

7 September 1967

SECRET

18
SB-102-68

TRAVEL ORDER		<input checked="" type="checkbox"/> TOY	<input type="checkbox"/> BLANKET	TRAVEL ORDER NO.
		<input type="checkbox"/> PCS	<input type="checkbox"/>	SB-102-68
		<input type="checkbox"/> INVITATIONAL	<input type="checkbox"/>	
NAME MARIO E. GIORDANO (P)		GRADE GS-12/2	EMPLOYEE NO.	TRAVEL DURATION
OFFICIAL STATION WASHINGTON, DC. - Hqs.		OFFICE PHONE X-6587		BEGINNING ABOUT 18 SEP. ENDING ABOUT 24 NOV 67

YOU ARE AUTHORIZED TO TRAVEL AND INCUR NECESSARY EXPENSES IN ACCORDANCE WITH REGULATIONS. THIS TRAVEL OR CHANGE OF OFFICIAL STATION, IF SO DESIGNATED, IS MADE FOR OFFICIAL PURPOSES AND NOT FOR YOUR PERSONAL CONVENIENCE.

ITINERARY, MODE, ACCOMMODATION AND PURPOSE

FROM:-
WASHINGTON, DC. * MEXICO CITY, MEXICO - AND RETURN TO WASHINGTON, DC.

TRAVEL VIA AIR

PURPOSE: **REDEALER OPERATIONS**

PER DIEM ALLOWANCE		AUTOMOBILE ALLOWANCE	
DOMESTIC		CENTS PER MILE, NOT TO EXCEED COST BY COMMON CARRIER	
FOREIGN	<input checked="" type="checkbox"/> MAXIMUM <input type="checkbox"/> OTHER (SEE BELOW)	CENTS PER MILE, AS MORE ADVANTAGEOUS TO THE GOVERNMENT BECAUSE OF:	

ALLOWANCES AND SPECIAL PROVISIONS WITH REASONS

4/11

TOURIST COVER

DEPENDENT TRAVEL AUTHORIZED		PROCURE TRANSPORTATION BY		ADVANCE OF FUNDS AUTHORIZED	
<input type="checkbox"/> ACCOMPANY TRAVELER		<input type="checkbox"/> TRANSPORTATION REQUEST		<input checked="" type="checkbox"/> YES	ACCOUNTING DUE DATE
<input type="checkbox"/> FOLLOW WITHIN 6 MONTHS		<input type="checkbox"/> CASH OR OTHER		<input type="checkbox"/> NO	DEC. 1967
ADVANCE RETURN		DISPOSITION OF EFFECTS AUTHORIZATION		I CERTIFY FUNDS ARE AVAILABLE	
NAME	DATE OF BIRTH	RELATIONSHIP	SHIPMENT	MONTHLY TEMPORARY STORAGE	ESTIMATED COST OF TRAVEL
			<input type="checkbox"/>	<input type="checkbox"/>	\$1100.00
			SHIPMENT POA AUTHORIZED		OBLIGATION REFERENCE NO.
			<input type="checkbox"/>		SB-102-68
			EXCESS BAGGAGE AUTHORIZED		OBLIGATION LIQUIDATION CODE
			<input type="checkbox"/>		2
			FOREIGN: POUNDS AND MODE		FAM NO.
			<input type="checkbox"/>		8134-2383
			ACCOMPANIED UNACCOMPANIED		DATE AUTHORIZED SIGNATURE
			<input type="checkbox"/> 50 lbs.		7 SEPT 67 <i>[Signature]</i>
			DOMESTIC: INDICATE UNDER "SPECIAL PROVISIONS" WHETHER ACCOMPANIED OR NOT, SIZE OF EACH PIECE, AND TOTAL WEIGHT.		

COORDINATION			REQUESTING OFFICIAL		
SIGNATURE	TITLE & COMPONENT	DATE	TYPED NAME AND TITLE	COMPONENT	
<i>[Signature]</i>	WR/SS	9/11/67	CSBD/SS	DDP	
<i>[Signature]</i>	c/w/11	9/11	<i>[Signature]</i>	9/8/67	
			AUTHORIZING OFFICIAL		
			TYPED NAME AND TITLE	COMPONENT	
			DAVID E. MURPHY, CHIEF, SB	DDP	
			SIGNATURE	DATE	
			<i>[Signature]</i>		

FORM 540 2-66 USE PREVIOUS EDITIONS.

SECRET

DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCE METHOD EXEMPTION 382B NAZI WAR CRIMES DISCLOSURE ACT DATE 2006