TRANSFERABLE
SUBJECT TO CONDITIONS OF CONTRACT

FLIGHT COUPON TOUR CODE
OF

AIRLINE CODE FCI

770709FF

JENNINGS/CHRIS

PNR CODE

1233 BOS-ATO

ISO CODE DATE OF ISSUE
30OCT98

BOSTON MA

CARRIER

FLIGHT

US 254 Y 30OCT100P

STATUS NOT VALID BEFORE NOT VALID AFTER

WASHINGTON/NATL

12A

** COACH CLASS **

** **

** BOARDING PASS ONLY **

** NOT VALID WITHOUT **

** FLIGHT COUPON ATTACHED **

FARE

TAX

TAX

TOTAL

01995863365

STOCK CONTROL NUMBER TX037 CK

CPN

DOCUMENT NUMBER

CK

NAME OF PASSENGER	
JENNINGS/CHRIS	
FROM	BOSTON MA
TO	WASHINGTON/NATL
CARRIER	U.S. AIRWAYS
CODE	US 254 Y 30OCT100P
GATE	BOARDING TIME SEAT NO SMOKING
1230P 12A NO	

ON BOARD MILES NUMBER

PERMANENT NATIONAL
AIRPORT

FOR QUESTIONS OF COMMENTS: (707)417-4100
ENTRANCE: 06:10-10:00-00 Lane # 05
EXIT : 14:50-10:00-00 Lane # 06
License Plate OR JN1285
Cashier: 015
Sgt. # 6012
Length of stay 0:00:00.000.
Amount Paid \$ 12.00 Cash
**** Thank You for Flying ****
***** ROSSMAN NATIONAL AIRPORT *****

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 + OPD/DPC

5. Office Phone

655-00

6. Official Duty Station

WASHINGTON, DC

4. AGENCY/DIVISION

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

8. TRAVEL INFORMATION

PURPOSE:

TO SPEAK AT BRANDEIS UNIVERSITY IN
BOSTON, MASS.

DATE(S): Travel Begin On

10/31/98

Travel End On

11/3/98

ITINERARY: Point of Origin (City, State)

WASHINGTON, DC

Place(s) of Official Visitation (City, State)

BOSTON, MASS.

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	\$ 30.00
Transportation	384.00
Rental Car	
Miscellaneous	
TOTAL	\$ 414.00

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.)

14(a) Requested by

Chris Jennings

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

1192200 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)

16. Funds are available to defray travel cost specified above

Funds Manager's Certification (Signature)

Allen Laines

17. Date

10/29/98

18. Travel Authorization No.

X129A0001

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)

3. Title of Traveler

4. AGENCY/DIVISION

5. Office Phone

6. Official Duty Station

7. ☐ Per Diem

☐ Actual Subsistence (unusual circumstances)*
Rate(s):

8. TRAVEL INFORMATION

PURPOSE:

DATE(S): Travel Begin On

Travel End On

ITINERARY: Point of Origin (City, State)

Place(s) of Official Visitation (City, State)

Point of Return (City, State)

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

\$

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.)

14(a) Requested by

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.

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.

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- TDY block if travel is of routine nature by an employee of your agency.
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(Non EOP Employees Only)

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

3. Title of Traveler

4. AGENCY/DIVISION

5. Office Phone

6. Official Duty Station

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

8. TRAVEL INFORMATION

PURPOSE: _____

DATE(S): Travel Begin On 1/21/92

Travel End On 1/21/92

ITINERARY: Point of Origin (City, State) _____

Place(s) of Official Visitation (City, State) _____

Point of Return (City, State) _____

9. MODE OF TRAVEL

(a) Commercial Transportation

Rail

Coach

Extra Fare*

Air

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

\$

11. SPECIAL EXPENSE AUTHORIZED

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

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(meals and miscellaneous expenses only)

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- 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.

10 202-456-5557 29OCT98 1440EST 1011741L PAGE 1 OF 1
EASYLINK 1611741L001 29OCT98 14:40/14:40 EST
FROM: 62029160
AMERICAN EXPRESS TRAVEL
TO: 2024565557

SALES PERSON: 60
CUSTOMER NBR: 1695000023

ITINERARY
UXEWXU

DATE: 29 OCT 98
PAGE: 01

TO: WHITE HOUSE TRAVEL
1600 PENNSYLVANIA AVE
WASH DC 20500

FOR: JENNINGS/CHRIS

30 OCT 98 - FRIDAY

AIR	US AIRWAYS	FLT:395	COACH	
	LV WASHINGTON REAGAN		700A	EQP: DC9 30
	DEPART: TERMINAL B/C			01HR 30MIN
	AR BOSTON		830A	NON-STOP
	ARRIVE: TERMINAL B			REF: UKFR11
AIR	US AIRWAYS	FLT:254	COACH	
	LV BOSTON		100P	EQP: MD-80
	DEPART: TERMINAL B			01HR 34MIN
	AR WASHINGTON REAGAN		234P	NON-STOP
	ARRIVE: TERMINAL B/C			REF: UKFR11

07 MAY 99 - FRIDAY

OTHER WASHINGTON

THIS DATE IS FOR AMERICAN EXPRESS HISTORICAL DATA ONLY.

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.



Institute for Health Policy
Brandeis University

October 4, 1998

Christopher Jennings
Deputy Assistant to the President
Health Policy Development
Domestic Policy Council
Old Executive Office Building, Room 216
1700 Pennsylvania Avenue
Washington, D.C. 20502

Dear Chris:

Thank you for agreeing to speak at the opening meeting of the Advisory Board to the Institute for Health Policy at Brandeis University. This is an introductory meeting that will set the guidelines for future sessions to be held twice a year on issues of importance in health care.

Our first meeting will be held October 29-30, 1998 at Brandeis University. We will begin with a dinner at 6:30 p.m. on the evening of Thursday, October 29 at President Reinhartz's residence, and we will convene from 8:00 a.m. to 3:00 p.m. on Friday, October 30 at the University.

We look forward to having you join us at this first meeting. We plan to split our time between a discussion of policy issues and implications for the future of health care and a discussion of the Institute's long-term goals. Your expertise and knowledge will be critical in giving Board Members the background necessary to understand the policy issues at a national level.

The Institute for Health Policy has been among the country's leading private research and policy centers for the past twenty years. It was established to confront the challenges of providing and financing accessible and affordable health care for all Americans. As you are aware, the U.S. health care system has undergone enormous changes in the last decade and will continue to do so in the years ahead. Understanding these changes and their implications has been an important focus of the Institute. The work of the Institute goes far beyond studying the effects of change. In recent years, staff at the Institute have begun to explore new approaches to help solve some of the more perplexing problems of health care in the United States. These new efforts require the wisdom and expertise of individuals who have an understanding of the workings of our current system. It is with these needs in mind that we have invited a small group of knowledgeable persons around the country to become founding members of the Advisory Board to the Institute.

The Heller School • Brandeis University

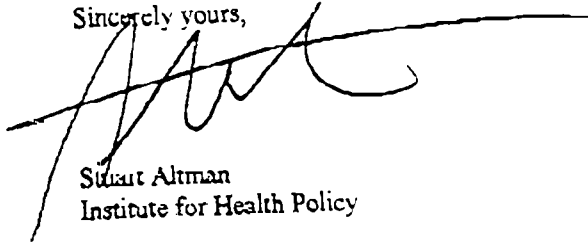
415 South Street, MS035 • Waltham, MA 02254-9110

VOICE: 781.736.3900 • TTY/TDD: 781.736.3009 • www.brandeis.edu/heller/ihp/ihp.html

For your general information, I have enclosed an agenda, a participant list, background information about the Institute, directions to President Reinharz's residence and to Brandeis, as well as hotel information should that be necessary. If you have any questions about the logistics of the event, please call Paola Martino at (781) 736-3903.

Thank you again for agreeing to participate, and I look forward to seeing you at the end of October.

Sincerely yours,



Stuart Altman
Institute for Health Policy

enc.

I really hope
you can
attend
PA

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002a. paper	re: home address directions (1 page)	10/23/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Chris Jennings (Meetings, Trips, Events)
OA/Box Number: 17044

FOLDER TITLE:

Travel - Jennings: Boston, Massachusetts October 30, 1998

2011-0747-S

rc408

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]
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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]

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002b. agenda	Advisory Board to the Institute for Health Policy re: address (partial) (1 page)	10/23/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Chris Jennings (Meetings, Trips, Events)
OA/Box Number: 17044

FOLDER TITLE:

Travel - Jennings: Boston, Massachusetts October 30, 1998

2011-0747-S

rc408

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

P1 National Security Classified Information [(a)(1) of the PRA]
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**Advisory Board to the Institute for Health Policy
Agenda, October 29th & 30th**

President Jehuda Reinharz and Professor Shulamit Reinharz cordially invite Board Members and spouses to dinner to inaugurate the Advisory Board and in honor of Irving and Helen Schneider.

THURSDAY, OCTOBER 29

6:30 pm Advisory Board Dinner [0026]
 President's Residence
 [REDACTED] P6(b)(6)

8:15 pm Opening Remarks
 Alan Solomont, Solomont Bailis Ventures &
 President Reinharz, Brandeis University
 Presentation to Irving & Helen Schneider

FRIDAY, OCTOBER 30

8:00 am Continental Breakfast Buffet
 Nessel Lounge/Napoli Room,
 Gosman Sports and Convocation Center, Brandeis University

9:00 am Advisory Board Meeting
 Stuart Altman, Stan Wallack, IHP
 Institute for Health Policy Past, Present and Future

10:30 am Break
 Nessel Lounge/Napoli Room

10:45 am Introductions
 Advisory Board Members, Self-introductions

12:00 noon Lunch Buffet
 Nessel Lounge/Napoli Room

12:45 pm Policy Briefing
 Stuart Altman, IHP &
 Chris Jennings, Senior Advisor to the President/Health Policy

2:30 pm Wrap Up
 Stuart Altman, IHP

3:00 pm Adjourn

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002c. list	re: contact information (partial) (2 pages)	10/23/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Chris Jennings (Meetings, Trips, Events)
OA/Box Number: 17044

FOLDER TITLE:

Travel - Jennings: Boston, Massachusetts October 30, 1998

2011-0747-S

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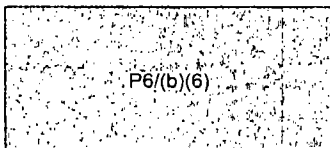
**Advisory Board to the Institute for Health Policy
List of Participants
October 29th & 30th, 1998**

Susan Bailis
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400 Centre Street
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Boston College, Fulton Hall
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Chestnut Hill, MA 02167-3808
Phone: (617) 850-0655
Fax: (617) 552-1750

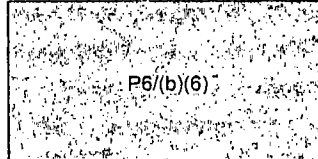
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Beth Israel Deaconess Mount Auburn
Institute for Education & Research
Beth Israel Deaconess Medical Center
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Fax: (617) 630-8788

Rina K. Spence



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Fax: (617) 227-3514

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Hackensack, NJ 07601
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Fax: (201) 498-0590

Anthony Watson
Chairman & CEO
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New York, NY 10001
Phone: (212) 630-5110
Fax: (212) 630-0110

Congressman Henry Waxman
2204 Rayburn House Office Building
Washington, D.C. 20515
Phone: (202) 225-3976

Michael J. Zinner, M.D.
Professor of Surgery
Harvard Medical School
Surgeon-in-Chief
Brigham and Women's Hospital
Department of Surgery
75 Francis Street
Boston, MA 02115
Phone: (617) 732-8181
Fax: (617) 734-8353

INSTITUTE FOR HEALTH POLICY OVERVIEW

Since the late 1970's, the Institute for Health Policy has achieved national recognition as a leading health care policy and research institution. Our researchers work on a variety of substantive issues that bridge the two domains of health services and health policy research. In this capacity, we collaborate with other academic and health services research organizations and with service delivery systems which serve as laboratories for demonstrating and testing new financing and delivery strategies. Specifically, IHP is the site for several national policy centers that focus on health care financing, substance abuse research, diversity in long-term care, and vulnerable populations. IHP has long been actively involved in policy and research studies funded by government agencies and private foundations. IHP's diverse activities also reflect its long-standing commitment to actively participating in program evaluation and policy setting.

Located in the Heller Graduate School for Advanced Studies in Social Welfare at Brandeis University, IHP constitutes the largest research center (in Heller) and we have more than sixty studies in our current health services research and policy study portfolio. The work at IHP has a very broad scope and breadth. On the one hand, we examine the overall health care system from a variety of perspectives including questions of access to and quality of care, how health care is financed, delivered, and utilized, and the cost of such care. On the other hand, we adopt a more population-based approach which focuses on the most vulnerable populations, including the elderly, individuals with chronic illness, and those with substance abuse problems and mental illness.

In addition to conducting health services and policy research, IHP staff have forged relationships with a variety of outside partners and we frequently collaborate with them to conduct research. IHP staff also provide consulting to both government and non-governmental agencies and foundations, and serve as technical assistants to a variety of community based and other health care programs.

In many ways, IHP represents an institutional hybrid. We possess characteristics of an academic setting and have an institutional commitment to educate students, but we also possess characteristics and participate in activities that are more commonly associated with research think tanks or large consulting organizations. Straddling both the educational and research/policy arenas is a challenge for us and contributes to our complexity. It also somewhat differentiates us from other Centers within the Heller School and the larger Brandeis community at large.

Hotel Information

**Advisory Board to the Institute for Health Policy
October 29th & 30th**

NEWTON MARRIOTT HOTEL

2345 Commonwealth Avenue
Newton, MA 02166

Phone: (617) 969-1000

Fax: (617) 969-8464

RESERVATIONS, CUT-OFF, AND CHECK-IN

Individuals call (800) 228-9290 or (617) 969-1000

Group Name: Brandeis University, Institute for Health Policy

Cut off date: October 13, 1998

Check-in time: 4:00 pm

Check-out time: 1:00 pm

Rate: \$199 (singles & doubles)

DIRECTIONS TO THE NEWTON MARRIOTT

2345 Commonwealth Avenue
Newton, MA 02166

Pone: (617) 969-1000

Fax: (617) 969-8464

From The East (Logan Airport & Boston/Cambridge Area):
(Mass Turnpike West I-90 West)

Sumner Tunnel towards I-93 South. When you come out of the tunnel, the road bears off to the right. Immediately get into the left lane and do a U-Turn onto I-93 South. Continue on I-93 South through the tunnel. Stay in the right lane and take exit 20/Mass Turnpike I-90 West. When approaching the second toll booth, stay in right lane and take exit 15 off Mass Turnpike (3rd Newton Exit) follow signs for Rte 128/I-95 North. (Do NOT follow signs for route 30 Weston). Take exit 24/Rte 30 Newton/Wayland. This will be the first exit you see off the ramp. Bear right at top of ramp onto Rte 30 East and the hotel is on the left.

From the West (Mass Turnpike I-90 East):

Take the Mass Turnpike I-90 East. Continue past Exit 13 Natick/Framingham and take exit 14. Follow signs for 128/I-95 North. Take exit 24/Rte 30 Newton/Wayland. Turn right at the top of the ramp onto Rte 30 East and the hotel is on the left.

From the North:

Rte 128/95 South to exit 24, Rte 30 Newton/Wayland. Turn right at the top of the ramp onto Rte 30 East and the hotel is on your left.

From the South:

Rte 128/95 North to exit 24 (immediately after the MBTA exit). The exit sign will read "Exit 23,24,25". After exit 25, take exit 24 and turn right at the top of the ramp onto Rte 30 East and the hotel is on the left.

From Rte 9 East/West:

Rte 128/I-95 North to Exit 24. Then follow directions above from South.

From Cape Cod:

Rte 3 North to Rte 93 South towards I-95 North (Dedham). Then follow above directions from the South.

From Connecticut/New York:

I-84 East to Mass Turnpike I-90 East. Then follow signs above from the West.

From New Jersey:

Garden State Parkway to Rte 80 East. Go over George Washington Bridge to I-95 North. Then follow above directions from the South.

From New Hampshire:

Rte 3 South or I-93 South to Rte 128/95 South. Then follow above directions from the North.

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 OPD/DPC

5. Office Phone

65560

6. Official Duty Station

WASHINGTON, DC

4. AGENCY/DIVISION

7. ☐ Per Diem

☐ Actual Subsistence (unusual circumstances)*

Rate(s) _____

8. TRAVEL INFORMATION

PURPOSE:

To SPEAK AT BRANDEIS UNIVERSITY IN BOSTON, MASS.

DATE(S): Travel Begin On

10/30/98

Travel End On

10/30/98

ITINERARY: Point of Origin (City, State)

Washington, DC

Place(s) of Official Visitation (City, State)

Boston, MASS

Point of Return (City, State)

Washington, DC

9. MODE OF TRAVEL

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	\$ 30.00
Transportation	384.00
Rental Car	
Miscellaneous	
TOTAL	\$ 414.00

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.)

INSTRUCTIONS FOR COMPLETING TRAVEL AUTHORIZATION

14(a) Requested by

Chris Jennings

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

1192200 J23A

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

17. Funds Manager's Certification/Signature

Signature

17. Date

10/29/98

18. Travel Authorization No.

X09A0001

EASYLINK 1611741L001 29OCT98 14:40/14:40 EST
FROM: 62029160
AMERICAN EXPRESS TRAVEL
TO: 2024565557

SALES PERSON: 60
CUSTOMER NBR: 1695000023

ITINERARY
UXEWXU

DATE: 29 OCT 98
PAGE: 01

TO: WHITE HOUSE TRAVEL
1600 PENNSYLVANIA AVE
WASH DC 20500

FOR: JENNINGS/CHRIS

30 OCT 98 - FRIDAY

AIR	US AIRWAYS	FLT:395	COACH	
	LV WASHINGTON REAGAN		700A	EQP: DC9 30
	DEPART: TERMINAL B/C			01HR 30MIN
	AR BOSTON		830A	NON-STOP
	ARRIVE: TERMINAL B			REF: UKFR11
AIR	US AIRWAYS	FLT:254	COACH	
	LV BOSTON		100P	EQP: MD-80
	DEPART: TERMINAL B			01HR 34MIN
	AR WASHINGTON REAGAN		234P	NON-STOP
	ARRIVE: TERMINAL B/C			REF: UKFR11

07 MAY 99 - FRIDAY

OTHER WASHINGTON

THIS DATE IS FOR AMERICAN EXPRESS HISTORICAL DATA ONLY.

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FOR AFTER HOUR EMERGENCIES

CALL 800-847-0242/YOUR HOTLINE CODE IS S-KC52

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THANK YOU FOR TRAVELING WITH AMERICAN EXPRESS.



Institute for Health Policy

Brandeis University

October 4, 1998

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Deputy Assistant to the President
Health Policy Development
Domestic Policy Council
Old Executive Office Building, Room 216
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Washington, D.C. 20502

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We look forward to having you join us at this first meeting. We plan to split our time between a discussion of policy issues and implications for the future of health care and a discussion of the Institute's long-term goals. Your expertise and knowledge will be critical in giving Board Members the background necessary to understand the policy issues at a national level.

The Institute for Health Policy has been among the country's leading private research and policy centers for the past twenty years. It was established to confront the challenges of providing and financing accessible and affordable health care for all Americans. As you are aware, the U.S. health care system has undergone enormous changes in the last decade and will continue to do so in the years ahead. Understanding these changes and their implications has been an important focus of the Institute. The work of the Institute goes far beyond studying the effects of change. In recent years, staff at the Institute have begun to explore new approaches to help solve some of the more perplexing problems of health care in the United States. These new efforts require the wisdom and expertise of individuals who have an understanding of the workings of our current system. It is with these needs in mind that we have invited a small group of knowledgeable persons around the country to become founding members of the Advisory Board to the Institute.

The Heller School • Brandeis University

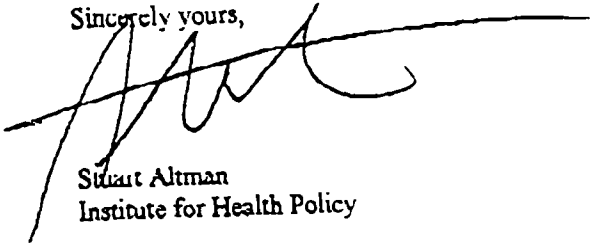
415 South Street, MS035 • Waltham, MA 02254-9110

VOICE: 781.736.3900 • TTY/TDD: 781.736.3009 • www.brandeis.edu/heller/ihp/ihp.html

For your general information, I have enclosed an agenda, a participant list, background information about the Institute, directions to President Reinharz's residence and to Braudeis, as well as hotel information should that be necessary. If you have any questions about the logistics of the event, please call Paola Martino at (781) 736-3903.

Thank you again for agreeing to participate, and I look forward to seeing you at the end of October.

Sincerely yours,



Stuart Altman
Institute for Health Policy

enc.

I really hope
you can
attend
PA

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
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003a. paper	re: home address directions (1 page)	10/23/1998	P6/b(6)
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COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Chris Jennings (Meetings, Trips, Events)
OA/Box Number: 17044

FOLDER TITLE:

Travel - Jennings: Boston, Massachusetts October 30, 1998

2011-0747-S

rc408

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]

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003b. agenda	Advisory Board to the Institute for Health Policy re: address (partial) (1 page)	10/23/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Chris Jennings (Meetings, Trips, Events)
OA/Box Number: 17044

FOLDER TITLE:

Travel - Jennings: Boston, Massachusetts October 30, 1998

2011-0747-S

rc408

RESTRICTION CODES

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

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**Advisory Board to the Institute for Health Policy
Agenda, October 29th & 30th**

President Jehuda Reinharz and Professor Shulamit Reinharz cordially invite Board Members and spouses to dinner to inaugurate the Advisory Board and in honor of Irving and Helen Schneider.

THURSDAY, OCTOBER 29

- 6:30 pm **Advisory Board Dinner**
President's Residence
[REDACTED] P6(b)(6) [0036]
- 8:15 pm **Opening Remarks**
Alan Solomont, Solomont Bailis Ventures &
President Reinharz, Brandeis University
Presentation to Irving & Helen Schneider

FRIDAY, OCTOBER 30

- 8:00 am **Continental Breakfast Buffet**
Nessel Lounge/Napoli Room,
Gosman Sports and Convocation Center, Brandeis University
- 9:00 am **Advisory Board Meeting**
Stuart Altman, Stan Wallack, IHP
Institute for Health Policy Past, Present and Future
- 10:30 am **Break**
Nessel Lounge/Napoli Room
- 10:45 am **Introductions**
Advisory Board Members, Self-introductions
- 12:00 noon **Lunch Buffet**
Nessel Lounge/Napoli Room
- 12:45 pm **Policy Briefing**
Stuart Altman, IHP &
Chris Jennings, Senior Advisor to the President/Health Policy
- 2:30 pm **Wrap Up**
Stuart Altman, IHP
- 3:00 pm **Adjourn**

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
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003c. list	re: contact information (partial) (2 pages)	10/23/1998	P6/b(6)
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COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Chris Jennings (Meetings, Trips, Events)
OA/Box Number: 17044

FOLDER TITLE:

Travel - Jennings: Boston, Massachusetts October 30, 1998

2011-0747-S

rc408

RESTRICTION CODES

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RR. Document will be reviewed upon request.

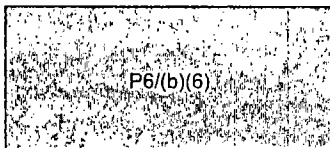
**Advisory Board to the Institute for Health Policy
List of Participants
October 29th & 30th, 1998**

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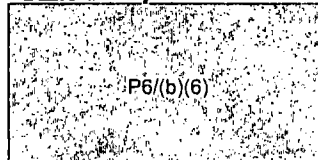
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INSTITUTE FOR HEALTH POLICY OVERVIEW

Since the late 1970's, the Institute for Health Policy has achieved national recognition as a leading health care policy and research institution. Our researchers work on a variety of substantive issues that bridge the two domains of health services and health policy research. In this capacity, we collaborate with other academic and health services research organizations and with service delivery systems which serve as laboratories for demonstrating and testing new financing and delivery strategies. Specifically, IHP is the site for several national policy centers that focus on health care financing, substance abuse research, diversity in long-term care, and vulnerable populations. IHP has long been actively involved in policy and research studies funded by government agencies and private foundations. IHP's diverse activities also reflect its long-standing commitment to actively participating in program evaluation and policy setting.

Located in the Heller Graduate School for Advanced Studies in Social Welfare at Brandeis University, IHP constitutes the largest research center (in Heller) and we have more than sixty studies in our current health services research and policy study portfolio. The work at IHP has a very broad scope and breadth. On the one hand, we examine the overall health care system from a variety of perspectives including questions of access to and quality of care, how health care is financed, delivered, and utilized, and the cost of such care. On the other hand, we adopt a more population-based approach which focuses on the most vulnerable populations, including the elderly, individuals with chronic illness, and those with substance abuse problems and mental illness.

In addition to conducting health services and policy research, IHP staff have forged relationships with a variety of outside partners and we frequently collaborate with them to conduct research. IHP staff also provide consulting to both government and non-governmental agencies and foundations, and serve as technical assistants to a variety of community based and other health care programs.

In many ways, IHP represents an institutional hybrid. We possess characteristics of an academic setting and have an institutional commitment to educate students, but we also possess characteristics and participate in activities that are more commonly associated with research think tanks or large consulting organizations. Straddling both the educational and research/policy arenas is a challenge for us and contributes to our complexity. It also somewhat differentiates us from other Centers within the Heller School and the larger Brandeis community at large.

Hotel Information

**Advisory Board to the Institute for Health Policy
October 29th & 30th**

NEWTON MARRIOTT HOTEL

2345 Commonwealth Avenue
Newton, MA 02166

Phone: (617) 969-1000

Fax: (617) 969-8464

RESERVATIONS, CUT-OFF, AND CHECK-IN

Individuals call (800) 228-9290 or (617) 969-1000

Group Name: Brandeis University, Institute for Health Policy

Cut off date: October 13, 1998

Check-in time: 4:00 pm

Check-out time: 1:00 pm

Rate: \$199 (singles & doubles)

DIRECTIONS TO THE NEWTON MARRIOTT

2345 Commonwealth Avenue
Newton, MA 02166

Phone: (617) 969-1000

Fax: (617) 969-8464

From The East (Logan Airport & Boston/Cambridge Area):
(Mass Turnpike West I-90 West)

Summer Tunnel towards I-93 South. When you come out of the tunnel, the road bears off to the right. Immediately get into the left lane and do a U-Turn onto I-93 South. Continue on I-93 South through the tunnel. Stay in the right lane and take exit 20/Mass Turnpike I-90 West. When approaching the second toll booth, stay in right lane and take exit 15 off Mass Turnpike (3rd Newton Exit) follow signs for Rte 128/I-95 North. (Do NOT follow signs for route 30 Weston). Take exit 24/Rte 30 Newton/Wayland. This will be the first exit you see off the ramp. Bear right at top of ramp onto Rte 30 East and the hotel is on the left.

From the West (Mass Turnpike I-90 East):

Take the Mass Turnpike I-90 East. Continue past Exit 13 Natick/Framingham and take exit 14. Follow signs for 128/I-95 North. Take exit 24/Rte 30 Newton/Wayland. Turn right at the top of the ramp onto Rte 30 East and the hotel is on the left.

From the North:

Rte 128/95 South to exit 24, Rte 30 Newton/Wayland. Turn right at the top of the ramp onto Rte 30 East and the hotel is on your left.

From the South:

Rte 128/95 North to exit 24 (immediately after the MBTA exit). The exit sign will read "Exit 23,24,25". After exit 25, take exit 24 and turn right at the top of the ramp onto Rte 30 East and the hotel is on the left.

From Rte 9 East/West:

Rte 128/I-95 North to Exit 24. Then follow directions above from South.

From Cape Cod:

Rte 3 North to Rte 93 South towards I-95 North (Dedham). Then follow above directions from the South.

From Connecticut/New York:

I-84 East to Mass Turnpike I-90 East. Then follow signs above from the West.

From New Jersey:

Garden State Parkway to Rte 80 East. Go over George Washington Bridge to I-95 North. Then follow above directions from the South.

From New Hampshire:

Rte 3 South or I-93 South to Rte 128/95 South. Then follow above directions from the North.

TRAVEL VOUCHER <i>(Read the Privacy Act Statement on the back)</i>		1. DEPARTMENT OR ESTABLISHMENT, BUREAU DIVISION OR OFFICE		2. TYPE OF TRAVEL ☐ TEMPORARY DUTY ☐ PERMANENT CHANGE OF STATION		3. VOUCHER NO.	
				4. SCHEDULE NO.			
TRAVELER (PAYEE)	5. a. NAME (Last, first, middle initial)			b. SOCIAL SECURITY NO.		6. PERIOD OF TRAVEL a. FROM b. TO	
	c. MAILING ADDRESS (Include ZIP Code)			d. OFFICE TELEPHONE NO.		7. TRAVEL AUTHORIZATION a. NUMBER(S) b. DATE(S)	
	e. PRESENT DUTY STATION			f. RESIDENCE (City and State)		10. CHECK NO.	
	8. TRAVEL ADVANCE a. Outstanding b. Amount to be applied c. Amount due Government (Attached: ☐ Check ☐ Cash) D. Balance outstanding			9. CASH PAYMENT RECEIPT a. DATE RECEIVED b. AMOUNT RECEIVED \$ c. PAYEE'S SIGNATURE			
12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH <i>(List by number below and attach passenger coupon; if cash is used show claim on reverse side.)</i>		I hereby assign to 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)					
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)		
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 \$	
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).							
14. This voucher is approved. Long distance telephone 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 a. DIFFERENCES, IF ANY (Explain and show amount)		
APPROVING OFFICIAL SIGN HERE					DATE		
15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR					b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION Certifier's initials:		
16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT					c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol):		
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE					DATE		
18. ACCOUNTING CLASSIFICATION					d. NET TO TRAVELER \$		

**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 relationship to employee and marital status of children (unless information is shown on the travel authorization.)	Complete only for actual expense travel	Col. (d) } 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 if 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
only
for
actual
expense
travel**

Complete this information if this is a continuation sheet.

PAGE _____ OF _____ PAGES

TRAVELER'S LAST NAME

[illegible]

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 your 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.

TOTAL
AMOUNT
CLAIMED ▶