

TRAVEL VOUCHER

NAME OF PAYEE

STATION

Washington, DC

ADDRESS

717 North St Falls Church VA

I HEREBY CLAIM REIMBURSEMENT FOR PER DIEM IN LIEU OF SUBSISTENCE, TRAVEL AND/OR OTHER EXPENSES INCURRED BY ME IN THE DISCHARGE OF OFFICIAL DUTIES FOR THE PERIOD FROM 19 TO 19 INCLUSIVE, AS PER ITEMIZED STATEMENT HEREON. THE JUSTIFICATION AND AUTHORITY FOR THIS CLAIM IS AS FOLLOWS:

AMOUNT CLAIMED

(SEE REVERSE SIDE FOR COMPLETE ITINERARY AND DETAILED ITEMIZATION OF EXPENSES)

PER DIEM @ \$

TRAVEL AND INCIDENTAL EXPENSES

OTHER

TOTAL

ADVANCE \$ 75.00

DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCE METHOD EXEMPTION 3B2B NAZI WAR CRIMES DISCLOSURE ACT DATE 2007

I CERTIFY that the expenses itemized on this voucher were necessarily incurred by me in connection with official business of a confidential nature, and that I have not been, nor will I be, reimbursed therefor from any other sources, Government or private; and that this voucher and attachments, if any, are true and correct in all respects.

DATE

SIGNATURE OF PAYEE

APPROVED:

DATE

TITLE

SIGNATURE

CERTIFICATION:

I CERTIFY that this voucher has been examined by me; that receipts or other substantiating data have been furnished me, or satisfactory explanation made for the failure to furnish same; that it appears from such data that the itemized expenditures were for necessary official purposes, reimbursement for which is allowable under existing regulations; and that such expenditures are properly chargeable to available appropriations as indicated below.

DATE

APPROPRIATION-- ALLOTMENT

AUTHORIZED CERTIFYING OFFICER