

Ronald Reagan Presidential Library
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Collection: Deaver, Michael
Folder Title: Travel Vouchers 1981-1983 (12)
Box: 59

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WITHDRAWAL SHEET

Ronald Reagan Library

Collection Name DEAVER, MICHAEL: FILES

Withdrawer

KDB 8/29/2011

File Folder TRAVEL VOUCHERS 1981-1983 (12)

FOIA

F97-0066/19

Box Number 61

COHEN, D

171

DOC NO	Doc Type	Document Description	No of Pages	Doc Date	Restrictions
1	FORM	TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)	1	10/19/1981	B6
2	CHECK	PHOTOCOPY OF PERSONAL CHECK	1	9/7/1982	B6
3	FORM	TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)	1	10/20/1981	B6
4	FORM	DEPT. OF STATE TRAVEL REIMBURSEMENT VOUCHER (OPTIONAL FORM 189A) (FRONT ONLY)	1	10/6/1981	B6
5	FORM	TEMPORARY DUTY (TDY) OFFICIAL TRAVEL AUTHORIZATION	1	7/29/1981	B6
6	FORM	DEPT. OF STATE TRAVEL REIMBURSEMENT VOUCHER (OPTIONAL FORM 189A) (FRONT ONLY)	1	8/10/1981	B6
7	FORM	TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)	1	7/7/1981	B6

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]

C. Closed in accordance with restrictions contained in donor's deed of gift.

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8	FORM	TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)	1	ND	B6
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1 FORM

1 10/19/1981 B6

TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)

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INSTRUCTIONS TO TRAVELER <i>(Unlisted items are self-explanatory)</i>	
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.)	Com- plete only for actual expense travel
	[Col. (a) } Show amount incurred thru (g) } meal cost.
	(h) Show expenses, such as porters, etc. (other than per diem)
	(i) Complete for per diem
	(j) Show total subsistence
	(m) Show per diem amount less the lesser of the amount shown expenses, such as long distance telephone subsistence, etc.
	(n)

as: laundry, cleaning and pressing of clothes, tips to bellboys, (for meals).

and actual expense travel.

ce expense incurred for actual expense travel.

nt, limited to maximum rate, or if travel on actual expense, show

unt from col. (f) or maximum rate.

as: taxi/limousine fares, air fare (if purchased with cash), local or

ne calls for Government business, car rental, relocation other than

[illegible]

SUBTOTALS ▶
TOTALS ▶

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, 1993, 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.

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

No. 0887

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request October 14, 1982

1. TRAVELER

Name: Michael K. Deaver ☒ White House Staff

Extension: 6475 Room: West Wing ☐ Other

2. PURPOSE(S) and DATE(S): Presidential Trip

3. ITINERARY Yorktown

(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: Oct. 17, 1981

Date: Oct. 19, 1981

Time: 1:00 PM Govt' Vehicle

Time: 2:30 PM Govt Helicopter

Mode:

Mode:

5. NATURE: ☒ 100% Official ☐ 100% Political

6. SIGNATURES:

Traveler:

MICHAEL K. DEAVER

(I have read and agree to the terms set forth on the reverse side)

Department Head

Approving Officer

(Special Assistant to the President for Administration)

7. ESTIMATED COSTS:

SPECIAL EXPENSES:

No. of Days Per Diem

☐ Registration Fee of \$

Hotel Name

☐ Commercial Car Rental

Hotel Daily Rate \$

☐ Excess Baggage

Other

☐ Other

8. TRAVEL ADVANCE REQUESTED:

☐ YES

☐ No

Amount: \$

Signature of Recipient:

Date:

REPAID:

Amount

Date

Schedule

Balance this trip

9. FOR TRANSPORTATION OFFICE USE ONLY:

GTR No.

Amount \$

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2 CHECK

1 9/7/1982 B6

PHOTOCOPY OF PERSONAL CHECK

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THE WHITE HOUSE
WASHINGTON

Expenses for the 3 days at Yorktown
celebration - 155.90.

You are allowed 51.75 for your per diem.

The other charges are Family - Personal
(Coffee shop, lounge and bikes, etc)

The difference you must pay - which is
a TOTAL of \$104.15

Make check payable to The US Treasurer

PATRICIA BYE

Williamsburg Lodge

153.96

ROOM NO.	RATE	DEPOSIT
4367		

ARRIVAL	DEPARTURE	NO. GUESTS

CONV.

DATE	GUEST ID	TICKET NUMBER	DESCRIPTION OF CHARGE	AMOUNT
------	----------	---------------	-----------------------	--------

130.00

7.80

16.16

153.96

COFFEE SHOP

BUSINESS FORMS SPECIALTY, INC.

AMOUNT DUE

SIGNATURE

CASH ☐ CHECK ☐ CHARGE ☐

Williamsburg Lodge

53.03

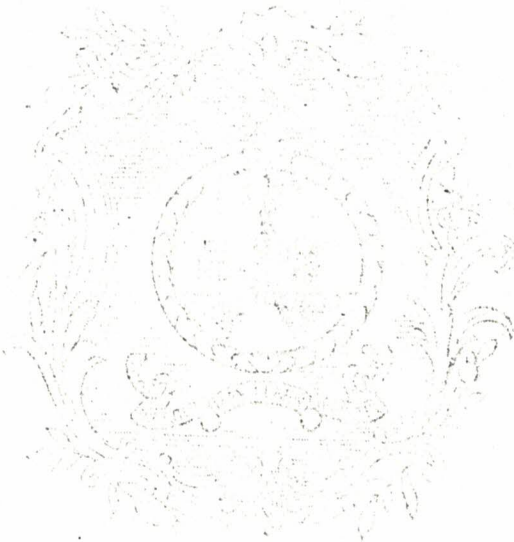
ROOM NO.	RATE	DEPOSIT
4367		

ARRIVAL	DEPARTURE	NO. GUESTS

CONV.

DATE	GUEST ID	TICKET NUMBER	DESCRIPTION OF CHARGE	AMOUNT
------	----------	---------------	-----------------------	--------

53.03



AMOUNT DUE

SIGNATURE

CASH ☐ CHECK ☐ CHARGE ☐

Williamsburg Lodge

ROOM NO.	RATE	DEPOSIT
4369		

ARRIVAL	DEPARTURE	NO. GUESTS

CONV.

DATE	GUEST ID	TICKET NUMBER	DESCRIPTION OF CHARGE	AMOUNT
------	-------------	------------------	-----------------------	--------

2 NIGHTS at 65.00

LODGE LOUNGE

130.00

7.80

6.57

144.37

BUSINESS FORMS SPECIALTY, INC.

AMOUNT DUE

SIGNATURE

CASH ☐ CHECK ☐ CHARGE ☐

Williamsburg Lodge

ROOM NO.	RATE	DEPOSIT
4369		

ARRIVAL	DEPARTURE	NO. GUESTS

CONV.

DATE	GUEST ID	TICKET NUMBER	DESCRIPTION OF CHARGE	AMOUNT
------	----------	---------------	-----------------------	--------

4.98
11.44
46.03
17.69
80.14

BUSINESS FORMS SPECIALTY, INC.

AMOUNT DUE

SIGNATURE

CASH ☐ CHECK ☐ CREDIT ☐

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3 FORM

1 10/20/1981 B6

TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)

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C. Closed in accordance with restrictions contained in donor's deed of gift.

THE WHITE
HOUSE

9 OCTOBER 1981

SPECIAL
ACCOUNT# DEAV-01

PLEASE MAKE ALL CHECKS
PAYABLE TO
'WHITE HOUSE STAFF MESS'
AND FORWARD TO EOB-404

MICHAEL DEEVER
WEST WING

AMOUNT DUE: \$113.85

PLEASE DETACH AND RETURN WITH REMITTANCE

CHARGES FOR SPECIAL ACCOUNT - CAMP DAVID VISITS

FEB 15	CAMP DAVID PURCHASES	13.35
SEP 11-13	CAMP DAVID FOOD SERVICE & REFRESHMENTS	100.50

TOTAL CHARGES	\$113.85
---------------	----------

**SCHEDULE
OF
EXPENSES
AND
AMOUNTS
CLAIMED**

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

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellhops, 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 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), long distance telephone calls for Government business, car rental, relocation or subsistence, etc.

Complete this information if this is a continuation sheet.

PAGE	OF	PAGES

(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.

TRAVELER'S LAST NAME

in compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees to the Government. The information will be 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 is voluntary in all other instances; support the claim may result in delay or loss of reimbursement.

☆ GPO: 1979-0-231-187 P.O. 4333
STANDARD FORM 1012 BACK (10-77)

THE WHITE HOUSE
WASHINGTON

9 OCTOBER 1981

SPECIAL
ACCOUNT# DEAV-01

PLEASE MAKE ALL CHECKS
PAYABLE TO
'WHITE HOUSE STAFF MESS'
AND FORWARD TO EOB-404

MICHAEL DEEVER
WEST WING

AMOUNT DUE : \$101.00

PLEASE DETACH AND RETURN WITH REMITTANCE

CHARGES FOR SPECIAL ACCOUNT - AIR FORCE ONE MEAL SERVICE

MAY 17	ANDREWS AFB TO SOUTH BEND	6.00
MAY 26	POINT MAGU TO ANDREWS AFB	8.00
MAY 27	STEWART AFB TO ANDREWS AFB	3.50
JUN 24	ANDREWS AFB - TEXAS - CALIFORNIA	17.00
JUN 29	CALIFORNIA - OHIO - ANDREWS AFB	27.00
JUL 07	CHICAGO TO ANDREWS AFB	5.00
JUL 30	ANDREWS AFB - ATLANTA - ANDREWS AFB	5.00
SEP 07	ANDREWS AFB TO NEWARK	7.50
SEP 17	ANDREWS AFB TO GRAND RAPIDS	5.00
SEP 18	GRAND RAPIDS - DENVER - ANDREWS AFB	17.00
TOTAL CHARGES:		\$101.00

*Disallowed
Claimed on individual
trips*

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No of Doc Date Restriction
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4 FORM

1 10/6/1981 B6

DEPT. OF STATE TRAVEL REIMBURSEMENT
VOUCHER (OPTIONAL FORM 189A) (FRONT
ONLY)

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5 FORM

1 7/29/1981 B6

TEMPORARY DUTY (TDY) OFFICIAL TRAVEL
AUTHORIZATION

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weights/measures and attach all receipts.)

REMARKS (Names of dependents including date of birth (DOB) of dependent children, explanation for use of foreign registry ship, rates of exchange, etc.)

			STATE DEPT USE ONLY			
Dates 1981 (A)	Local Time (B)	Itinerary and Description (C)	Per Diem Days (D)	Daily Rate (E)	Amount	
					Per Diem (F)	Other (G)
			FORWARDED			
31	7:00	AM EDT Dept. Residence enroute AAFB	1/4	23.00	5.75	
	8:15	AM EDT Dept. Airport enroute Cancun				
31 thru 8/2		CANCUN	2 1/2	63.00	157.50	
8/2	8:00	PM EDT Arrive AAFB				
8/2	9:00	PM EDT Arrive Residence				
GRAND TOTAL TO ITEM 12A ON FACE OF VOUCHER (Subtotals To Be Carried Forward)					163.25	

June Noel D.g St. A/EX Pm 3800

MEMORANDUM

TREASURY
FISCAL SERVICE
DIVISION OF
DISBURSEMENT

WASHINGTON, D. C.

Check No. 41,535,730
SYMBOL 3004

United States Treasury ¹⁵⁻⁵¹/₀₀₀

PAY TO THE
ORDER OF MICHAEL DEEVER

MONTH	DA	YE R
02	17	82

19000001

DOLLARS	CTS.
*****63	25

STATE
DEPT
17030

Henry H. Eades
REGIONAL DISBURSING OFFICER

30041

000000518 415357305

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

No. 1446

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 25, 1981

1. TRAVELER

Name: MICHAEL K. DEEVER ☒ White House Staff

Extension: 6475 Room: West Wing ☐ Other

2. PURPOSE(S) and DATE(S): Advance trip to Cancun

3. ITINERARY CANCUN

(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: July 31, 1981

Date: August 2, 1981

Time: _____

Time: _____

Mode: Government air

Mode: Government air

5. NATURE: ☒ 100% Official ☐ 100% Political

6. SIGNATURES:

Traveler: _____

MICHAEL K. DEEVER

(I have read and agree to the terms set forth on the reverse side)

Department Head

Approving Officer

(Special Assistant to the President for Administration)

7. ESTIMATED COSTS:

SPECIAL EXPENSES:

No. of Days Per Diem _____

☐ Registration Fee of \$ _____

Hotel Name _____

☐ Commercial Car Rental

Hotel Daily Rate \$ _____

☐ Excess Baggage

Other _____

☐ Other _____

8. TRAVEL ADVANCE REQUESTED:

☐ YES

☐ No

Amount: \$ _____

Signature of Recipient: _____

Date: _____

REPAID:

Amount _____

Date _____

Schedule _____

Balance this trip _____

9. FOR TRANSPORTATION OFFICE USE ONLY:

GTR No. _____

Amount \$ _____

OTTAWA, CANADA



DEPARTMENT OF STATE

Washington, D.C. 20520

BUREAU OF ADMINISTRATION
AUTHORIZATION OF OFFICIAL TRAVEL

Applicable Regulations: 6 FAM 100 and 1800
Foreign Service Regulation, Standardized Government
and Joint Travel Regulations

TRAVEL AUTHORIZATION Number 1023-100582, Dated July 17, 1981

The employees on the attached list are authorized to perform official
travel in connection with President Reagan visit to Ottawa, Canada

ITINERARY: Travel from Washington, D.C. to Ottawa, Canada on July 19
and return to Washington, D.C. on July 21, 1981.

PURPOSE: Support of the Presidential visit.

AUTHORIZATIONS: Applicable per diem will be reduced 50% when there are no
lodging expenses.

Use of military aircraft.

Economy class on commercial airlines, if necessary.

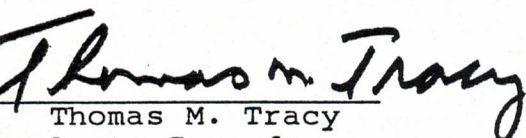
Use of taxicabs for official business.

<u>Appropriation</u>	<u>Allotment</u>	<u>Obligation</u>	<u>Organization</u>	<u>Object</u>	<u>Amount</u>
1910113	1023	100582	2000	2152	\$14,000.00

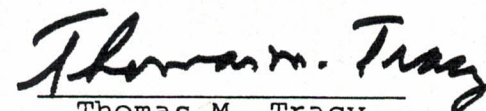
Travel Requested by:

Funds Available:

Authorizing Officer


Thomas M. Tracy
Asst. Sec. for
Administration


Robert Haukness
Budget Officer
A/EX/FM


Thomas M. Tracy
Asst. Sec. for
Administration

Allen, Lyndon✓	P.
Allen, Richard✓	I.
Anderson, Martin✓	I.
Bestany, Joanne✓	9.
— Bull, Jeanne✓	9.
Darman, Richard	I.
Deaver, Michael✓	I.
<u>Fischer, David C.</u> ✓	I.
— Gergen, David	I.
— Gerrard, Constance✓	P.
Hays, Dennis✓	9.
Hickey, Edward✓	I.
— Hoggard, Kim✓	P.
— Law, Bobby✓	P.
— Manning, Robert✓	P.
— McElory, Sally✓	P.
— McSweeney, John✓	P.
Meese, Edwin✓	I.
Moore, Shirley✓	I.
Prosperi, David✓	P.
Randolph, Florence✓	I.
Ruge, Dr.✓	I.
— Schumacher, Karl	9.
— Speakes, Larry✓	P.
— Strong, Betsy✓	P.
Tyson, Charles✓	9.
— Wienberg, Mark✓	P.

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6 FORM

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VOUCHER (OPTIONAL FORM 189A) (FRONT
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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]

C. Closed in accordance with restrictions contained in donor's deed of gift.

THE WHITE HOUSE OFFICE OFFICIAL TRAVEL AUTHORIZATION

No. 1449

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 15, 1982

1. TRAVELER

Name: MICHAEL K. DEEVER ☒ White House StaffExtension: 6475 Room: WH West Wing ☐ Other2. PURPOSE(S) and DATE(S): Ottawa Summit July 19 - 21, 19813. ITINERARY Ottawa, Canada

(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: July 19, 1982Date: July 21, 1981Time: 1:45 p.m.Time: 8:30Mode: Government AirMode: Government Air5. NATURE: ☒ 100% Official ☐ 100% Political

6. SIGNATURES:

Traveler:

MICHAEL K. DEEVER

(I have read and agree to the terms set forth on the reverse side)

Department Head

Approving Officer
(Special Assistant to the President for Administration)

7. ESTIMATED COSTS:

SPECIAL EXPENSES:

No. of Days Per Diem _____

☐ Registration Fee of \$ _____

Hotel Name _____

☐ Commercial Car Rental

Hotel Daily Rate \$ _____

☐ Excess Baggage

Other _____

☐ Other _____

8. TRAVEL ADVANCE REQUESTED:

☐ YES☐ No

Amount: \$ _____

Signature of Recipient: _____

Date: _____

REPAID:

Amount _____

Date _____

Schedule _____

Balance this trip _____

9. FOR TRANSPORTATION OFFICE USE ONLY:

GTR No. _____

Amount \$ _____

Travelers Express Company Inc.

351 4944 579

REFER TO THIS NUMBER FOR PROMPT SERVICE



PAY TO THE
ORDER OF

U.S. TREASURER

DATE

9-14-72

PURCHASER'S RECEIPT

NON-NEGOTIABLE

AMOUNT

TWO SUM 225 00 00

DOLLARS

By act of purchasing the accompanying money order, Purchaser agrees with Travelers Express Company, Inc. ("Travelers") that: Travelers, without waiving any other defense, shall not pay any sum on said money order or on the underlying transportation unless money order or this receipt is physically surrendered to Travelers. If money order is presented for payment within 3 years, the sum payable on said money order shall be increased by a service charge of 25¢ per month from date of purchase up to a maximum of \$21.00. Purchaser shall immediately sign money order in behalf of Travelers and complete same. This contract is also binding on assigns or other successor of either party.

Michael R. Deaver

The White House, Wash DC

THE WHITE HOUSE

WASHINGTON

June 25, 1982

MEMORANDUM FOR:

MICHAEL DEEVER

FROM:

JOHN F. W. ROGERS
DEPUTY ASSISTANT TO THE PRESIDENT
FOR MANAGEMENT

SUBJECT:

TRAVEL OVERPAYMENTS

Upon review of our travel voucher files we have found that a travel voucher submitted by your office in part duplicated claims for travel expenses that had previously been claimed and paid. These duplicate claims were inadvertently not deducted from the total on the later voucher, and thus you were overpaid for those trips. The details of this overpayment are shown below and copies of the pertinent vouchers are attached.

- a. Voucher number 1468-21.1 was submitted for your May 1981 trip to Santa Barbara and was paid on July 21, 1981.
- b. Voucher number 1538-21.1s was submitted for your June 1981 trip to Los Angeles and was paid on July 30, 1981.
- c. Voucher number 1671-21.1 was submitted for all travel by you from April to September, 1981 and was paid on October 7, 1981. The specific trips were: your April trip to Springfield, Illinois; your May trip to South Bend, Indiana; your May trip to Santa Barbara, California which had previously been submitted and paid on voucher 1468-21.1 above; your May trip to West Point, New York; your June trip to Los Angeles, California which had previously been submitted and paid on voucher 1538-21.1s above; your July trip to Chicago, Illinois; your July trip to Atlanta, Georgia; your August trip to Santa Barbara, California; and your September trip to Grand Rapids, Michigan.

The amounts paid on this duplicate voucher for these two trips were \$92.75 and \$132.25 respectively, or a total of \$225.00. Please forward your check in the amount of \$225.00, payable to the U.S. Treasurer, to me for appropriate processing.

THE WHITE HOUSE
WASHINGTON
6/22/82

*John - per our
conversation this
morning, this
is the last one
still due*

John, on the vouchers for Mr. Deaver,

The Mar. 9, memo may be summarized and clarified by looking at the vouchers themselves. First there is a voucher for the June 24 - June 29 trip to Los Angeles. Second, there is a voucher for the May 24 - May 26 trip to Santa Barbara. Third, there is a voucher for every trip Mr. Deaver took between April 1 and September 18, including and duplicating the trips already paid on the two vouchers mentioned previously. Total refund due for those two trips is \$225.00.

BAL. DUE

The March 17 memo relates to incidentals which were billed directly to and paid by the White House from the Williamsburg trip, the total of which exceeded Mr. Deaver's per diem allowance. The incidentals are listed below:

Room 4367 Breakfast/ Coffee Shop	\$16.16-
Room 4367 Dinner/ Coffe Shop	53.03-
Room 4369 Lodge Lounge	6.57-
Room 4369 Breakfast/ Coffee Shop	4.98-
Room 4369 Bicycle Rental	11.44-
Room 4369 Lodge Lounge	46.03-
Room 4369 Breakfast/ Dining Room	17.69-
Subtotal incidentals	\$155.90
Less per diem allowance-24 days @ \$23	-51.75
Excess of incidentals	\$104.15

PAID

It is correct that I would appreciate two separate checks for these refunds, as the trips were from different fiscal years.

Rich Whit

ADMINISTRATIVE OFFICE

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TRAVEL VOUCHERS 1981-1983 (12)

FOIA

F97-0066/19

COHEN, D

Box Number

61

171

DOC Document Type

NO Document Description

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7 FORM

1 7/7/1981 B6

TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)

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-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

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.)

Col. (d) Show amount incurred for each meal including tax and tips and daily total per diem allowance for only actual expense travel

(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.

(k) Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (i) or maximum rate.

(l) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this PAGE information if this is a continuation OF PAGE TRAVEL AUTHORIZATION NO. TRAVELER'S LAST NAME

DATE	TIME	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations)	ITEMIZED SUBSISTENCE EXPENSES							MILEAGE RATE: ¢	AMOUNT CLAIMED						
			BREAK-FAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)		MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)				
5/24	7:00	am EDT - Depart residence enroute Andrews Air Force Base															
"	8:00	am EDT - Depart AAFB enroute Point Mugu, California															
"	1:00	pm PDT - Arrive Point Mugu, California															
5/26	11:00	am PDT - Depart Point Mugu, California															
"	7:00	pm EDT - Arrive Andrews Air Force Base, Washington, DC															
"	8:00	pm EDT - Arrive residence.															
		Overnight at private residence.															
		Per Diem 1 3/4 Day															
		5-22-1-20															
SUBTOTALS ▶																	
TOTALS ▶																	

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 40.25

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

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8 FORM

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B6

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C. Closed in accordance with restrictions contained in donor's deed of gift.

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

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.)

Com-
plete
only
for
actual
expense
travel

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

Information if this is a continuation OF PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME

DATE	TIME	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense)	ITEMIZED SUBSISTENCE EXPENSES							MILEAGE RATE: $\frac{\text{¢}}{\text{MILE}}$	AMOUNT CLAIMED				
			BREAK-FAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)		MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)		
4/1/81	10:20am	Springfield, IL													
4/1	5:20pm														
5/17	12:40pm	So. Bend, Ind.													
5/17	6:30pm														
5/22	1:20pm	Santa Barbara, CA													
5/26	5:15pm	Vortac (MTN)													
5/27	8:35am	West Point, NY													
5/27	12:30pm														
SUBTOTALS ▶															
TOTALS ▶															

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

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Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶

92.75

92.75

92.75

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

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.)

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

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

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(j) Show total subsistence expense incurred for actual expense travel.

(k) Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (i) or maximum rate.

(l) 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.

Information if this is a continuation sheet. OF PAGES TRAVEL AUTHORIZATION NO. TRAVELER'S LAST NAME

DATE	TIME	DESCRIPTION	ITEMIZED SUBSISTENCE EXPENSES							MILEAGE RATE: ^c	AMOUNT CLAIMED				
			BREAK-FAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSIS- TENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)		NO. OF MILES (k)	MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)	
6/24	10:20am	San Antonio, TX., L.A., CA Rancho, Denver, CO.													
6/29	7:40pm	AAFB													
7/7	5:15pm	Chicago													
7/7	11:15 pm														
7/30	12:00pm	Atlanta													
7/30	6:00pm														
											</				

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TOTAL AMOUNT CLAIMED

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.)

Com-
plete
only
for
actual
expense
travel

- (d) Show amount incurred for each meal, including tax and tips, and daily total meal cost.
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- (f) Complete for per diem and actual expense travel.
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if this is a continuation sheet.	OF	PAGES
TRAVEL AUTHORIZATION NO.		

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TOTAL
AMOUNT
CLAIMED ▶

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9 FORM

1 ND B6

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B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

SCHEDULE
OF
EXPENSES
AND
AMOUNTS
CLAIMED

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.)

Com
plete
only
for
actual
exper
travel

Col. (d)	} Show amount of meal cost thru (g)	(h)	Show expenses for porters, etc.
(i)		Complete	
(j)		Show total	
(m)		Show percentage of the lesser cost	
(n)		Show expenses for long distance subsistence	

expenses, such as laundry, cleaning and pressing of clothes, tips to bellboys, etc. (other than for meals).

For per diem and actual expense travel.

Subsistence expense incurred for actual expense travel.

Diem amount, limited to maximum rate, or if travel on actual expense, show of the amount from col. (f) or maximum rate.

enses, such as taxi/limousine fares, air fare (if purchased with cash), local or telephone calls for Government business, car rental, relocation other than etc.

information if this is a continuation sheet.	PAGE _____ OF _____	PAGES _____
TRAVEL AUTHORIZATION NO. _____		
TRAVELER'S LAST NAME _____		

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☆ GPO: 1979 0-281-187 P.O. 4338

STANDARD FORM 1012 BACK (19-77)

ROOM NO. 1005 BEAVER MR MIKE 29 1/88

OUT RATE

CENTURY PLAZA



969905

STREET ADDRESS WHITE HOUSE STAFF
6/24 MS/JS

FROM

AVENUE OF THE STARS
LOS ANGELES, CALIF. 90067

CITY

STATE

TO

EXPLANATION OF CODE

ROOM & TAX

D - ROOM SERVICE H - GARDEN REST.
E - GRANADA ROOM K - BANQUET
F - GRANADA BAR L - LAUNDRY
G - POOL M - LOBBY COURT

CORPORATE AFFILIATE

IN

CLERK

DATE	REFERENCE	CHARGES	CREDITS	BALANCE	PICKUP
JUN 24	ROOM 905	C* 88.00			
JUN 24	TAX 905	C* 6.60			
JUN 25	ROOM 1905	C* 88.00			
JUN 25	TAX 1905	C* 6.60			
JUN 26	ROOM 1905	7* 88.00			
JUN 26	TAX 1905	7* 6.60			
JUN 27	ROOM 1905	7* 88.00			
JUN 27	TAX 1905	7* 6.60			
JUN 28	ROOM 1905	P* 88.00			
JUN 28	TAX 1905	P* 6.60			
			INTERNATIONAL TELS		
				473.00	
				189.20	
				283.80	
				378.40	

2159421

CITY LEDGER

CENTURY PLAZA
AVENUE OF THE STARS
LOS ANGELES, CALIF. 90067

REGARDLESS OF CHARGE INSTRUCTIONS, THE UNDERSIGNED HAS REVIEWED THE ABOVE CHARGES AND ACKNOWLEDGES THEM AS A PERSONAL INDEBTEDNESS AND AGREES TO PAY SAME UPON DEMAND. SHOULD IT BECOME NECESSARY TO ENFORCE PAYMENT OF THIS OBLIGATION, THE UNDERSIGNED AGREES TO PAY ALL COSTS OF COLLECTION, INCLUDING COURT COSTS AND ATTORNEY'S FEES.

CREDIT CARD

W.H.
STAFF

DATE

SIGNATURE

CHARGE TO

1905 DEAYER MR MIKE 29 INFO

WHITE HOUSE STAFF
STREET ADDRESS 6/24 MS/JS

CITY STATE

CORPORATE AFFILIATE

OUT RATE

FROM

TO

IN CLERK

CENTURY
PLAZA

AVENUE OF THE STARS
LOS ANGELES, CALIF. 90067



969906

EXPLANATION OF CODE

D - ROOM SERVICE H - GARDEN REST.
E - GRANADA ROOM K - BANQUET
F - GRANADA BAR L - LAUNDRY
G - POOL M - LOBBY COURT

INCIDENTALS

DATE	REFERENCE	CHARGES	CREDITS	BALANCE	PICKUP
JUN 24	MISC 1905	S* 24.15			
JUN 24	PR OUT 1905	S* 3.00		* 27.15	C* 27.15
JUN 24	MISC 1905	C* .00		* 27.15 *	Z* 27.15
JUN 24	PHONE 1905	7* 1.50	original		
JUN 24	DREST'R 1905	7* 45.22		* 73.87	O* 73.87
JUN 25	GREST'R 1905	O* 1.56		* 75.43	C* 75.43
JUN 25	MISC 1905	C* .00		* 75.43 *	P* 75.43
JUN 25	GREST'R 1905	P* 4.83	INTERNATIONAL	* 77.26	A* 77.26
JUN 25	DREST'R 1905	A* 51.30	FILES	* 102.56	B* 102.56
JUN 26	VILETL 1905	B* 4.35		* 102.91	Z* 112.91
JUN 26	MISC 1905	Z* .00		* 112.91 *	T* 112.91
JUN 26	PHONE 1905	T* 1.50	original	* 114.41	O* 114.41
JUN 27	HREST'R 1905	O* 4.82		* 119.23	Z* 119.23
JUN 27	MISC 1905	Z* .00		* 119.23 *	P* 119.23
JUN 28	MISC 1905	P* .00		* 119.23 *	T* 119.23
JUN 28	DREST'R 1905	T* 8.92		* 128.15	

CENTURY PLAZA
AVENUE OF THE STARS
LOS ANGELES, CALIF. 90067

REGARDLESS OF CHARGE INSTRUCTIONS, THE UNDERSIGNED HAS REVIEWED THE ABOVE CHARGES AND ACKNOWLEDGES THEM AS A PERSONAL INDEBTEDNESS AND AGREES TO PAY SAME UPON DEMAND SHOULD IT BECOME NECESSARY TO ENFORCE PAYMENT OF THIS OBLIGATION. THE UNDERSIGNED AGREES TO PAY ALL COSTS OF COLLECTION, INCLUDING COURT COSTS AND ATTORNEY'S FEES.

CREDIT CARD

W.H.
STAFF

DATE _____ SIGNATURE _____
CHARGE TO _____

FORWARD TO: 195 OEOB

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

- DATE MAY 21, 1981
1. TRAVELER'S NAME MICHAEL K. DEAVEK
EXTENSION 6475 ROOM NO. 15 F2WW
WHITE HOUSE STAFF ☒ OTHER _____
2. ITINERARY FL 59 - UNITED
3. DEPARTURE DATE MAY 24, 1981 RETURN DATE Return AF #1
TIME 12 NOON TIME _____
MODE OF TRANSPORTATION Air MODE OF TRANSPORTATION _____
4. IS GOVERNMENT-ISSUED TICKET BEING REQUESTED? YES ☒ NO ☐
5. PURPOSE(S), EVENT(S), DATE(S) To JOIN THE PRESIDENT
6. NATURE: 100% OFFICIAL ☐ 100% POLITICAL ☐ MIXED OFFICIAL/POLITICAL ☐
7. TRAVEL ADVANCE REQUESTED \$ 7
8. TRAVELER'S SIGNATURE: [Signature]

(I HAVE READ AND AGREE TO THE TERMS SET FORTH ON THE REVERSE SIDE)

9. APPROVALS

DEPT. HEAD/DEPUTY

APPROVING OFFICER

[Signature]

.....
FOR ACCOUNTING USE ONLY:
ESTIMATED COST:

- TRANSPORTATION _____
- PER DIEM _____
- OTHER _____

GTR D 7,583,512
\$136.00