

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. form	Standard form 1164 re: SSN (partial) (1 page)	08/14/1998	P6/b(6)
002. form	Standard form 1164 re: SSN (partial) (1 page)	ca. 1998	P6/b(6)
003. form	Standard form 1164 re: SSN (partial) (1 page)	ca. 1998	P6/b(6)
004. form	Standard form 1164 re: SSN (partial) (1 page)	ca. 1997	P6/b(6)

COLLECTION:

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

FOLDER TITLE:

Travel - Jennings: Local Travel [Various Dates]

2011-0747-S

rc437

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]
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- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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Taxi Cab Receipts

Date _____ Time: _____

Trip Origin: _____

Destination _____

Fare: \$ 7.00 Signature _____

TAXI DRIVER'S CUSTOMER RECEIPT

Company / Ass'n. VTP 101

Time _____ Date 08/05 19 98

Cab# VTP1 ID# _____

Origin of Trip SEA-LE

Destination Whitehouse Fare \$ 9.00

Signature BB

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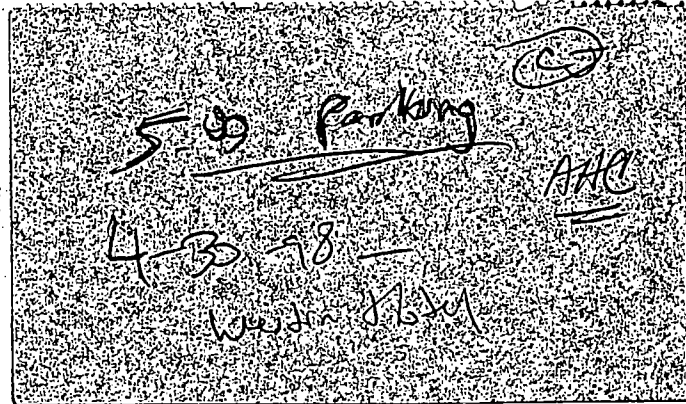
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TAXI DRIVER'S CUSTOMER RECEIPT

Time: _____ Date: 2/12/98
Company/Ass'n: Autorama
Cab No. 5 ID No. 52237 Tag No. _____
Origin of Trip: _____
Destination: White House
Fare: 5.00 Tip: _____ Total: _____
Signed: William Johnson



TAXI DRIVER'S CUSTOMER RECEIPT

Company/Ass'n. _____
Time _____ Date 5-6-98
Cab# _____ ID# _____
Origin of Trip WH
Destination HART (Parkfield) Fare \$ 5.00
Signature _____

Taxi Cab Receipts

Date 6-3-98 Time: _____
Trip Origin: Hill
Destination White House (Rush)
Fare: \$ 5.00 Signature _____

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6. EXPENDITURES—Continued

[illegible]

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. Chapter 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 other expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by Federal agency 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 taxpayer and/or employee identification number; disclosure is MANDATORY on vouchers claiming payment or 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.

Taxi Cab Receipts

DATE: 11/7 TIME: 10:00
 TRIP ORIGIN: _____
 DESTINATION: Rayburn 1A
 FARE: \$ 5.00 SIGNATURE: _____

TAXICAB RECEIPT

Date: 12/9
 Time: _____

Company: AAMC
 Origin of trip: Willard Hall
 Destination: _____
 Fare: 5.00 Sign. _____

*Hope you had a pleasant ride
 Thank you for your business*

MISCELLANEOUS

DATE 12/2/97 19____
 ROOM OR ACCT. NO. _____

SYMBOL AMOUNT

The Carlton

DO NOT WRITE IN ABOVE SPACE

Carlton Short Term Parking

15

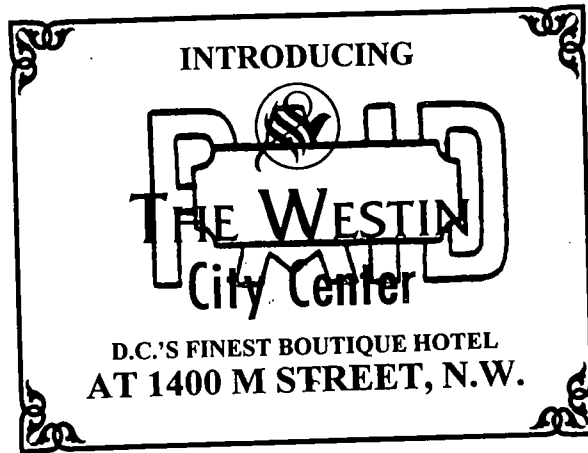
AS

SIGNED BY



Thank you for
 parking with
 Colonial
 GAR 100

Date 11/15/97
 Amount Received \$ 5.00
 Location 404
 Ticket # 045-19
 Employee [Signature]



TAXI DRIVER'S CUSTOMER RECEIPT

Company/Ass'n. KMSR
 Time _____ Date 11/13/97
 Cab# _____ ID# _____
 Origin of Trip PARKING
 Destination Gerards Pl Fare \$ 10.00
 Signature [Signature]

Taxi Cab Receipts

Date 12/4/97 Time: _____
 Trip Origin: WH
 Destination MADISON
 Fare: \$ 6.00 Signature _____