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**Collection: Deaver, Michael**  
**Folder Title: Travel-Deaver (3)**  
**Box: 59**

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# WITHDRAWAL SHEET

## Ronald Reagan Library

**Collection Name** DEAVER, MICHAEL: FILES

**Withdrawer**

KDB 8/29/2011

**File Folder** TRAVEL - DEAVER (3)

**FOIA**

F97-0066/19

**Box Number** 61

COHEN, D

176

| DOC NO | Doc Type | Document Description                                      | No of Pages | Doc Date  | Restrictions |
|--------|----------|---|-------------|-----------|--------------|
| 1      | FORM     | TRAVEL VOUCHER (FORM SF 1012)<br>(FRONT ONLY)             | 1           | 8/21/1984 | B6           |
| 2      | FORM     | TRAVEL VOUCHER (FORM SF 1012)<br>(FRONT ONLY)             | 1           | 8/21/1984 | B6           |
| 3      | FORMS    | FRONT OF TRAVEL VOUCHER (FORM SF<br>1012) + COPY OF CHECK | 1           | 8/3/1984  | B6           |
| 4      | FORM     | TRAVEL VOUCHER (FORM SF 1012)<br>(FRONT ONLY)             | 1           | 7/27/1984 | B6           |
| 5      | FORMS    | FRONT OF TRAVEL VOUCHER (FORM SF<br>1012) + COPY OF CHECK | 1           | 7/6/1984  | B6           |
| 6      | FORM     | TRAVEL VOUCHER (FORM SF 1012)<br>(FRONT ONLY)             | 1           | 7/6/1984  | 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]

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]

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

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8158

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 15, 1984

1. TRAVELER

Name: Michael K. Deaver

White House Staff

Extension: 6475

Room: WV

Other

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

To advance the President's trip to Dallas and  
The Republican National Convention - Thursday, August 16, 1984

3. ITINERARY

Washington, D.C. Dallas, Texas and back to Washington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE:

Date: ~~XXXXXX~~ August 16, 1984

RETURN:

Date: August 16, 1984

Time: 7:15 AM

Time: approx. 8:00 PM

Mode: Government Plane

Mode: Government Plane

5. NATURE:

100% Official

100% Political

Reagan-Bush '84 to pay

6. SIGNATURES:

Traveler: \_\_\_\_\_

(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:

No. of Days Per Diem \_\_\_\_\_

Hotel Name \_\_\_\_\_

Hotel Daily Rate \$ \_\_\_\_\_

Other \_\_\_\_\_

SPECIAL EXPENSES:

Registration Fee of \$ \_\_\_\_\_

Commercial Car Rental

Excess Baggage

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 \$ \_\_\_\_\_

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8158

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 15, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: 447  Other

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

To advance the President's trip to Dallas and  
The Republican National Convention - Thursday, August 16, 1984

3. ITINERARY

Washington, D.C. Dallas, Texas and back to Washington, D.C.

(List all cities where stopover occurs.)

4. DEPARTURE:

Date: August 16, 1984

Time: 7:15 AM

Mode: Government Plane

RETURN:

Date: August 16, 1984

Time: approx. 8:00 PM

Mode: Government Plane

5. NATURE:  100% Official  100% Political Reagan-Bush '84 to pay

6. SIGNATURES:

Traveler: \_\_\_\_\_

(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:

No. of Days Per Diem \_\_\_\_\_

Hotel Name \_\_\_\_\_

Hotel Daily Rate \$ \_\_\_\_\_

Other \_\_\_\_\_

Registration Fee of \$ \_\_\_\_\_

Commercial Car Rental

Excess Baggage

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 \$ \_\_\_\_\_

LW

THE WHITE HOUSE  
WASHINGTON

DATE: August 21, 1984

FOR: ANGELA M. BUCHANAN JACKSON  
TREASURER, REAGAN/BUSH '84

FROM: JOHN F. W. ROGERS  
ASSISTANT TO THE PRESIDENT FOR  
MANAGEMENT AND ADMINISTRATION

SUBJECT: AUTHORIZATION FOR PAYMENT

COMPANY: Michael K. Deaver  
The White House  
Washington, D.C. 20500

CHECK PAYABLE TO: Michael K. Deaver

AMOUNT: \$0.00

PURPOSE: Accompany the President to Sedalia, MO on 8/19/84

| Date | Invoice | Item | Quantity | Amount |
|------|---------|------|----------|--------|
|      |         |      |          |        |
|      |         |      |          |        |
|      |         |      |          |        |
|      |         |      |          |        |
|      |         |      |          |        |

Authorized by:   
(signature of approving official)

Date sent for payment: \_\_\_\_\_

COMMENTS:

# WITHDRAWAL SHEET

## Ronald Reagan Library

*Collection Name*

DEAVER, MICHAEL: FILES

*Withdrawer*

KDB 8/29/2011

*File Folder*

TRAVEL - DEAVER (3)

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176

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*DOC Document Type*

*No of Doc Date Restriction*

*NO Document Description*

*pages*

*tions*

1 FORM

1 8/21/1984 B6

TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)

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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.

**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 meal cost.

Col. (g) thru (j) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals). Complete for per diem and actual expense travel.

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

(i) 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.

(n) Show expenses, such as: taxi/limosine 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 2 information if this is a continuation OF PAGES 1

TRAVEL AUTHORIZATION NO. 8159

TRAVELER'S LAST NAME DEAVER

| DATE | TIME (Hour and am/pm) | DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) | ITEMIZED SUBSISTENCE EXPENSES |           |            |           | MILEAGE RATE: NO. OF MILES (k) | 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) |  |  |  |  |  |
| 8/19 | 12:20                 | Andrews AFB  |                               |           |            |           |                                |                               |             |                               |             |                 |           |  |  |  |  |  |
| 8/19 |                       | Ar. Sedalia, MO  |                               |           |            |           |                                |                               |             |                               |             |                 |           |  |  |  |  |  |
| 8/19 |                       | Dpt. Sedalia, MO   |                               |           |            |           |                                |                               |             |                               |             |                 |           |  |  |  |  |  |
| 8/19 | 7:50                  | Ar. Andrews AFB  |                               |           |            |           |                                |                               |             |                               |             |                 |           |  |  |  |  |  |
|      |                       |  | SUBTOTALS ▶                   |           |            |           |                                |                               |             |                               |             |                 |           |  |  |  |  |  |
|      |                       |  | TOTALS ▶                      |           |            |           |                                |                               |             |                               |             |                 |           |  |  |  |  |  |

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

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 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 CLAIMED ▶**

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8159

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 16, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other \_\_\_\_\_

2. PURPOSE(S) and DATE(S): To accompany the President, August 19, 1984

3. ITINERARY Washington, D.C., Sedalia, Missouri, Washington, DC.  
(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: August 19, 1984

Date: August 19, 1984

Time: 12:20 PM

Time: 7:50 PM

Mode: Air Force One

Mode: Air Force One

5. NATURE:  100% Official

100% Political  
Reagan - Bush

Margaret D. Tutwiler

6. SIGNATURES:

Traveler: [Signature]  
(I have read and agree to the terms set forth on the reverse side)

[Signature]  
Department Head

[Signature]  
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 \$ \_\_\_\_\_

103 # 01236

THE WHITE HOUSE  
ADMIN  
'84 AUG 17 10:34





LS

THE WHITE HOUSE  
WASHINGTON

DATE: August 21, 1984

FOR: ANGELA M. BUCHANAN JACKSON  
TREASURER, REAGAN/BUSH '84

FROM: JOHN F. W. ROGERS  
ASSISTANT TO THE PRESIDENT FOR  
MANAGEMENT AND ADMINISTRATION

SUBJECT: AUTHORIZATION FOR PAYMENT

COMPANY: Michael K. Deaver  
The White House  
Washington, D.C. 20500

CHECK PAYABLE TO: Michael K. Deaver

AMOUNT: \$0.00

PURPOSE: Accompany the President to Cincinnati, Ohio and Decatur, Ill  
on 8/20/84

| Date | Invoice | Item | Quantity | Amount |
|------|---------|------|----------|--------|
|      |         |      |          |        |
|      |         |      |          |        |
|      |         |      |          |        |
|      |         |      |          |        |

Authorized by:   
(signature of approving official)

Date sent for payment: \_\_\_\_\_

COMMENTS:

# WITHDRAWAL SHEET

Ronald Reagan Library

*Collection Name*

DEAVER, MICHAEL: FILES

*Withdrawer*

KDB 8/29/2011

*File Folder*

TRAVEL - DEAVER (3)

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COHEN, D

*Box Number*

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*DOC Document Type*

*NO Document Description*

*No of Doc Date Restriction*  
*pages* *tions*

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2 FORM

1 8/21/1984 B6

TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)

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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]

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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. 8161

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 15, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other \_\_\_\_\_

2. PURPOSE(S) and DATE(S): To accompany the President, Aug. 20, 1984

3. ITINERARY Washington, D.C., Cincinnati, Ohio, Decatur, Illinois  
Washington, D.C. (List all cities where stopover occurs.)

4. DEPARTURE:

Date: August 20, 1984

Time: 9:45 AM

Mode: Air Force One

RETURN:

Date: August 20, 1984

Time: 7:00 PM

Mode: Air Force One

5. NATURE:  100% Official

100% Political

6. SIGNATURES:

Traveler: [Signature]

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

[Signature]  
Department Head

[Signature]  
Reason: Business

[Signature]  
Approving Officer  
(Special Assistant to the President for Administration)

7. ESTIMATED COSTS:

No. of Days Per Diem \_\_\_\_\_

Hotel Name \_\_\_\_\_

Hotel Daily Rate \$ \_\_\_\_\_

Other \_\_\_\_\_

SPECIAL EXPENSES:

Registration Fee of \$ \_\_\_\_\_

Commercial Car Rental

Excess Baggage

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 \$ \_\_\_\_\_

103 #0 1427



THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8159

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 16, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To accompany the President, August 19, 1984

3. ITINERARY Washington, D.C., Sedalia, Missouri, Washington, DC.  
(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: August 19, 1984

Date: August 19, 1984

Time: 12:20 PM

Time: 7:50 PM

Mode: Air Force One

Mode: Air Force One

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: [Signature]  
(I have read and agree to the terms set forth on the reverse side)

Department Head

Approving Officer  
[Signature]  
(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 \$ \_\_\_\_\_

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8159

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 16, 1984

1. TRAVELER

Name: Michael X. Deaver  White House Staff

Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To accompany the President, August 19, 1984

3. ITINERARY Washington, D.C., Sedalia, Missouri, Washington, DC.  
(List all cities where stopover occurs.)

4. DEPARTURE: RETURN:

Date: August 19, 1984 Date: August 19, 1984

Time: 12:20 PM Time: 7:50 PM

Mode: Air Force One Mode: Air Force One

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: \_\_\_\_\_  
(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 \$ \_\_\_\_\_

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8164

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 15, 1984

1. TRAVELER

Name: Michael X. Deaver  White House Staff  
Extension: 6475 Room: 444  Other

2. PURPOSE(S) and DATE(S): To accompany the President, Aug. 22- Aug. 24, 1984

3. ITINERARY Washington, D.C., Dallas, Texas, Chicago, Illinois, Wash-  
ington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: August 22, 1984 Date: August 25, 1984  
Time: TBA Time: TBD  
Mode: Air Force One Mode: Air Force One

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: [Signature]  
(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 \$ \_\_\_\_\_



THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8164

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 15, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff  
Extension: 6475 Room: WV  Other

2. PURPOSE(S) and DATE(S): To accompany the President, Aug. 22- Aug. 24, 1984

3. ITINERARY Washington, D.C., Dallas, Texas, Chicago, Illinois, Wash-  
ington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE: August 22, 1984 RETURN: August 25, 1984  
Time: TBA Time: TBD  
Mode: Air Force One Mode: Air Force One

5. NATURE:  100% Official  100% Political

6. SIGNATURES:  
Traveler: \_\_\_\_\_  
(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 \$ \_\_\_\_\_

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8161

August 15, 1984

Date of Request

(TRAVELER TO COMPLETE SECTIONS 1-8.)

1. TRAVELER

Name: Michael K. Denver

White House Staff

Extension: 6475 Room: WW

Other

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

To accompany the President, Aug. 20, 1984

3. ITINERARY

Washington, D.C. Washington, Ohio Cincinnati, Ohio Decatur, Illinois  
(List all cities where stopover occurs.)

4. DEPARTURE:

Date: August 20, 1984

RETURN:

Date: August 20, 1984

Time: 9:45 AM

Time: 7:00 PM

Mode: Air Force One

Mode: Air Force One

5. NATURE:  100% Official

100% Political

6. SIGNATURES:

Traveler: MKD

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

MKD  
Department Head

Margaret D. Tuttle  
Approving Officer  
(Special Assistant to the President for Administration)

7. ESTIMATED COSTS:

No. of Days Per Diem 1

Hotel Name \_\_\_\_\_

Hotel Daily Rate \$ \_\_\_\_\_

Other \_\_\_\_\_

Registration Fee of \$ \_\_\_\_\_

Commercial Car Rental

Excess Baggage

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 \$ \_\_\_\_\_

103 HC 4431

ORIGINATING OFFICE COPY

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8161

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request August 15, 1984

1. TRAVELER

Name: Michael K. Sawyer  White House Staff  
Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To accompany the President, Aug. 20, 1984

3. ITINERARY Washington, D.C. Cincinnati, Ohio, Decatur, Illinois  
(List all cities where stopover occurs.)

4. DEPARTURE: August 20, 1984 9:45 AM Mode: Air Force One  
RETURN: August 20, 1984 7:00 PM Mode: Air Force One

5. NATURE:  100% Official  100% Political

6. SIGNATURES:  
Traveler: [Signature]  
Department Head: [Signature]  
Approving Officer: [Signature]  
(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 \$ \_\_\_\_\_

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8156

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 27, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To accompany the President, July 28 - Aug 15, 84

3. ITINERARY Washington, D.C., Los Angeles-Santa Barbara, Washington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE: RETURN:

Date: July 28, 1984 Date: August 15, 1984

Time: 10:50 AM Time: Afternoon

Mode: Government Trans. Mode: Government Trans.

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: Michael Deaver  
(I have read and agree to the terms set forth on the reverse side)  
Michael Deaver Department Head Thomas Bruneau 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 \$ \_\_\_\_\_

103 \$3,100 P425

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8156

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 27, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: NW  Other

2. PURPOSE(S) and DATE(S): To accompany the President, July 28 - Aug 15, 84

3. ITINERARY Washington, D.C., Los Angeles-Santa Barbara, Washington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE: RETURN:

Date: July 28, 1984 Date: August 15, 1984

Time: 10:50 AM Time: Afternoon

Mode: Government Trans. Mode: Government Trans.

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: [Signature]

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

[Signature]  
Department Head

[Signature]  
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 \$ \_\_\_\_\_

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8156

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 27, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WN  Other

2. PURPOSE(S) and DATE(S): To accompany the President, July 28 - Aug 15, 84

3. ITINERARY Washington, D.C., Los Angeles-Santa Barbara, Washington, D.C.

(List all cities where stopover occurs.)

4. DEPARTURE: RETURN:

Date: July 28, 1984 Date: August 15, 1984

Time: 10:50 AM Time: Afternoon

Mode: Government Trans. Mode: Government Trans.

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: \_\_\_\_\_

(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 \$ \_\_\_\_\_

THE WHITE HOUSE  
WASHINGTON

2W

DATE: July 26, 1984

FOR: ANGELA M. BUCHANAN JACKSON  
TREASURER, REAGAN/BUSH '84

FROM: JOHN F. W. ROGERS  
ASSISTANT TO THE PRESIDENT FOR  
MANAGEMENT AND ADMINISTRATION

SUBJECT: AUTHORIZATION FOR PAYMENT

COMPANY: Michael K. Deaver  
The White House  
Washington, D.C. 20500

CHECK PAYABLE TO: Michael Deaver

AMOUNT: \$22.50

PURPOSE: Accompany the President to Huntsville, Ala 7/4-5/84

| Date | Invoice | Item | Quantity | Amount |
|------|---------|------|----------|--------|
|      |         |      |          |        |

REAGAN-BUSH '84

CHECK NO. 18455  
15-3  
540

440 FIRST STREET, N.W. • SUITE 600 • WASHINGTON, D.C. 20001

THE RIGGS NATIONAL BANK  
WASHINGTON, D.C.

| DATE     | CHECK NUMBER |
|----------|--------------|
| 08/08/84 | 0000018455   |

| AMOUNT         |
|----------------|
| \$ *****75.00* |

\*\*\*\*\*SEVENTY FIVE AND 00/100

PAY TO THE ORDER OF: THE HONORABLE MICHAEL DEAVER  
THE WHITE HOUSE  
WASHINGTON, DC. 20500

*Carolyn S. Mealy*  
AUTHORIZED SIGNATURE

⑈018455⑈ ⑆054000030⑆ 01⑈08484679⑈

LU

THE WHITE HOUSE  
WASHINGTON

DATE: July 26, 1984

FOR: ANGELA M. BUCHANAN JACKSON  
TREASURER, REAGAN/BUSH '84

FROM: JOHN F. W. ROGERS  
ASSISTANT TO THE PRESIDENT FOR  
MANAGEMENT AND ADMINISTRATION

SUBJECT: AUTHORIZATION FOR PAYMENT

COMPANY: Michael K. Deaver  
The White House  
Washington, D.C. 20500

CHECK PAYABLE TO: Michael Deaver

AMOUNT: \$22.50

PURPOSE: Accompany the President to Huntsville, Ala 7/4-5/84

| Date  | Invoice | Item  | Quantity | Amount |
|-------|---------|-------|----------|--------|
| _____ | _____   | _____ | _____    | _____  |
| _____ | _____   | _____ | _____    | _____  |
| _____ | _____   | _____ | _____    | _____  |
| _____ | _____   | _____ | _____    | _____  |

Authorized by:   
(signature of approving official)

Date sent for payment: \_\_\_\_\_

COMMENTS:



THE WHITE HOUSE  
WASHINGTON

DATE: July 30, 1984

FOR: ANGELA M. BUCHANAN JACKSON  
TREASURER, REAGAN/BUSH '84

FROM: JOHN F. W. ROGERS  
ASSISTANT TO THE PRESIDENT FOR  
MANAGEMENT AND ADMINISTRATION

SUBJECT: AUTHORIZATION FOR PAYMENT

COMPANY: Michael K. Deaver  
The White House  
Washington, D.C. 20500

CHECK PAYABLE TO: Michael K. Deaver

AMOUNT: \$52.50

PURPOSE: Accompany the President to Texas, Georgia, New Jersey 7/25-26

| Date  | Invoice | Item  | Quantity | Amount |
|-------|---------|-------|----------|--------|
| _____ | _____   | _____ | _____    | _____  |
| _____ | _____   | _____ | _____    | _____  |
| _____ | _____   | _____ | _____    | _____  |
| _____ | _____   | _____ | _____    | _____  |

Authorized by:   
(signature of approving official)

Date sent for payment: \_\_\_\_\_

COMMENTS:

| VENDOR NUMBER |                | VENDOR NAME                  |            | CHECK DATE         | CHECK NO.  |
|---------------|----------------|------------------------------|------------|--------------------|------------|
| 2603          |                | THE HONORABLE MICHAEL DEEVER |            | 07/25/84           | 0000017579 |
| INVOICE NO.   | INVOICE AMOUNT | ADJUSTMENT                   | NET AMOUNT | EXPLANATION        |            |
| 000000008036  | 30.00          |                              | 30.00      | REIMBURSEMENT-FOOD |            |
|               |                |                              | 30.00      | ***CHECK TOTAL***  |            |

440 FIRST STREET, N.W. • SUITE 600 • WASHINGTON, D.C. 20001

THE RIGGS NATIONAL BANK  
WASHINGTON, D.C.

**REAGAN-BUSH '84**

CHECK NO. **17579**

15-3  
540

\*\*\*\*\*THIRTY AND 00/100\*\*\*\*\*

PAY TO THE ORDER OF: THE HONORABLE MICHAEL DEEVER  
THE WHITE HOUSE  
WASHINGTON, DC. 20500

| DATE     | CHECK NUMBER |
|----------|--------------|
| 07/25/84 | 0000017579   |

AMOUNT  
\$ \*\*\*\*\*30.00\*

⑈017579⑈ ⑆054000030⑆ 01⑈08484679⑈

*Caryn A. Mollay*  
AUTHORIZED SIGNATURE

# WITHDRAWAL SHEET

Ronald Reagan Library

*Collection Name*

DEAVER, MICHAEL: FILES

*Withdrawer*

KDB 8/29/2011

*File Folder*

TRAVEL - DEAVER (3)

*FOIA*

F97-0066/19

COHEN, D

*Box Number*

61

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| 3   | FORMS        | 1               | 8/3/1984 B6     |
| FRONT OF TRAVEL VOUCHER (FORM SF 1012) +<br>COPY OF CHECK |              |                 |                 |

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**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]

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

# WITHDRAWAL SHEET

Ronald Reagan Library

*Collection Name*

DEAVER, MICHAEL: FILES

*Withdrawer*

KDB 8/29/2011

*File Folder*

TRAVEL - DEAVER (3)

*FOIA*

F97-0066/19

COHEN, D

*Box Number*

61

176

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*DOC Document Type*

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*pages tions*

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4 FORM

1 7/27/1984 B6

TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY)

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**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]**

**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 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 this PAGE 1  
 information if this is a continuation OF PAGES 2  
 TRAVEL AUTHORIZATION NO. 8167  
 TRAVELER'S LAST NAME

| DATE             | TIME (Hour and am/pm) | DESCRIPTION (Departure/arrival city, per diem computation, or other explanations) | ITEMIZED SUBSISTENCE EXPENSES |           |            |           |                               |             |                               | MILEAGE RATE: NO. OF MILES (k) | 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) |  |  |  |
| 7/4              | 9:30                  | Dt Wash, D.C.   |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/4              |                       | Ar. Daytona, FL.  |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/4              | 5:20                  | Dt. Daytona Beach, FL.  |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/4              |                       | Ar. Decatur, Alabama  |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/4              |                       | Dpt. Decatur, Alabama   |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/5              |                       | Ar. Huntsville, Mich.   |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/5              | 3:50                  | Dpt. Huntsville, Michigan   |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/5              |                       | Ar. San Antonio, Texas  |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/6              | 10:55                 | Dpt. San Antonio, TX  |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| 7/6              | 3:00                  | Ar. Wash, D.C.  |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| <b>SUBTOTALS</b> |                       |   |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |
| <b>TOTALS</b>    |                       |   |                               |           |            |           |                               |             |                               |                                |                |                 |           |  |  |  |

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

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 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.

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8167

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 2, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff  
Extension: 6475 Room: WW  Other \_\_\_\_\_

2. PURPOSE(S) and DATE(S): To accompany the President, July 4, 1984 - July 6, 1984

3. ITINERARY Wash, D.C. to Daytona Beach, FL to Decatur, Alabama to Pontiac/Warren, Michigan to San Antonio, Texas and return to Wash, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: July 4, 1984 Date: July 6, 1984  
Time: approx. 9:30 AM Time: Approx. 3:10 PM  
Mode: Government Transportation Mode: Government Transportation

5. NATURE:  100% Official  100% Political Margaret Tutwiler

6. SIGNATURES:

Traveler: X Michael K. Deaver (I have read and agree to the terms set forth on the reverse side)  
X Michael K. Deaver Department Head Margaret Tutwiler 3  
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 \$ \_\_\_\_\_

103 #220 P421 11R11

| Date | Per Diem | Brkfst | Lunch | Dinner | Misc Sub | ( ) Billed Hotel | Daily Total          | Notes   |
|------|----------|--------|-------|--------|----------|------------------|----------------------|---------|
| 7/4  | 3/4      |        |       |        |          | Windsor Hilton   |                      | paid by |
| 7/5  | 1        |        |       |        |          | Reagan-Bush '84  |                      |         |
| 7/6  | 3/4      |        |       |        |          | 350.00           | San Antonio Marriott |         |

|       |                     |                         |        |              |
|-------|---------------------|-------------------------|--------|--------------|
| 2 1/2 | # days              | less hotel if billed    | 350.00 | Object Codes |
| 30.00 | rate                | grand total subsistence |        | 23 or 24     |
| 45.00 | amount              |                         |        |              |
| -     | less incid-on hotel |                         |        |              |
|       |                     |                         | 75.00  | 22           |

Other expenses

Air/rail fare

Local trans (list dates and amounts) \_\_\_\_\_

Auto Rent - excludes insurance \$ \_\_\_\_\_

Other travel (specify) \_\_\_\_\_

Phone calls - Certified as official business ( )

Other misc (specify) \_\_\_\_\_

|       |    |
|-------|----|
|       | 21 |
|       |    |
|       | 25 |
|       | 26 |
|       | 29 |
|       | 52 |
| 75.00 |    |





**SIGN FOR ROOM & TAX PRE-REGISTER**

ROOM NO. **301** LAST NAME **SCOTT** WITH **301**  
 WHITE HOUSE STAFF  
 PENNSYLVANIA AVE  
 WASHINGTON  
 D.C. 200000  
 THU 05 JUL  
 FRI 06 JUL  
 OTD  
 FILLIST  
 CF162914940 PIN

91 DATE **07/05/00**  
 S1 275.00  
 POSTIOTHR/NNI INCIDENTALS EPO---DO NOT ASK FOR CREDIT!!!!  
 POSTI/PREG/NNI PREREGISTER

| NO | DESCRIPTION | CHARGED/DEBIT         | BALANCE |
|----|-------------|-----------------------|---------|
| 1  | ROOM TAX    | 78317A07/088593904 00 | 381.50  |
| 2  | TINCH       | 20724807/088593904 00 | 381.50  |
| 3  | TINCH       | 20724807/088593904 00 | 381.50  |
| 4  | TINCH       | 20724807/088593904 00 | 381.50  |
| 5  | TINCH       | 20724807/088593904 00 | 381.50  |
| 6  | TINCH       | 20724807/088593904 00 | 381.50  |
| 7  | TINCH       | 20724807/088593904 00 | 381.50  |
| 8  | TINCH       | 20724807/088593904 00 | 381.50  |
| 9  | TINCH       | 20724807/088593904 00 | 381.50  |
| 10 | TINCH       | 20724807/088593904 00 | 381.50  |
| 11 | TINCH       | 20724807/088593904 00 | 381.50  |
| 12 | TINCH       | 20724807/088593904 00 | 381.50  |
| 13 | TINCH       | 20724807/088593904 00 | 381.50  |
| 14 | TINCH       | 20724807/088593904 00 | 381.50  |
| 15 | TINCH       | 20724807/088593904 00 | 381.50  |
| 16 | TINCH       | 20724807/088593904 00 | 381.50  |
| 17 | TINCH       | 20724807/088593904 00 | 381.50  |
| 18 | TINCH       | 20724807/088593904 00 | 381.50  |
| 19 | TINCH       | 20724807/088593904 00 | 381.50  |
| 20 | TINCH       | 20724807/088593904 00 | 381.50  |
| 21 | TINCH       | 20724807/088593904 00 | 381.50  |
| 22 | TINCH       | 20724807/088593904 00 | 381.50  |
| 23 | TINCH       | 20724807/088593904 00 | 381.50  |
| 24 | TINCH       | 20724807/088593904 00 | 381.50  |
| 25 | TINCH       | 20724807/088593904 00 | 381.50  |
| 26 | TINCH       | 20724807/088593904 00 | 381.50  |
| 27 | TINCH       | 20724807/088593904 00 | 381.50  |
| 28 | TINCH       | 20724807/088593904 00 | 381.50  |
| 29 | TINCH       | 20724807/088593904 00 | 381.50  |
| 30 | TINCH       | 20724807/088593904 00 | 381.50  |

BILLING SHOW/TIME  
 BILLING ADDRESS  
 STREET  
 CITY  
 STATE  
 ZIP  
**SIGN FOR ROOM & TAX**  
 ATTENTION

**Marriott**  
 HOTEL SERVICES  
 600 ANTONIO MONTE  
 711 E. BURNHAM  
 SAN ANTONIO, TEXAS 78205  
 (512) 284-4999

9A1D1

75.00 sleeping in  
 25.00 office

*OK*

**SIGN FOR ROOM & TAX PRE-REGISTER**

ROOM NO. **301** LAST NAME **SCOTT** WITH **301**  
 WHITE HOUSE STAFF  
 PENNSYLVANIA AVE  
 WASHINGTON  
 D.C. 200000  
 THU 05 JUL  
 FRI 06 JUL  
 OTD  
 FILLIST  
 CF162914940 PIN

91 DATE **07/05/00**  
 S1 119.00  
 POSTIOTHR/NNI INCIDENTALS EPO---DO NOT ASK FOR CREDIT!!!!  
 POSTI/PREG/NNI PREREGISTER

| NO | DESCRIPTION | CHARGED/DEBIT         | BALANCE |
|----|-------------|-----------------------|---------|
| 1  | ROOM TAX    | 7888A07/088593905 11  | 119.00  |
| 2  | TINCH       | 20724807/088593905 11 | 119.00  |
| 3  | TINCH       | 20724807/088593905 11 | 119.00  |
| 4  | TINCH       | 20724807/088593905 11 | 119.00  |
| 5  | TINCH       | 20724807/088593905 11 | 119.00  |
| 6  | TINCH       | 20724807/088593905 11 | 119.00  |
| 7  | TINCH       | 20724807/088593905 11 | 119.00  |
| 8  | TINCH       | 20724807/088593905 11 | 119.00  |
| 9  | TINCH       | 20724807/088593905 11 | 119.00  |
| 10 | TINCH       | 20724807/088593905 11 | 119.00  |
| 11 | TINCH       | 20724807/088593905 11 | 119.00  |
| 12 | TINCH       | 20724807/088593905 11 | 119.00  |
| 13 | TINCH       | 20724807/088593905 11 | 119.00  |
| 14 | TINCH       | 20724807/088593905 11 | 119.00  |
| 15 | TINCH       | 20724807/088593905 11 | 119.00  |
| 16 | TINCH       | 20724807/088593905 11 | 119.00  |
| 17 | TINCH       | 20724807/088593905 11 | 119.00  |
| 18 | TINCH       | 20724807/088593905 11 | 119.00  |
| 19 | TINCH       | 20724807/088593905 11 | 119.00  |
| 20 | TINCH       | 20724807/088593905 11 | 119.00  |
| 21 | TINCH       | 20724807/088593905 11 | 119.00  |
| 22 | TINCH       | 20724807/088593905 11 | 119.00  |
| 23 | TINCH       | 20724807/088593905 11 | 119.00  |
| 24 | TINCH       | 20724807/088593905 11 | 119.00  |
| 25 | TINCH       | 20724807/088593905 11 | 119.00  |
| 26 | TINCH       | 20724807/088593905 11 | 119.00  |
| 27 | TINCH       | 20724807/088593905 11 | 119.00  |
| 28 | TINCH       | 20724807/088593905 11 | 119.00  |
| 29 | TINCH       | 20724807/088593905 11 | 119.00  |
| 30 | TINCH       | 20724807/088593905 11 | 119.00  |

BILLING SHOW/TIME  
 BILLING ADDRESS  
 STREET  
 CITY  
 STATE  
 ZIP  
**SIGN FOR ROOM & TAX**  
 ATTENTION

**Marriott**  
 HOTEL SERVICES  
 600 ANTONIO MONTE  
 711 E. BURNHAM  
 SAN ANTONIO, TEXAS 78205  
 (512) 284-4999

*OK*

THE WHITE HOUSE  
WASHINGTON

TO: *Mr. Deaver/Gail*

*Your signed travel authorization form is attached.*

*The original is to be attached to your travel voucher when it is submitted for payment. In addition, there is a copy for you and your office respectively.*

*Olivia*

ADMINISTRATIVE OFFICE

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8153

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 18, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To attend Campaign Meetings - July 19, 1984  
with the Tuesday Team

3. ITINERARY Washington, D.C. to New York, NY and Washington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE:

Date: July 19, 1984

Time: 9:30 AM

Mode: New York Air

RETURN:

Date: July 19, 1984

Time: ~~4:30~~ 5:30 PM

Mode: New York Air

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: *Michael Deaver*

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

*Michael Deaver*  
Department Head

*Anna Brown*  
Approving Officer  
(Special Assistant to the President for Administration)

7. ESTIMATED COSTS:

No. of Days Per Diem \_\_\_\_\_

Hotel Name \_\_\_\_\_

Hotel Daily Rate \$ \_\_\_\_\_

Other \_\_\_\_\_

Registration Fee of \$ \_\_\_\_\_

Commercial Car Rental

Excess Baggage

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. RB-84

Amount \$ 130.00

0015407959201

130.00

103 #0 4M407

ORIGINAL (Return with Voucher)

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8153

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 18, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff  
Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To attend Campaign Meetings - July 19, 1984  
with the Tuesday Team

3. ITINERARY Washington, D.C. to New York, NY and Washington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE: July 19, 1984 9:30 AM New York Air  
RETURN: July 19, 1984 4:30 New York Air

5. NATURE:  100% Official  100% Political

6. SIGNATURES:  
Traveler: [Signature]  
Department Head: [Signature]  
Approving Officer: [Signature]  
(Special Assistant to the President for Administration)

7. ESTIMATED COSTS: No. of Days Per Diem \_\_\_\_\_  
Hotel Name \_\_\_\_\_  
Hotel Daily Rate \$ \_\_\_\_\_  
Other \_\_\_\_\_  
SPECIAL EXPENSES:  Registration Fee of \$ \_\_\_\_\_  
 Commercial Car Rental  
 Excess Baggage  
 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. RB-84 Amount \$ 130.00

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 8153

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request July 18, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To attend Campaign Meetings - July 19, 1984  
with the Tuesday Team

3. ITINERARY Washington, D.C. to New York, NY and Washington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: July 19, 1984

Date: July 19, 1984

Time: 9:30 AM

Time: 4:30

Mode: New York Air

Mode: New York Air

5. NATURE:  100% Official  100% Political

6. SIGNATURES:

Traveler: [Signature]

(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. KB-84

Amount \$ 130.00

# WITHDRAWAL SHEET

## Ronald Reagan Library

*Collection Name*

DEAVER, MICHAEL: FILES

*Withdrawer*

KDB 8/29/2011

*File Folder*

TRAVEL - DEAVER (3)

*FOIA*

F97-0066/19

COHEN, D

*Box Number*

61

176

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*DOC Document Type*

*NO Document Description*

*No of  
pages*

*Doc Date*

*Restric-  
tions*

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5 FORMS

1 7/6/1984 B6

FRONT OF TRAVEL VOUCHER (FORM SF 1012) +  
COPY OF CHECK

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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]

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

# WITHDRAWAL SHEET

## Ronald Reagan Library

*Collection Name*

DEAVER, MICHAEL: FILES

*Withdrawer*

KDB 8/29/2011

*File Folder*

TRAVEL - DEAVER (3)

*FOIA*

F97-0066/19

COHEN, D

*Box Number*

61

176

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| <i>DOC Document Type</i>                   | <i>No of</i> | <i>Doc Date</i> | <i>Restric-</i> |
|--|--------------|-----------------|-----------------|
| <i>NO Document Description</i>             | <i>pages</i> |                 | <i>tions</i>    |
| 6  | FORM         | 1               | 7/6/1984 B6     |
| TRAVEL VOUCHER (FORM SF 1012) (FRONT ONLY) |              |                 |                 |

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Freedom of Information Act - [5 U.S.C. 552(b)]

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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) Comm- per diem amount incurred for each meal, including tax and tips, and daily total thru (g) please only for actual expense travel

Col. (g) Show amount incurred for each meal, including tax and tips, and daily total thru (g) please only for 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. (j) 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 2 OF 1 PAGES  
 if this is a continuation sheet.

TRAVEL AUTHORIZATION NO. STPMANN  
 TRAVELER'S LAST NAME

| DATE<br>19 84 | TIME<br>(Hour and am/pm) | DESCRIPTION<br>(Departure/arrival city, per diem computation, or other explanations) | ITEMIZED SUBSISTENCE EXPENSES |           |            |           |                               |             |                               | MILEAGE RATE:<br>NO. OF MILES (k) | 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) |  |  |  |
| 4/5           | 9:45                     | Dep. Andrews AFB   |                               |           |            |           |                               |             |                               |                                   |                  |                 |           |  |  |  |
|               | 11:15                    | Ar. Newark, NJ - New York, NY  |                               |           |            |           |                               |             |                               |                                   |                  |                 |           |  |  |  |
|               | 9:20                     | Dep. Newark - New York, NY   |                               |           |            |           |                               |             |                               |                                   |                  |                 |           |  |  |  |
|               | 10:30                    | Arr. Andrews AFB   |                               |           |            |           |                               |             |                               |                                   |                  |                 |           |  |  |  |
|               |                          |  |                               |           |            |           |                               |             |                               |                                   | <b>SUBTOTALS</b> |                 |           |  |  |  |
|               |                          |  |                               |           |            |           |                               |             |                               |                                   | <b>TOTALS</b>    |                 |           |  |  |  |

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

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 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 CLAIMED**





THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 6782

TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request April 4, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: West Wing  Other \_\_\_\_\_

2. PURPOSE(S) and DATE(S): April 5, 1984 to accompany the President

3. ITINERARY Washington, D.C., New York, New York, Washington, D.C.  
(List all cities where stopover occurs.)

4. DEPARTURE:

RETURN:

Date: April 5, 1984

Date: April 5, 1984

Time: 10:00 AM

Time: 11:00 PM

Mode: Air Force One

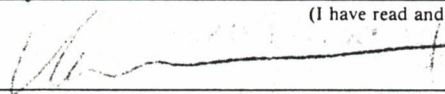
Mode: Air Force One

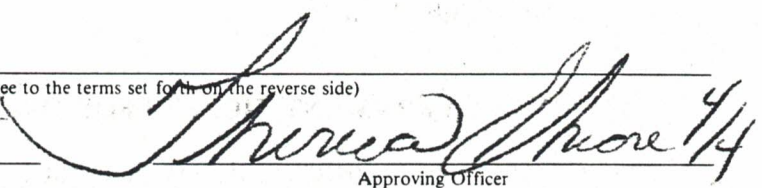
5. NATURE:  100% Official  100% Political

SIGNATURES:

Traveler: 

(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 1350 \_\_\_\_\_

Commercial Car Rental

Hotel Daily Rate \$ \_\_\_\_\_

Excess Baggage

Other 4 \_\_\_\_\_

Other \_\_\_\_\_

8. TRAVEL ADVANCE REQUESTED:  YES  No Amount: \$ \_\_\_\_\_

Signature of Recipient: \_\_\_\_\_ Date: \_\_\_\_\_

REPAID: Amount \_\_\_\_\_ Date \_\_\_\_\_ Schedule \_\_\_\_\_ Balance this trip \_\_\_\_\_

FOR TRANSPORTATION OFFICE USE ONLY:

GTR No. \_\_\_\_\_ Amount \$ \_\_\_\_\_

103 #20,50 P414

**TREASURY**  
BUREAU OF GOVERNMENT  
FINANCIAL OPERATIONS



**PAY TO THE**  
**ORDER OF MICHAEL DEEVER**  
MONTH DAY YEAR  
**06 08 84**  
**19000001**

WASHINGTON, D. C.

Check No. **11,710,644**  
SYMBOL 3005

**United States Treasury** <sup>15-51</sup>/<sub>000</sub>

|                  |           |
|------------------|-----------|
| DOLLARS          | CTS.      |
| <b>\$\$\$*10</b> | <b>51</b> |

STATE DEPT

017113



*China - Actual*

*April '84*

*(P)*

DO NOT FOLD, SPINDLE OR MUTILATE  
KNOW YOUR ENDORSER... REQUIRE IDENTIFICATION

THE WHITE HOUSE  
WASHINGTON

TO: *Mr. Deaver*

*Your signed travel authorization  
form is attached.*

*The original is to be attached  
to your travel voucher when it  
is submitted for payment. In  
addition, there is a copy for you  
and your office respectively.*

*FYI*

**ADMINISTRATIVE OFFICE**

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 6792

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request May 29, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To accompany the President, June 1 - 10, 1984

3. ITINERARY Wash, D.C., Shannon, Ireland, Dublin, Ireland, to London

(List all cities where stopover occurs.)

4. DEPARTURE: England, To Normandy, France, To London, Eng. and to Wash, D.C.  
RETURN:

Date: June 8, 1984 Date: June 10, 1984

Time: Approx. 8:40 AM Time: Approx. 2:00 PM

Mode: Gov. Trans. Mode: Gov. Trans.

5. NATURE:  100% Official  100% Political  State

6. SIGNATURES:

Traveler: *Michael K. Deaver*  
(I have read and agree to the terms set forth on the reverse side)

*Michael K. Deaver*  
Department Head

*Thomas A. ...*  
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 \$ \_\_\_\_\_

(8/13/81)

ORIGINATING OFFICE COPY

THE WHITE HOUSE OFFICE  
OFFICIAL TRAVEL AUTHORIZATION

No. 6792

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request May 29, 1984

1. TRAVELER

Name: Michael K. Deaver  White House Staff

Extension: 6475 Room: WW  Other

2. PURPOSE(S) and DATE(S): To accompany the President, June 1 - 10, 1984

3. ITINERARY Wash, D.C., Shannon, Ireland, Dublin, Ireland, to London

(List all cities where stopover occurs.)

England, To Normandy, France, To London, Eng. and to Wash, D.C.

4. DEPARTURE:

RETURN:

Date: June 01, 1984

Date: June 10, 1984

Time: Approx. 8:40 AM

Time: Approx. 2:00 PM

Mode: Gov. Trans.

Mode: Gov. Trans.

5. NATURE:  100% Official  100% Political  State

6. SIGNATURES:

Traveler: \_\_\_\_\_

(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 \$ \_\_\_\_\_