

Tuesday 1/15/74

TRIP
1/16-17/74

11:30

Brian advises he and Mr. Whitehead will go to NYC the evening of Wednesday, Jan. 16; returning to D. C. on Thursday, Jan. 17. Mr. Whitehead will be on the Today Show on Thursday from 8:30-9:30.

We have made hotel reservations for them at the

Warwick Hotel (212) 247-2700
54th Street and the Avenue of the Americas

They will be held for late arrival,

TRAVEL VOUCHER
 MEMORANDUM

*Emily
 Tracy*

DEPARTMENT, BUREAU, OR ESTABLISHMENT Executive Office of the President Office of Telecommunications Policy		VOUCHER NO.
PAYEE'S NAME Clay T. Whitehead		SCHEDULE NO.
MAILING ADDRESS (Including ZIP Code) OTP 1800 G St., NW Washington, D.C. 20504		PAID BY
OFFICIAL DUTY STATION Washington, D. C.	RESIDENCE Washington, D. C.	
FOR TRAVEL AND OTHER EXPENSES FROM (DATE) 1/16/74 TO (DATE) 1/17/74	TRAVEL ADVANCE Outstanding \$	CHECK NO.
APPLICABLE TRAVEL AUTHORIZATION(S) NO. TP4AT129 DATE 1/16/74	Amount to be applied	CASH PAYMENT OF \$
	Balance to remain outstanding \$	RECEIVED (DATE)

TRANSPORTATION REQUESTS ISSUED

TRANSPORTATION REQUEST NUMBER	AGENT'S VALUATION OF TICKET	INITIALS OF CARRIER ISSUING TICKET	MODE, CLASS OF SERVICE, AND ACCOMMODATIONS *	DATE ISSUED	POINTS OF TRAVEL	
					FROM-	TO-
B1660538	\$55.27	EA	Coach	1/16	Washington, D. C. and return	New York, NY

1-17-74	AMOUNT CLAIMED	Dollars	Cts
	→	18	75
		\$25	00
Approved. Long distance telephone calls are certified as necessary in the interest of the Government.	DIFFERENCES:		

NEXT PREVIOUS VOUCHER PAID UNDER SAME TRAVEL AUTHORITY	Total verified correct for charge to appropriation(s)		
VOUCHER NO.	D.O. SYMBOL	DATE (MONTH-YEAR)	(initials) -----
			Applied to travel advance (appropriation symbol)

	NET TO TRAVELER	→	

ACCOUNTING CLASSIFICATION

0.970.4.92110.511

*pd
 2-5*

* Abbreviations for Pullman accommodations: MR, master room; DR, drawing room; CP, compartment; BR, bedroom; DSR, duplex single room; RM, roomette; DRM, duplex roomette; SOS, single occupancy section; LB, lower berth; UB, upper berth; LB-UB, lower and upper berth; S, seat.

TWA FORM T-405B 2-72 PRINTED IN U.S.A. BY RAND MC NALLY, CHICAGO

Issued By **SOLD SUBJECT TO CONDITIONS OF CONTRACT ON PASSENGER'S COUPON**

EASTERN AIR LINES, -INC.

TW

PASSENGER TICKET AND BAGGAGE CHECK PASSENGER'S COUPON

FROM TO	CARRIER	FARE CALCULATION
		007

585213506
DATE AND PLACE OF ISSUE

If the passenger's journey involves an ultimate destination or stop in a country other than the country of departure, the Warsaw Convention may be applicable and the Convention governs and in most cases limits the liability of carriers for death or personal injury and in respect of loss of or damage to baggage.

DATE OF ISSUE

NAME OF PASSENGER **C. WHITEHEAD** NOT TRANSFERABLE

ORIGIN

DESTINATION

1	2	3	4	ORIGINALLY ISSUED AGAINST BY AGENTS NUMERIC CODE	AT	ON DATE	YE
1	2	3	4	TICKET DESIGNATOR & TOUR CODE	THIS TICKET ISSUED IN EXCHANGE FOR		

7574
0621-01520197
Y5 CDP

NOT GOOD FOR PASSAGE	FARE BASIS	ALLOW	CARRIER	FLIGHT/CLASS	DATE	TIME	STATUS
VOID	VOID			VOID		VOID	
VOID	VOID			VOID		VOID	
WAS NATIONAL			EA	OPEN			
OSYC LAGUARDIA			EA	OPEN			
WAS NATIONAL							

Agent
CONJUNCTION TICKET

FORM OF PAYMENT

BAGGAGE CHECKED UNCKD.	PCS. WT.	UNCK. PCS. WT.	UNCK. PCS. WT.	UNCK. PCS. WT.	UNCK. PCS. WT.	UNCK. PCS. WT.	UNCK. PCS. WT.	FARE	ENDORSEMENTS
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FARE	EY	TOTAL	CY	ROUTE CODE	ENCODE	CPN	AIRLINE CODE	FORM AND SERIAL NUMBER	CK
51.18		55.27					007	5852135067 2	□
TAX	0Y								
4.09									
EQUIV. PST	0Y								

1660538

1. PLACE PREPARED (City and State) Washington, D. C.	2. DATE PREPARED 1/15/73	OFFICIAL TRAVEL AUTHORIZATION (See Instructions on reverse)
3. NAME OF TRAVELER (As shown on payroll) Clay T. Whitehead		
4. TITLE (As shown on payroll) Director		NOTE TO TRAVELER The official travel specified herein may not be performed until Item 22 has been executed by a GSA official empowered to authorize the travel. The number (Item 23) and date (Item 24) of this Authorization must appear on each voucher claiming reimbursement for travel expenses incurred consequent to this Authorization.
5. OFFICE OR SERVICE, DIVISION AND PERMANENT DUTY STATION Office of Telecommunications Policy		
6. LOCATION OF TRAVELER'S OFFICIAL STATION Washington, D. C.		
7. SPECIFIC PURPOSE OF TRAVEL		

Attend industry meetings and appear on "Today Show."

8. APPROXIMATE DATES OF TRAVEL	9. TYPE OF AUTHORIZATION	If Item 9B is checked, complete Items 10 and 11 below	
A. BEGINNING ABOUT: 1/16/74	A. ORIGINAL <input checked="" type="checkbox"/>	10. ORIGINAL AUTH. NO.	11. ITEM NO. (S) AMENDED
B. ENDING ABOUT: 1/17/74	B. AMENDED <input type="checkbox"/>		

12. ITINERARY			
A. DATE	B. TRAVEL FROM	C. TRAVEL TO	D. ADDRESS AT DESTINATION
1/16/74	Washington, D. C.	New York, New York	
1/17/74	New York, New York	Washington, D. C.	

13. MODE OF TRANSPORTATION			
A. NORMAL		B. SPECIAL (Must be justified in Item 16)	
(1) <input checked="" type="checkbox"/> COMMON CARRIER	(2) <input type="checkbox"/> GOVERNMENT-OWNED VEHICLE	(1) <input checked="" type="checkbox"/> FIRST CLASS PLANE	(3) <input type="checkbox"/> PRIVATELY OWNED VEHICLE (Complete 13C below)
<input checked="" type="checkbox"/> AIR	<input type="checkbox"/> BUS	(2) <input type="checkbox"/> EXTRA-FARE TRAIN OR PLANE	(4) <input type="checkbox"/> OTHER
<input type="checkbox"/> RAIL	<input type="checkbox"/> SHIP		
C. If travel by privately owned vehicle is authorized check which of the following restrictions apply:			
(1) <input type="checkbox"/> COST OF TRAVEL DOES NOT EXCEED TRAVEL BY COMMON CARRIER.	(2) <input type="checkbox"/> COST OF TRAVEL IS LIMITED TO THE CURRENT INTERAGENCY MOTOR POOL SERVICE RATES FOR A COMPARABLE VEHICLE.	(3) <input type="checkbox"/> ITS USE HAS BEEN ADMINISTRATIVELY DETERMINED TO BE ADVANTAGEOUS TO THE GOVERNMENT. (Explain in Item 16)	

14. ALLOWANCES		
A. MILEAGE RATE	B. PER DIEM RATE	C. OTHER ALLOWANCES (Explain in Item 16 below)
\$ PER MILE	\$ 25.00 PER DAY	

15. ESTIMATED COST TO THE GOVERNMENT			
A. TOTAL TRANSPORTATION	B. TOTAL PER DIEM	C. TOTAL OTHER	D. TOTAL COST TO GOVERNMENT
\$ 57.64.00	\$ 50.00	\$ 20.00	\$ 134.00

16. STATEMENT OF JUSTIFICATION FOR SPECIAL MODES OF TRANSPORTATION AND ALLOWANCES
First Class Travel Authorized.

17. TRAVEL RECOMMENDED BY Director, Office of Telecommunications Policy 1/15/74 (Signature) (Title) (Date)	18. COST ACCOUNT SYMBOL 0.970.4.92110.511
19. TRAVEL APPROVED BY Bryan M. Eagle Executive Assistant 1/15/74 (Signature) (Title) (Date)	20. FUNDS OBLIGATED BY (Initials) (Date)
21. TRAVEL CONCURRED IN (When required)	

22. TRAVEL AUTHORIZED: The person named in Item 3 above is authorized to travel at Government expense subject to the Standardized Government Travel Regulations (as amended), Bureau of the Budget Circular No. A-56 (Revised), existing GSA travel policy, and the conditions specified in this Authorization. Bryan M. Eagle Executive Assistant (Signature) (Title)	23. AUTHORIZATION NO. TP4AT129
	24. DATE AUTHORIZED 01/16/74

INSTRUCTIONS FOR PREPARATION OF GSA FORM 87

Items 1 through 4: Self-explanatory.

Items 5 and 6: If these locations are in a regional office, enter the regional location (city and State) and the regional number; if located in GSA Central Office, enter Washington, Central Office.

Item 7: Show the specific purpose of the travel. Generalizations such as "Official Business" or similar phrases are not acceptable. Indicate why the desired results cannot be gained through correspondence or other less-expensive means than travel.

Item 8: Enter the scheduled dates of the first and last days of the travel period.

Item 9: Check whether the form represents an original or an amended authorization.

Items 10 and 11: If the form amends a previous authorization, enter the original authorization number in Item 10 and the item number(s) being amended in Item 11.

Item 12: If trip order, specify in sequence and by date each official point to be visited and, if known, the address at destination where the traveler can be reached. If authorization covers travel within specified States, list the States. If travel authorization is limited only to the continental limits of the United States, enter phrase "To any points within the continental limits of the United States, in such order and at such times as may be necessary, and return."

Item 13: Check mode(s) of transportation required. The use of extra-fare trains, extra-fare airplanes, and other types of conveyances shall be justified by showing the advantage to the Government in a statement under Item 16.

Item 14: See the GSA Administrative Manual, Chap. 7 (DOA 5410.1) for allowable mileage and per diem

rates. Under other allowances, indicate any unusual expense that the traveler will incur, such as rental of conference rooms, employment of temporary stenographers, or transfer of excess baggage in connection with official travel. If travel is incident to a change of official station, and the payment of travel, transportation, and related moving expenses is authorized, enter the remark "See attached GSA Form 87A." All such allowances must be carefully detailed on GSA Form 87A.

Item 15: Enter the estimated cost of travel, per diem, and other expenses that the Government will incur as a result of this authorization.

Item 16: If space provided is insufficient, complete the statement on a plain sheet and staple a copy to each copy of the authorization form.

Item 17: To be executed by the official recommending the travel.

Item 18: Enter the cost account symbol(s) to which the expenses incident to the travel are to be charged.

Item 19: To be executed by the official administratively approving the travel.

Item 20: For use by the service or staff office maintaining official prevalidation control records.

Item 21: When required, the signatures of concurring officials or the method by which their concurrences are obtained shall be included in this block.

Item 22: To be executed by the appropriate GSA official empowered to authorize the travel.

Item 23: The authorization number to be entered by the official approving the travel.

Item 24: Enter the date Item 23 is executed.