

Screened by NARA (RD-F) 07-30-2018 FOIA # none (URTS 16315) DOCID: 70105254

Non-taxable TDY

Office of the Independent Counsel - Starr

Washington, DC 20004

Travel Voucher

(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE

OIC - Starr

2. TYPE OF TRAVEL

- TEMPORARY DUTY, EXTENDED TDY, TAXABLE

3. VOUCHER NO.

98 STAR 0023

4. a. NAME (Last, first, middle initial)

Kavanaugh, Brett

FOIA(b)(6)

b. SOCIAL SECURITY NO.

5. PERIOD OF TRAVEL

a. FROM 9/21/97 b. TO 9/24/97

c. MAILING ADDRESS (Include ZIP Code)

1001 Pennsylvania Avenue, NW Suite 490 North Washington, DC 20004

d. OFFICE TELEPHONE

202-514-8688

6. TRAVEL AUTHORIZATION NUMBER AND DATES

e. PRESENT DUTY STATION

Washington, DC

f. RESIDENCE (City and State)

Chevy Chase, MD

9. CHECK NO.

7. TRAVEL ADVANCE (From Imprest Fund or Treasury Check)

Table with columns for Outstanding, Amount to be applied, Amount due Government, Balance outstanding.

8. CASH PAYMENT RECEIPT

Table with columns for DATE RECEIVED, AMOUNT RECEIVED, PAYEE'S SIGNATURE.

10. PAID BY

15

11 - 1 FOREIGN TRAVEL

- PURPOSE OF TRAVEL: OPERATIONAL, TRAINING, MEETING/CONFERENCE, RELOCATION, OTHER

12. TRANSPORTATION TICKETS

(List below and attach passenger coupon; if credit card is used, show type of credit card (circle one)).

(g) AMEX VISA MC OTHER

(h) CASH

(i) TOTAL

(j) COST CENTER/ACCT CLASS:

975R 324A

(k) DC NUMBER:

(l) CALL NUMBER:

Table with columns for MODE, CLASS OF SERVICE, ACCOMMODATIONS, DATE ISSUED, POINTS OF TRAVEL (FROM, TO), and various expense categories (TRANS. TICKETS, MILEAGE, etc.).

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me.

TRAVELER SIGN HERE

Brett Kavanaugh

DATE

9-25-97

AMOUNT CLAIMED

\$ 579.40

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government.

17. FOR FINANCE OFFICE USE ONLY COMPUTATION

Table for finance office computation with columns for DIFFERENCES, IF ANY, and amounts.

APPROVING OFFICIAL SIGN HERE

[Signature]

DATE 9-30-97

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO. b. D.O. SYMBOL c. MONTH/YEAR

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION: Certifier's Initials: \$

18. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE

[Signature]

DATE 10/1/97

c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol) d. NET TO TRAVELER \$

98 STAR 0023

Table with columns for BOC: 2120-02, 2120-03, 2120-04, 1222 = and corresponding amounts.

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

TRAVELER'S LAST NAME Kavanaugh

DATE	TIME	DESCRIPTION	SUBSISTENCE EXPENSES				MILEAGE MILES	AMOUNT CLAIMED				
			DAYS	RATE	M&IE	LODGING		TICKETS	MILEAGE	SUBSIS.	VEH RENT	OTHER
					\$ -				\$ -	\$ -		
9/21/97	4:45p	Drive to Washington National airport			\$ -		10	102.00	\$ 3.10	\$ -		
	5:30p	Depart Washington National via TWA #439			\$ -				\$ -	\$ -		
	6:44p	Arrive St. Louis			\$ -				\$ -	\$ -		
	8:08p	Depart St. Louis via TWA #207			\$ -				\$ -	\$ -		
	9:23p	Arrive Little Rock			\$ -				\$ -	\$ -		
		Pick up rental car			\$ -				\$ -	\$ -		
	OVRNGT	Courtyard (\$66 + \$6.60 = \$72.60)	0.75	\$ 30.00	\$ 22.50	\$ 72.60			\$ -	\$ 95.10		
		Per diem (3/4 day at \$30/day = \$22.50)			\$ -				\$ -	\$ -		
					\$ -				\$ -	\$ -		
9/22/97		In Little Rock on OIC business			\$ -				\$ -	\$ -		
	OVRNGT	Courtyard (\$66 + \$6.60 = \$72.60)	1.00	\$ 30.00	\$ 30.00	\$ 72.60			\$ -	\$ 102.60		
		Per diem (1 day at \$30/day = \$30)			\$ -				\$ -	\$ -		
					\$ -				\$ -	\$ -		
9/23/97		In Little Rock on OIC business			\$ -				\$ -	\$ -		
	6:30p	Return National rental car			\$ -				\$ -	\$ -		
		(2 days at \$35/day + \$5.70 gas + \$10.40 tax = \$86.10)			\$ -				\$ -	\$ -	\$ 86.10	
	7:30p	Depart Little Rock via TWA #320			\$ -				\$ -	\$ -		
	8:42p	Arrive St. Louis			\$ -				\$ -	\$ -		
		Depart St. Louis via TWA # (changed flights)			\$ -				\$ -	\$ -		
		Per diem (1 day at \$30/day = \$30)	1.00	\$ 30.00	\$ 30.00				\$ -	\$ 30.00		
					\$ -				\$ -	\$ -		
9/24/97	1:30a	Arrive Washington Dulles *			\$ -			\$ 204.00	\$ -	\$ -		
		Get ride in taxi home			\$ -				\$ -	\$ -		
		Pick up car at Washington National (\$36 parking)			\$ -				\$ -	\$ -	\$ 36.00	
		Per diem (3/4 day at \$30/day = \$22.50)	0.75	\$ 30.00	\$ 22.50				\$ -	\$ 22.50		
		* Flight was changed from National to Dulles			\$ -				\$ -	\$ -		
		Note: Hotel rate was lowest available; checked the			\$ -				\$ -	\$ -		
		Hilton, Governor's Inn & Holiday Inn West before			\$ -				\$ -	\$ -		
		using the Courtyard.			\$ -				\$ -	\$ -		
SUBTOTAL								\$ 204.00	\$ 3.10	\$ 250.20	\$ 86.10	\$ 36.00
TOTALS								\$ 204.00	\$ 3.10	\$ 250.20	\$ 86.10	\$ 36.00

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 USC 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 USC 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 performances 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 Number (SSN) is solicited under the authority of the Internal Revenue Code (26 USC 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.

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3249A	
Social Security Number: [redacted] - - - - FOIA(b)(6)		Accounting Classification: [redacted] - FOIA(b)(4)	
Requested By: W. Hickman Ewing, Jr. Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary: <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: Washington, DC VIA: VIA: VIA: VIA: To: Little Rock, Arkansas And return <input checked="" type="checkbox"/> Dep. Date: July 1, 1997 Return Date: September 30, 1997	Estimated Cost: Transportation \$ 1,500.00 Actual subsistence or per diem \$ 1,000.00 Other \$ 1,000.00 Total \$ 3,500.00 <input type="checkbox"/> ATM Advance Authorized \$	Mode of Transportation Authorized: <input checked="" type="checkbox"/> By Common Carrier <input checked="" type="checkbox"/> By Government-Furnished Auto <input checked="" type="checkbox"/> By Rental Vehicle or Special Conveyance <input type="checkbox"/> By Privately-Owned Vehicle <input type="checkbox"/> POV Determined to be Most Advantageous to Government <input type="checkbox"/> Cost Not to Exceed that of Common Carrier <input type="checkbox"/> Based on Cost of Government Furnished Auto <input type="checkbox"/> \$ _____ Mileage Rate Authorized <input type="checkbox"/> Other GSA (BOAC): 10349E	Mode of Subsistence Authorized: <input checked="" type="checkbox"/> Actual subsistence up to \$95.00/night for lodging and \$30.00/day M&IE. Actual subsistence above \$65/night for lodging requires supplemental justification on the travel voucher. <input type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed <input type="checkbox"/> Per diem of \$ _____ per day. <input type="checkbox"/> Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
- 2. Use of foreign flag carrier(s) as shown in justification statement below.
- 3. Rental of business quarters (hire of room, quarters for conference, etc.)
- 4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
- b. Training
- c. Meetings, Conferences and Speeches
- d. Relocation Travel
- e. Other Travel

Justification (if appropriate)

Authorization is granted for TDY travel to Little Rock, Arkansas, on a biweekly basis for 2-3 night stays for investigative purposes. OIC corporate apartment must be used for lodging; if unavailable, local lodging is authorized. Per diem allowance is not to exceed \$95.00 (including tax) per night for lodging and \$30.00 per day for M&IE (\$22.50 for travel days). When lodging expense exceeds \$65.00/night, supplemental justification is required on the travel voucher. One phone call home per day is allowed up to a maximum of \$5.00 during stays in Little Rock of two or more consecutive nights. GSA fleet vehicle is authorized for TDY official use; official use shall include daily travel to/from/between lodging and work sites and incidental local and personal use. Fuel reimbursement not applicable to non-business mileage. Claims resulting from accidents shall be asserted against the Government in accordance with 41 CFR 101-39-4. If GSA vehicle unavailable, rental car is authorized.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Megan Ewing Title Administrative Officer Date 7/1/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.



LITTLE ROCK (GUEST CHARGES SUMMARY)
 10900 FINANCIAL CENTER
 LITTLE ROCK, AR, 72211
 (501)227-6000

Toll Free Reservations (800) 321- 2211

THANK YOU FOR SELECTING COURTYARD BY MARRIOTT FOR YOUR TRIP. WE TRUST THAT YOUR EXPERIENCE WITH US HAS INCLUDED WARM AND GRACIOUS SERVICE, AND THE TYPE OF ACCOMMODATIONS EXPECTED.

WE LOOK FORWARD TO SERVING YOU AGAIN ON FUTURE TRIPS. FOR ADDITIONAL RESERVATIONS, CALL OUR TOLL FREE RESERVATION NUMBER, (800) 321-2211.

WE LOOK FORWARD TO YOUR NEXT VISIT.

BRETT KAVANAUGH
 1600 RESEARCH BLVD
 ROCKVILLE MD 208503172

 PLAZA 270

ROOM 143 GOVB
 ROOM TYPE DBDB 2184129
 NO. OF GUESTS 1
 RATE 66
 CLERK 66

ARRIVE 09/21/97 TIME 09:54PM DEPART 09-23-97 TIME 00:39A FOLIO # P8-62822

DATE	REFERENCE NUMBER	DESCRIPTION	CHARGES	CREDITS
09/21/97	RB143	ROOM CHARGE	66.00	
09/21/97	RT143	ROOM TAX	6.60	
09/22/97	RB143	ROOM CHARGE	66.00	
09/22/97	RT143	ROOM TAX	6.60	
09/22/97	AX143	AMERICAN EXPRESS		145.20-
***** * Your AMERICAN EXPRESS card on file * * will be charged \$ 145.20 * *****				
	**	BALANCE	**	.00

The undersigned agrees to make immediate payment upon receipt of statement. In the event such payment is not made within 30 days after receipt of the original statement, it is agreed that the hotel may impose a late payment charge at a rate of 1 1/2% per month (annual rate of 18%), or the maximum allowed by law, on the unpaid balance, and the reasonable cost of collection, including attorney's fees.

SIGNATURE _____

97 3426 6893
PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT

NOT TRANSFERABLE
ETKT

PASSENGER RECEIPT

030177 0099870 A46
XBOARDINGPASS

ISSUED BY TRANS WORLD AIRLINES XOFXXX
NAME OF ISSUING AGENT RESEARCH TRAVEL
NAME OF PASSENGER KAVANAUGH/BRETT
PNR/CARRIER CODE SXAJCY/AA
FLIGHT CLASS DATE TIME STATUS NOT VALID BEFORE NOT VALID AFTER
NOT VALID FOR THIS IS YOUR RECEIPT
TRANSPORTATION

AGENT CODE A21841293
PLACE OF ISSUE MD US19SEP97
DATE OF ISSUE 6 0011/
ISSUING AGENT ID L9Y0*46
NAME OF PASSENGER KAVANAUGH/BRETT
FROM DCA
TO LIT TW207 Y 21SEPYCADCA

FP [REDACTED] 667862 /FCWAS TW X/STL
TW LIT 87.2/YCADCA 87.27 END XFDCA3STL3

CARRIER
CARRIER FLIGHT CLASS DATE TIME
GATE SEAT SMOKE

FARE USD 87.27
TAX US 8.73
TAX XF 6.00
TOTAL USD 102.00
EQUIV. FARE PD. STOCK CONTROL NO. TX 889 CK
41059362492
ALLOW PCS WT UNCKD

CPN DOCUMENT NUMBER CK
0 015 1105567774 0

PCPS WT UNCKD BAGGAGE ID NUMBER
NOT VALID FOR TRAVEL
0 015 1105567774 0
AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS.

97 3426 6893
PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT

NOT TRANSFERABLE
ETKT

PASSENGER RECEIPT

030177 0099847 A46
XBOARDINGPASS

ISSUED BY TRANS WORLD AIRLINES XOFXXX
NAME OF ISSUING AGENT RESEARCH TRAVEL
NAME OF PASSENGER KAVANAUGH/BRETT
PNR/CARRIER CODE RGVTHZ/AA
FLIGHT CLASS DATE TIME STATUS NOT VALID BEFORE NOT VALID AFTER
NOT VALID FOR THIS IS YOUR RECEIPT
TRANSPORTATION

AGENT CODE A21841293
PLACE OF ISSUE MD US19SEP97
DATE OF ISSUE 7 0011/
ISSUING AGENT ID L9Y0*46
NAME OF PASSENGER KAVANAUGH/BRETT
FROM LIT
TO DCA TW240 Y 23SEPYCADCA

FP [REDACTED] 871869 /FCLIT TW X/STL
TW WAS 87.2/YCADCA 87.27 END XFLIT3STL3

CARRIER
CARRIER FLIGHT CLASS DATE TIME
GATE SEAT SMOKE

FARE USD 87.27
TAX US 8.73
TAX XF 6.00
TOTAL USD 102.00
EQUIV. FARE PD. STOCK CONTROL NO. TX 889 CK
41059361140
ALLOW PCS WT UNCKD

CPN DOCUMENT NUMBER CK
0 015 1105567752 6

PCPS WT UNCKD BAGGAGE ID NUMBER
NOT VALID FOR TRAVEL
0 015 1105567752 6
AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS.



FLIGHT • CLASS • ORIGIN • DEST
TWO664 Y STL IAD

SEAT 07-C
SMOKING NO

KAVANAUGH/B*ETKT
DATE ST1 08 23SEP97



FLIGHT • CLASS • ORIGIN • DEST
TWO320 Y LIT STL

SEAT 18-C
SMOKING NO

KAVANAUGH/B*ETKT
DATE 171 VM 23SEP97

**NATIONAL
CAR RENTAL**

RA: LR28141-0 VEH: 80403-LR48302
 RENTAL: 09/21/97 2136 LIT 80403-00
 RETURN: 09/23/97 1836 LIT 80403-00
 MI OUT:29571 MI IN:29609 MI DRV: 38

BRETT KAVANAUGH

FOIA(b)(6)

2 DAYS @ 0 WEEKS @ 0 HOURS @
 \$35.00 \$190.00 \$11.50
 SPEC 0 MILES @
 \$600.00 \$.00

RATE CHG	\$	70.00
* TOTAL T&M	\$	70.00
REFUEL SC	\$	5.70
NET DUE	\$	75.70
TAX RECOVERY	\$	2.00
TAX 12.000%	\$	8.40
AMT DUE	\$	86.10

*TAXABLE CHARGES

YOUR SATISFACTION IS IMPORTANT TO US

THANK YOU FOR CHOOSING NATIONAL

NAME OF PASSENGER R93803
KAVANAUGH/BRETT

FROM
ST. LOUIS
 TO
LITTLE ROCK

CARRIER/FLIGHT CLASS/DATE TIME
TW 0207 Y 21SEP97

DATE 76	BOARD TIME 22-D	SEAT NO	SMOKE NO
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ADDITIONAL SEAT INFORMATION
CONNECTION

PCS CK WT UNCK WT SEQ NO PCS CK WT UNCK WT
 BAGGAGE ID. NR.

DOCUMENT NUMBER
BBXYG3 DC1/DD

NAME OF PASSENGER R93803
KAVANAUGH/BRETT

FROM
WASH/NATIONAL
 TO
ST. LOUIS

CARRIER/FLIGHT CLASS/DATE TIME
TW 0439 Y 21SEP97

DATE 6C	BOARD TIME 24-D	SEAT NO	SMOKE NO
-------------------	---------------------------	-------------------	--------------------

ADDITIONAL SEAT INFORMATION

PCS CK WT UNCK WT SEQ NO PCS CK WT UNCK WT
 BAGGAGE ID. NR.

DOCUMENT NUMBER
BBXYG3 DC1/DD

**WASHINGTON NATIONAL
AIRPORT**

For Questions or Comments: (703)417-4300

Entrance: 17:13 09/21/97 Lane # 12

Exit: 13:11 09/24/97 Lane # 40

License plate MD WBK512

Cashier: 137 Ser. # 4573

Length of stay 0/002 19h. 58min.

Amount paid \$ 36.00 Cash

*** Thank You for Elvins ***

*** Washington National Airport ***

** Took cab from Dulles home.
 Had to pick up car from
 National Airport.*

Non-taxable TDY

Office of the Independent Counsel - Starr
Washington, DC 20004

Travel Voucher
(Read the Privacy Act Statement on the back)

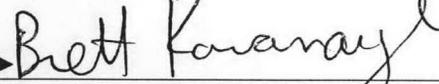
1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE OIC - Starr		2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> EXTENDED TDY <input type="checkbox"/> TAXABLE	3. VOUCHER NO. 97STAR 1605
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4. a. NAME (Last, first, middle initial) Kavanaugh, Brett	b. SOCIAL SECURITY NO. [FOIA(b)(6)]	5. PERIOD OF TRAVEL a. FROM 7/23/97 b. TO 7/25/97	
		6. TRAVEL AUTHORIZATION NUMBER AND DATES	
c. MAILING ADDRESS (Include ZIP Code) 1001 Pennsylvania Ave., NW Suite 490 North Washington, DC		d. OFFICE TELEPHONE 202-514-8688	9. CHECK NO.
e. PRESENT DUTY STATION Washington, DC	f. RESIDENCE (City and State) Chevy Chase, MD		

7. TRAVEL ADVANCE (From Imprest Fund or Treasury Check)	8. CASH PAYMENT RECEIPT	10. PAID BY 14
a. Outstanding	a. DATE RECEIVED b. AMOUNT RECEIVED \$	
b. Amount to be applied \$ -	c. PAYEE'S SIGNATURE	
c. Amount due Government (Attached: <input type="checkbox"/> Check <input type="checkbox"/> Cash)		
d. Balance outstanding \$ -	11 - 2 PURPOSE OF TRAVEL: <input type="checkbox"/> OPERATIONAL (1) <input type="checkbox"/> TRAINING (3) <input type="checkbox"/> MEETING/CONFERENCE (4) <input type="checkbox"/> RELOCATION (6) <input type="checkbox"/> OTHER (9)	
11 - 1 FOREIGN TRAVEL <input type="checkbox"/>		

12. TRANSPORTATION TICKETS (List below and attach passenger coupon; if credit card is used, show type of credit card (circle one)).	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL	
					FROM (e)	TO (f)
(g) AMEX VISA MC OTHER					Washington, DC	Little Rock, AR
(h) CASH	[FOIA(b)(4)]				Little Rock, AR	Washington, DC
(i) TOTAL					(m) TRANS. TICKETS (from reverse) (21-1)	\$ 204.00
(j) COST CENTER/ACCT CLASS: 97STAR 3249A					(n) MILEAGE (from reverse) (21-2)	\$ -
(k) DC NUMBER:					(o) SUBSISTENCE (from reverse) (21-4)	\$ 156.49
(l) CALL NUMBER:					(p) VEHICLE RENTAL (from reverse) (21-6)	\$ -
					(q) OTHER (from reverse) (21-7)	\$ 46.50

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE  DATE 7/29/97 AMOUNT CLAIMED \$ 406.99

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)	17. FOR FINANCE OFFICE USE ONLY COMPUTATION	
	DIFFERENCES IF ANY (Explain and show amount)	(21-1) \$ (21-2) \$ (21-4) \$ (21-6) \$ (21-7) \$
APPROVING OFFICIAL SIGN HERE  DATE 7/30/97		

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION			b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION: Certifier's Initials: \$
a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH/YEAR	

18. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT		c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol)	
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE  DATE 7/30/97	d. NET TO TRAVELER \$		

97STAR 1605 BOC: 2120-02 = \$ - 2120-04 = \$ 250.50 1227 =
2120-03 = \$ 156.49 1228 =

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3249A	
Social Security Number: [redacted] - - - FOIA(b)(6)		Accounting Classification: [redacted] - - FOIA(b)(4)	
Requested By: W. Hickman Ewing, Jr. Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary: <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: Washington, DC VIA: VIA: VIA: To: Little Rock, Arkansas And return <input checked="" type="checkbox"/> Dep. Date: July 1, 1997 Return Date: September 30, 1997	Estimated Cost: Transportation \$ 1,500.00 Actual subsistence or per diem \$ 1,000.00 Other \$ 1,000.00 Total \$ 3,500.00 <input type="checkbox"/> ATM Advance Authorized \$	Mode of Transportation Authorized: <input checked="" type="checkbox"/> By Common Carrier <input checked="" type="checkbox"/> By Government-Furnished Auto <input checked="" type="checkbox"/> By Rental Vehicle or Special Conveyance <input type="checkbox"/> By Privately-Owned Vehicle <input type="checkbox"/> POV Determined to be Most Advantageous to Government <input type="checkbox"/> Cost Not to Exceed that of Common Carrier <input type="checkbox"/> Based on Cost of Government Furnished Auto <input type="checkbox"/> \$ _____ Mileage Rate Authorized <input type="checkbox"/> Other GSA (BOAC): 10349E	Mode of Subsistence Authorized: <input checked="" type="checkbox"/> Actual subsistence up to \$95.00/night for lodging and \$30.00/day M&IE. Actual subsistence above \$65/night for lodging requires supplemental justification on the travel voucher. <input type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed <input type="checkbox"/> Per diem of \$ _____ per day. <input type="checkbox"/> Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
- 2. Use of foreign flag carrier(s) as shown in justification statement below.
- 3. Rental of business quarters (hire of room, quarters for conference, etc.)
- 4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
- b. Training
- c. Meetings, Conferences and Speeches
- d. Relocation Travel
- e. Other Travel

Justification (if appropriate)

Authorization is granted for TDY travel to Little Rock, Arkansas, on a biweekly basis for 2-3 night stays for investigative purposes. OIC corporate apartment must be used for lodging; if unavailable, local lodging is authorized. Per diem allowance is not to exceed \$95.00 (including tax) per night for lodging and \$30.00 per day for M&IE (\$22.50 for travel days). When lodging expense exceeds \$65.00/night, supplemental justification is required on the travel voucher. One phone call home per day is allowed up to a maximum of \$5.00 during stays in Little Rock of two or more consecutive nights. GSA fleet vehicle is authorized for TDY official use; official use shall include daily travel to/from/between lodging and work sites and incidental local and personal use. Fuel reimbursement not applicable to non-business mileage. Claims resulting from accidents shall be asserted against the Government in accordance with 41 CFR 101-39-4. If GSA vehicle unavailable, rental car is authorized.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Megan Kavanagh Title Administrative Officer Date 7/1/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.

97 3426 1412
PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT
NOT TRANSFERABLE

PASSENGER RECEIPT

030177 #098376 A46
XBOARDINGPASS

ISSUED BY DELTA AIR LINES INC
NAME OF ISSUING AGENT RESEARCH TRAVEL
NAME OF PASSENGER KAVANAUGH/BRETT
X/O FROM KAVANAUGH/BRETT
X/O TO **NOT VALID FOR** THIS IS YOUR RECEIPT
ENDORSEMENTS/RESTRICTIONS **TRANSPORTATION*

ARC FLIGHT COUPON X

TOUR CODE XXXXX
ROCKVILLE
FARE BASIS/TICKET DESIGNATOR MD US21JUL97
CLASS DATE TIME STATUS NOT VALID BEFORE NOT VALID AFTER

AGENT CODE A21841293
PLACE OF ISSUE MD US21JUL97
ISSUING AGENT ID L9Y0*46

NAME OF PASSENGER KAVANAUGH/BRETT
FROM DCA
XCVG DL347 L 23JULLDGCA
TO LIT DL253 L 23JULLGDCA

FOIA(b)(6)

FP [REDACTED] C 791546 /FCWAS DL X/ CVG
DL LIT87.27LDGDC 87.27 END XFDC3CVG3

FARE USD 87.27
TAX US 8.73
TAX XF 6.00
TOTAL USD 102.00
EQUIV. FARE PD. STOCK CONTROL NO. TX 889 CK
CPN DOCUMENT NUMBER 0 006 1388720588 6

CARRIER

CARRIER FLIGHT CLASS DATE TIME

GATE SEAT SMOKE

PCB WT UNCKD BAGGAGE ID NUMBER
NOT VALID FOR TRAVEL
0 006 1388720588 6
AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM TO ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS

97 3426 1412
PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT
NOT TRANSFERABLE

PASSENGER RECEIPT

030177 #098376 A46
XBOARDINGPASS

ISSUED BY TRANS WORLD AIRLINES
NAME OF ISSUING AGENT RESEARCH TRAVEL
NAME OF PASSENGER KAVANAUGH/BRETT
X/O FROM KAVANAUGH/BRETT
X/O TO **NOT VALID FOR** THIS IS YOUR RECEIPT
ENDORSEMENTS/RESTRICTIONS **TRANSPORTATION*

ARC FLIGHT COUPON X

TOUR CODE XXXXX
ROCKVILLE
FARE BASIS/TICKET DESIGNATOR MD US21JUL97
CLASS DATE TIME STATUS NOT VALID BEFORE NOT VALID AFTER

AGENT CODE A21841293
PLACE OF ISSUE MD US21JUL97
ISSUING AGENT ID L9Y0*46

NAME OF PASSENGER KAVANAUGH/BRETT
FROM LIT
XSTL TW116 Y 24JULYCADCA
TO DCA TW240 Y 24JULYCADCA

FP [REDACTED] C 551837 /FCLIT TW X/STL
TW WAS87.27YCADCA 87.27 END XFLIT3STL3

FARE USD 87.27
TAX US 8.73
TAX XF 6.00
TOTAL USD 102.00
EQUIV. FARE PD. STOCK CONTROL NO. TX 889 CK
CPN DOCUMENT NUMBER 0 015 1388720589 1

CARRIER

CARRIER FLIGHT CLASS DATE TIME

GATE SEAT SMOKE

PCB WT UNCKD BAGGAGE ID NUMBER
NOT VALID FOR TRAVEL
0 015 1388720589 1
AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM TO ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS

030177 #098376 A46
BOARDING PASS

NAME OF PASSENGER KAVANAUGH/BRETT
FROM X CINCINNATI
TO LITTLE ROCK

CARRIER DELTA AIR LINES I
DL 253 L 23JUL855A

GATE SEAT SMOKE
24C NO

PCS ACS BAGGAGE ID NUMBER
2 1388720588 5
AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM TO ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS

PASSENGER TICKET AND BAGGAGE CHECK
PASSENGER COUPON
BOARDING PASS 7

NAME OF PASSENGER KAVANAUGH/BRETT
FROM WAS-NATIONAL
TO CINCINNATI
DELTA

CARRIER/FLIGHT CLASS/DATE TIME
DL 347 L 23JUL 645A

GATE BOARD TIME SEAT SMOKE
26D NO

ADDITIONAL SEAT INFORMATION
PCS CK WT UNCKD NO. SEAT NO. PCS CK WT UNCKD WT

BAGGAGE ID NO.
DOCUMENT NUMBER
DLDCAE TO /AM

030177 0098376 A46
BOARDING PASS
 NAME OF PASSENGER
 KAVANAUGH/BRETT
 FROM
 X ST LOUIS INTL M
 TO
 WASHINGTON NATL
 CARRIER
 TRANS WORLD AIRLI
 CARRIER FLIGHT CLASS DATE TIME
 TW 240 Y 24JUL940P
 GATE SEAT SMOKE
 27C NO
 PCS WT UNCKD BAGGAGE ID NUMBER
 2 015 1388720589 0
 AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS.

030177 0098376 A46
BOARDING PASS
 NAME OF PASSENGER
 KAVANAUGH/BRETT
 FROM
 LITTLE ROCK
 TO
 X ST LOUIS INTL
 CARRIER
 TRANS WORLD AIRLI
 CARRIER FLIGHT CLASS DATE TIME
 TW 116 Y 24JUL730P
 GATE SEAT SMOKE
 24D NO
 PCS WT UNCKD BAGGAGE ID NUMBER
 1 015 1388720589 4
 AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS.

BEST WESTERN HOTELS
 1501 MERRILL DRIVE
 LITTLE ROCK, AR 72211
 00337010
 000012013809996

 PRE-AUTH ROOM
 107 98/09
 011367
 JUL 23, 97 18:56
 000 0100 074725
 REAUTH CODE _____
 REAUTH AMT _____
 TOTAL AMT 81.49

 BM KAVANAUGH
 Brett Kavanaugh

BEST WESTERN GOVERNORS INN SUITES
1501 Merrill Drive
Little Rock, Arkansas 72211

(501) 224-8051
RESERVATIONS HOTLINE 1-800-422-8051

07/24/97 - 08:04 am
Room: 107-000 - 130268

BRETT KAVANAUGH

date	clerk	transaction	description	db	cr
07/23	CO-DEF C	guest room	Corporate	74.00	
07/23	CO-DEF C	room tax	room 10.125%	7.49	
07/24	CO-PAT B	amex			81.49
		balance		0.00	

guest room	74.00
room tax	7.49
amex	-81.49

~~97STAR~~ Non-taxable TOY

Office of the Independent Counsel - Starr
Washington, DC 20004

Travel Voucher
(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE		2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> EXTENDED TDY <input type="checkbox"/> TAXABLE		3. VOUCHER NO. 97STAR 1525	
---------------------------------------------------------------	--	------------------------------------------------------------------------------------------------------------------------------------------------------	--	--------------------------------------	--

4. a. NAME (Last, first, middle initial) Kavanaugh, Brett		b. SOCIAL SECURITY NO. [Redacted]		5. PERIOD OF TRAVEL a. FROM 7/7/97 b. TO 7/9/97	
c. MAILING ADDRESS (Include ZIP Code) 1001 Pennsylvania Avenue, NW Suite 490 North Washington, DC		d. OFFICE TELEPHONE 202-514-8688		6. TRAVEL AUTHORIZATION NUMBER AND DATES	
e. PRESENT DUTY STATION Washington, DC		f. RESIDENCE (City and State) Chevy Chase, MD		9. CHECK NO.	

7. TRAVEL ADVANCE (From Imprest Fund or Treasury Check)		8. CASH PAYMENT RECEIPT		10. PAID BY 13	
a. Outstanding		a. DATE RECEIVED b. AMOUNT RECEIVED			
b. Amount to be applied \$ -		c. PAYEE'S SIGNATURE			
c. Amount due Government (Attached: <input type="checkbox"/> Check <input type="checkbox"/> Cash)		11 - 2 PURPOSE OF TRAVEL: <input type="checkbox"/> OPERATIONAL (1) <input type="checkbox"/> TRAINING (3)			
d. Balance outstanding \$ -		<input type="checkbox"/> MEETING/CONFERENCE (4) <input type="checkbox"/> RELOCATION (6) <input type="checkbox"/> OTHER (9)			
11 - 1 FOREIGN TRAVEL <input type="checkbox"/>					

12. TRANSPORTATION TICKETS (List below and attach passenger coupon; if credit card is used, show type of credit card (circle one)).	AGENTS VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL	
					FROM (e)	TO (f)
(g) AMEX VISA MC OTHER					Washington, DC	Little Rock, AR
(h) CASH					Little Rock, AR	Washington, DC
(i) TOTAL					(m) TRANS. TICKETS (from reverse) (21-1)	\$ 198.00
(j) COST CENTER/ACCT CLASS: 97STAR 3249A					(n) MILEAGE (from reverse) (21-2)	\$ -
(k) DC NUMBER:					(o) SUBSISTENCE (from reverse) (21-4)	\$ 226.98
(l) CALL NUMBER:					(p) VEHICLE RENTAL (from reverse) (21-6)	\$ 97.19
					(q) OTHER (from reverse) (21-7)	\$ 23.00

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE Brett M. Kavanaugh	DATE	AMOUNT CLAIMED	\$ 545.17
----------------------------------------------	------	----------------	-----------

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE **[Signature]** DATE **7/16/97**

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH/YEAR
----------------	----------------	---------------

17. FOR FINANCE OFFICE USE ONLY COMPUTATION

DIFFERENCES IF ANY	(21-1)	\$
(Explain and show amount)	(21-2)	\$
	(21-4)	\$
	(21-6)	\$
	(21-7)	\$

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION: Certifier's Initials: \$

c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol)

18. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE **[Signature]** DATE **7/17/97**

d. NET TO TRAVELER	\$
--------------------	----

BGC: 2120-02 = \$ - 2120-04 = \$ 318.19 1227 =
2120-03 = \$ 226.98 1222 =

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3249A	
Social Security Number: [redacted] - - - FOIA(b)(6)		Accounting Classification: [redacted] - - - FOIA(b)(4)	
Requested By: W. Hickman Ewing, Jr. Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary:	Estimated Cost:	Mode of Transportation Authorized:	Mode of Subsistence Authorized:
<input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations.	Transportation \$ 1,500.00	<input checked="" type="checkbox"/> By Common Carrier	<input checked="" type="checkbox"/> Actual subsistence up to \$95.00/night for lodging and \$30.00/day M&IE. Actual subsistence above \$65/night for lodging requires supplemental justification on the travel voucher.
From: Washington, DC	Actual subsistence or per diem \$ 1,000.00	<input checked="" type="checkbox"/> By Government-Furnished Auto	<input type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed
VIA:	Other \$ 1,000.00	<input checked="" type="checkbox"/> By Rental Vehicle or Special Conveyance	<input type="checkbox"/> Per diem of \$ _____ per day.
VIA:	Total \$ 3,500.00	<input type="checkbox"/> By Privately-Owned Vehicle	<input type="checkbox"/> Extended TDY (Reduced Rate)
VIA:		<input type="checkbox"/> POV Determined to be Most Advantageous to Government	
To: Little Rock, Arkansas		<input type="checkbox"/> Cost Not to Exceed that of Common Carrier	
And return <input checked="" type="checkbox"/>		<input type="checkbox"/> Based on Cost of Government Furnished Auto	
Dep. Date: July 1, 1997	<input type="checkbox"/> ATM Advance Authorized	<input type="checkbox"/> \$ _____ Mileage Rate Authorized	
Return Date: September 30, 1997	\$	<input type="checkbox"/> Other	
		GSA (BOAC): 10349E	

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
- 2. Use of foreign flag carrier(s) as shown in justification statement below.
- 3. Rental of business quarters (hire of room, quarters for conference, etc.)
- 4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
- b. Training
- c. Meetings, Conferences and Speeches
- d. Relocation Travel
- e. Other Travel

Justification (if appropriate)

Authorization is granted for TDY travel to Little Rock, Arkansas, on a biweekly basis for 2-3 night stays for investigative purposes. OIC corporate apartment must be used for lodging; if unavailable, local lodging is authorized. Per diem allowance is not to exceed \$95.00 (including tax) per night for lodging and \$30.00 per day for M&IE (\$22.50 for travel days). When lodging expense exceeds \$65.00/night, supplemental justification is required on the travel voucher. One phone call home per day is allowed up to a maximum of \$5.00 during stays in Little Rock of two or more consecutive nights. GSA fleet vehicle is authorized for TDY official use; official use shall include daily travel to/from/between lodging and work sites and incidental local and personal use. Fuel reimbursement not applicable to non-business mileage. Claims resulting from accidents shall be asserted against the Government in accordance with 41 CFR 101-39-4. If GSA vehicle unavailable, rental car is authorized.

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purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature W. Hickman Ewing, Jr. Title Administrative Officer Date 7/1/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.

RECEIPT _____
 DATE 7/7/97 AMOUNT 13.00
 RECEIVED FROM _____
 DESTINATION _____
 CAB # _____ DRIVER I.D.# [Signature]
 PASSENGER _____ THANK YOU!

VERIFY CAB NUMBER BEFORE SIGNING RECEIPT

6S08FG
 NW0979 07JUL97

25-A MEM
 SEAT NUMBER DESTINATION

SPECIAL SERVICE _____

 NORTHWEST AIRLINES

PASSENGER'S NAME
 KAVANAUGH/BRETT

PASSENGER TICKET AND BAGGAGE CHECK
 PASSENGER COUPON
BOARDING PASS 7

NAME OF PASSENGER
 KAVANAUGH/BRETT

FROM
 LITTLE ROCK
 TO
 ATLANTA
 DELTA

CARRIER/FLIGHT CLASS/DATE TIME
 DL 254 109 JUL 520P

GATE BOARD TIME SEAT SMOKE
 10C NO

ADDITIONAL SEAT INFORMATION
 PCS CK.WT. UNCK.WT. SEQ.NO. PCS CK.WT. UNCK.WT.

BAGGAGE ID. NR.

DOCUMENT NUMBER

 DLLITFTO /MA

PASSENGER TICKET AND BAGGAGE CHECK
 PASSENGER COUPON
REBOARDING PASS 7

NAME OF PASSENGER
 KAVANAUGH/BRETT

FROM
 ATLANTA
 TO
 WAS-NATIONAL
 DELTA

CARRIER/FLIGHT CLASS/DATE TIME
 DL 254 109 JUL 915P

GATE BOARD TIME SEAT SMOKE
 13C NO

ADDITIONAL SEAT INFORMATION
 PCS CK.WT. UNCK.WT. SEQ.NO. PCS CK.WT. UNCK.WT.

BAGGAGE ID. NR.

DOCUMENT NUMBER

 DLATLFTO /3N

6S08FG
 NW0461 07JUL97

16-A*EXIT LIT
 SEAT NUMBER DESTINATION

CONNECTION

SPECIAL SERVICE _____

 NORTHWEST AIRLINES

PASSENGER'S NAME
 KAVANAUGH/BRETT

TAXICAB RECEIPT

Date: _____

Origin of trip: _____

Destination: _____

Fare: 10.50 Sign: [Signature]

DOCUMENT IS HEAT SENSITIVE - Do not expose to prolonged periods of excessive heat or light

ISSUED BY NORTHWEST AIRLINES
NAME OF ISSUING AGENT RESEARCH TRAVEL
NAME OF PASSENGER KAVANAUGH/BRETT
XO FROM **NOT VALID FOR**
XO TO **TRANSPORTATION**
ENDORSEMENTS/RESTRICTIONS

FLIGHT COUPON XXXX
TOUR CODE XXXXX
AGENT CODE A21841293
PLACE OF ISSUE MD
DATE OF ISSUE 02JUL97
FARE BASIS/TICKET DESIGNATOR KDG DCA
ISSUING AGENT ID L9YØ*46
C 938466 /FCWAS NW X/MEM
NW LIT87.27KDG DCA 87.27 END XF DCA3

03Ø177 0Ø98Ø1Ø A46
XBOARDINGPASS
NAME OF PASSENGER KAVANAUGH/BRETT
FROM DCA
XMEM NW979 K Ø7JULKØG DCA
LIT NW461 K Ø7JULKØG DCA
CARRIER
CARRIER FLIGHT CLASS DATE
GATE SEAT SMOKE
PCB WT UNCKD BAGGAGE ID NUMBER
NOT VALID FOR TRAVEL
Ø Ø12 1384933182 2
AA21841293

DOCUMENT IS HEAT SENSITIVE - Do not expose to prolonged periods of excessive heat or light

ISSUED BY DELTA AIR LINES INC /
NAME OF ISSUING AGENT RESEARCH TRAVEL
NAME OF PASSENGER KAVANAUGH/BRETT
XO FROM **NOT VALID FOR**
XO TO **TRANSPORTATION**
ENDORSEMENTS/RESTRICTIONS

FLIGHT COUPON XXXX
TOUR CODE XXXXX
AGENT CODE A21841293
PLACE OF ISSUE MD
DATE OF ISSUE 02JUL97
FARE BASIS/TICKET DESIGNATOR LDG DCA
ISSUING AGENT ID L9YØ*46
C 546921 /FCLIT DL WAS87
.27LDG DCA 87.27 END XFLIT3

03Ø177 0Ø98Ø1Ø A46
XBOARDINGPASS
NAME OF PASSENGER KAVANAUGH/BRETT
FROM LIT
DCA DL254 L Ø9JULLØG DCA
CARRIER
CARRIER FLIGHT CLASS DATE
GATE SEAT SMOKE
PCB WT UNCKD BAGGAGE ID NUMBER
NOT VALID FOR TRAVEL
Ø ØØ6 1384933183 Ø
AA21841293

ADVICE TO INTERNATIONAL PASSENGERS ON LIMITATION OF LIABILITY

Passengers on a journey involving an ultimate destination or a stop in a country other than the country of origin are advised that the provisions of a treaty known as the Warsaw Convention may be applicable to the entire journey, including any portion entirely within the country of origin or destination. For such passengers on a journey to, from, or with an agreed stopping place in the United States of America, the Convention and special contracts of carriage embodied in applicable tariffs provide that the liability of certain carriers, parties to such special contracts, for death or personal injury to passengers is limited in most cases to proven damages not to exceed U.S. \$75,000 per passenger, and that this liability up to such limit shall not depend on negligence on the part of the carrier. The limit of liability of U.S. \$75,000 above is inclusive of legal fees and costs except that in case of a claim brought in a state where provision is made for separate award of legal fees and costs, the

limit shall be the sum of U.S. \$58,000 exclusive of legal fees and costs. For such passengers traveling by a carrier not a party to such special contracts or on a journey not to, from, or having an agreed stopping place in the United States of America, liability of the carrier for death or personal injury to passengers is limited in most cases to approximately U.S. \$10,000 or U.S. \$20,000.

The names of carriers, parties to such special contracts, are available at all ticket offices of such carriers and may be examined on request. Additional protection can usually be obtained by purchasing insurance from a private company. Such insurance is not affected by any limitation of the carrier's liability under the Warsaw Convention or such special contracts of carriage. For further information please consult your airline or insurance company representative.

NOTICE OF BAGGAGE LIABILITY LIMITATIONS

Liability for loss, delay, or damage to baggage is limited unless a higher value is declared in advance and additional charges are paid. For most international travel (including domestic portions of international journeys) the liability limit is approximately \$9.07 per pound for checked baggage and \$400 per passenger for unchecked baggage. For travel wholly between U.S. points federal rules

require any limit on an airline's baggage liability to be at least \$1250 per passenger. Excess valuation may be declared on certain types of articles. Some carriers assume no liability for fragile, valuable or perishable articles. Further information may be obtained from the carrier.

CARRIER RESERVES THE RIGHT TO REFUSE CARRIAGE TO ANY PERSON WHO HAS ACQUIRED A TICKET IN VIOLATION OF APPLICABLE LAW OR CARRIER'S TARIFFS, RULES OR REGULATIONS SUBJECT TO TARIFF REGULATIONS

STAPLE HERE

REV. 1-84 GENERAL CREDIT FORMS ST. LOUIS 63045 (Ø7) 12Ø3 ATB 5986

IT IS THE POLICY OF REISSUE TO REISSUE THIS TICKET FROM ANY ENTITY OTHER THAN THE ISSUING AGENT OR THE AUTHORIZED AGENT.

IT IS THE POLICY OF REISSUE TO REISSUE THIS TICKET FROM ANY ENTITY OTHER THAN THE ISSUING AGENT OR THE AUTHORIZED AGENT.

RESEARCH TRAVEL

1600 Research Blvd.
Rockville, MD. 20850

(301) 251-0370
(800) 446-4200
FAX (301) 294-6208

This itinerary is based on schedules and fares in effect the day the ticket is issued. Reconfirm all flights with the appropriate carrier 21 hours prior to domestic and 72 hours prior to international flight. Failure to use any continuing reservations can result in automatic cancellation.
IMPORTANT: Unused tickets may have value. Please return for possible credit or refund.

SALES PERSON#: 46
CUSTOMER NBR: 030177

ITINERARY/INVOICE NO. 0098010
RCWQLO

DATE: 02 JUL 97
PAGE: 01

TO: OFFICE OF THE INDEPENDENT COUNSEL
1001 PENNSYLVANIA AVE. NW
SUITE 490-NORTH
WASHINGTON, D.C. 20004

FOR: KAVANAUGH/BRETT

07 JUL 97 - MONDAY

OTHER WASHINGTON NATL

NO ADVANCE SEATING FOR THESE FLIGHTS

AIR NORTHWEST AIRLINES FLT:979 ECONOMY DINNER
LV WASHINGTON NATL 555P EQP: AIRBUS A320
DEPART: MAIN TERMINAL
AR MEMPHIS 707P NON-STOP

AIR NORTHWEST AIRLINES FLT:461 ECONOMY
LV MEMPHIS 800P EQP: DC-9 STRETCH
AR LITTLE ROCK 847P NON-STOP

CAR LITTLE ROCK NATIONAL CAR RENTAL CORP ID-5000300
PICK UP-2120 1-INTER CAR AUTO A/C
RETURN-09JUL/1340

RATE IS GUARANTEED
DAILY RATE-USD40.00 UNLIMITED MILEAGE
CONFIRMATION NUMBER 1396885020COUNT

HOTEL LITTLE ROCK OUT-09JUL
HOLIDAY INN 2 NIGHTS
HI SELECT LITTLE ROCK WEST 1 ROOM 1 KING LEISURE NON SMKG
201 S SHACKLEFORD RATE-69.00USD PER NIGHT
LITTLE ROCK AR 72211 CANCEL BY 06P DAY OF ARRIVAL
FONE 501-223-3000
FAX 501-223-2833
GUARANTEED LATE ARRIVAL
CONFIRMATION 64158595

09 JUL 97 - WEDNESDAY

AIR DELTA AIR LINES INC FLT:254 COACH
LV LITTLE ROCK 520P EQP: MD-80
AR WASHINGTON NATL 1051P 1-STOP
ARRIVE: INTERIM TERMINAL

AIR TICKET	NW1384933182	KAVANAUGH BRETT	
		BILLED TO	[REDACTED] 99.00
AIR TICKET	DL1384933183	KAVANAUGH BRETT	
		BILLED TO	[REDACTED] 99.00

FOIA(b)(6)

CONTINUED ON PAGE 2

RESEARCH TRAVEL

1600 Research Blvd.
Rockville, MD. 20850

(301) 251-0370
(800) 446-4200
FAX (301) 294-6208

This itinerary is based on schedules and fares in effect the day the ticket is issued. Reconfirm all flights with the appropriate carrier 2 hours prior to domestic and 72 hours prior to international flight. Failure to use any continuing reservations can result in automatic cancellation.
IMPORTANT: Unused tickets may have value. Please return for possible credit or refund.

SALES PERSON: 46 ITINERARY/INVOICE NO. 0098010 DATE: 02 JUL 97
CUSTOMER NBR: 030177 RCWQLO PAGE: 02

TO: OFFICE OF THE INDEPENDENT DELIVER
 COUNSEL
 1001 PENNSYLVANIA AVE. NW
 SUITE 490-NORTH
 WASHINGTON, D.C. 20004

FOR: KAVANAUGH/BRETT

09 JUL 97 - WEDNESDAY

SUB TOTAL	198.00
NET CC BILLING	198.00
TOTAL AMOUNT DUE	0.00

RESEARCH TRAVEL 800-446-4200
AFTER HOURS 800-237-7980, USE CODE SL9Y0

AG-46

202-514-8802



No problem!

LITTLE ROCK LICENSE
RENTAL: 7707797 3351
RETURN: 7707797 1708 LITTLE ROCK 6040 800
U S GOVERNMENT - OFF 3000300

RETURN BY 12/20/93

ONE BOARD VAN CR1127
LIC IN 290100
FILES IN 5016 OUT 20075 DRIVER JG
FRONT KAVANAGH

FOIA(b)(6)

80.00
5.59
2.00
9.60
97.19

TEMP. CHARGES	
RATE ONE	80.00
TOTAL TAX	80.00
RETAIL TAX	3.09
NET DUE	83.09
TAX RECOVERY	2.00
TAX 2.0000	7.80
NET DUE	97.19

RATE CLASS RATE CLASS # AIR RENTAL DAYS 1
\$10.00/BL \$240.00/HR 113.20/HR \$800.00/HR

* 21440000L NY 00000L 00 00134711

09/98 AUTO: 0002117 + 91 1/0577

YOUR SATISFACTION IS IMPORTANT TO ALL OF US AT NATIONAL.
THANK YOU FOR CHOOSING NATIONAL.

COPY ONE
* TAXABLE CHARGES

Holiday Inn
SELECT
 201 South Shackleford
 Little Rock, Ar. 72211 501-223-3000

Name & Address

BRETT KAVANAUGH

Room 450-11
 Arrive Date 07/07/97
 Dept. Code 07/09/97
 Folio # 0
 Room Rate 69.00
 Account 2-CAMEX
 Mkt/Seg 4-GRT

FOIA(b)(6)

I authorize you to bill the full balance of my account to my credit card which was presented upon registration.

EXPRESS CHECK - OUT

The Management is not responsible for any valuables not secured in safety deposit boxes provided at the front office. I agree that my liability for the charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of such charges.

X
 SIGNATURE

DATE	CODE	REFERENCE	ID	DESCRIPTION	CHARGE	PAYMENT	BALANCE	
0707	114	0707000	6WW	DISCOUNT ROOM	69.00\$	.00\$	69.00\$
0707	812	0707001	6WW	OCCUPANCY TAX	6.99\$	.00\$	75.99\$
0708	215	69	ZZI	FLAVORS	9.60\$	.00\$	85.59\$
0708	114	0708000	6WW	DISCOUNT ROOM	69.00\$	.00\$	154.59\$
0708	812	0708001	6WW	OCCUPANCY TAX	6.99\$	.00\$	161.58\$
0709	914	0709000	FRR	AMER EXPRESS	.00\$	-161.58\$	.00\$
TOTAL								.00\$

DO NOT WRITE

10/96 THRU 09/98
 BRETT H KAVANAUGH
 A0USC-01C-HGSL

67032350019
 1030501308
 HOLIDAY INN S.L.T.,
 LITTLE ROCK AR

EXPIRATION
 DATE
 CHECKED

ABOVE THIS LINE
 DATE 7/2/97

070797 5096248

CARDHOLDER SIGN HERE
 X GCDF

AUTHORIZATION DATE	APPROVAL CODE	AMOUNT
7/7	4 824	161.58

PURCHASES & SERVICES
 TAXES
 TIPS-MISC.
 TOTAL 161.58

ANY CHARGES THAT DID NOT APPEAR ON YOUR BILL AT CHECKOUT TIME WILL BE ADDED IN THE SHADED AREA ABOVE.

PRESS HARD!

MERCHANT COPY

ACC AX

CARD MEMBER'S NAME
 KAVANAUGH/BH

ESTABLISHMENT NO. & LOCATION
 Holiday Inn West
 201 South Shackleford
 Little Rock, Ar 72211

CARD MEMBER'S SIGNATURE

Holiday Inn
SELECT

	.00\$	FRR
	.00\$	
	.00\$	
PURCHASES & SERVICES	161.58\$	
TOTAL AMOUNT		

Non-taxable TDY

Office of the Independent Counsel - Starr
Washington, DC 20004

Travel Voucher
(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE OIC - Starr		2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> EXTENDED TDY <input type="checkbox"/> TAXABLE	3. VOUCHER NO. 97STAR 1466
----------------------------------------------------------------------------------	--	------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------

4. a. NAME (Last, first, middle initial) Kavanaugh, Brett c. MAILING ADDRESS (Include ZIP Code) 1001 Pennsylvania Avenue Suite 490 North Washington, DC 20004	FOIA(b)(6) - -	b. SOCIAL SECURITY NO.	5. PERIOD OF TRAVEL a. FROM 6/23/97 b. TO 6/25/97
	e. PRESENT DUTY STATION Washington, DC	f. RESIDENCE (City and State) Chevy Chase, MD	6. TRAVEL AUTHORIZATION NUMBER AND DATES

7. TRAVEL ADVANCE (From Imprest Fund or Treasury Check)	8. CASH PAYMENT RECEIPT	10. PAID BY
a. Outstanding	a. DATE RECEIVED b. AMOUNT RECEIVED \$	
b. Amount to be applied \$ -	c. PAYEE'S SIGNATURE	
c. Amount due Government (Attached: <input type="checkbox"/> Check <input type="checkbox"/> Cash)		

d. Balance outstanding \$ -

11 - 2 PURPOSE OF TRAVEL: OPERATIONAL (1) TRAINING (3)
 MEETING/CONFERENCE (4) RELOCATION (6) OTHER (9)

12. TRANSPORTATION TICKETS (List below and attach passenger coupon; if credit card is used, show type of credit card (circle one)).	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL	
					FROM (e)	TO (f)
(g) AMEX VISA MC OTHER		Delta		6/23/97	Washington, DC	Little Rock, AR
		TWA		6/24/97	Little Rock, AR	Washington, DC
(h) CASH						
(i) TOTAL						

(j) COST CENTER/ACCT CLASS: 97 B02 3324	(m) TRANS. TICKETS (from reverse) (21-1)	\$ 204.00
	(n) MILEAGE (from reverse) (21-2)	\$ -
	(o) SUBSISTENCE (from reverse) (21-4)	\$ 161.90
(k) DC NUMBER:	(p) VEHICLE RENTAL (from reverse) (21-6)	\$ 97.19
(l) CALL NUMBER:	(q) OTHER (from reverse) (21-7)	\$ 56.00

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE 	DATE 7/1/97	AMOUNT CLAIMED	\$ 519.09
--------------------------------------------------------------------------------------------------------	-------------	----------------	-----------

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

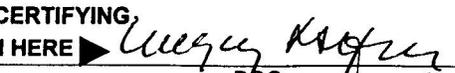
14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE 

DATE 7/2/97

17. FOR FINANCE OFFICE USE ONLY COMPUTATION		
DIFFERENCES IF ANY	(21-1)	\$
	(21-2)	\$
	(21-4)	\$
(Explain and show amount)	(21-6)	\$
	(21-7)	\$

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION			b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION: Certifier's Initials: \$	
a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH/YEAR		

18. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT		c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol)	
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE 		d. NET TO TRAVELER \$	

97STAR 1466 BOC: 2120-02 = \$ - 2120-04 = \$ 357.19 1227 = \$ 1228 = \$

EXCEPTION TO SF 1012 FOIA # none (URTS 16315) DocId: 70105254 Page 23

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

TRAVELER'S LAST NAME Kavanaugh

DATE	TIME	DESCRIPTION	SUBSISTENCE EXPENSES				MILEAGE MILES	AMOUNT CLAIMED				
			DAYS	RATE	M&IE	LODGING		TICKETS	MILEAGE	SUBSIS.	VEH RENT	OTHER
6/23/97	5:45a	Drive to National Airport			\$ -			\$ -	\$ -			
	6:45a	Leave National Airport via Delta #347			\$ -			\$ -	\$ -			
	8:20a	Arrive in Cincinnati			\$ -			\$ -	\$ -			
	8:55a	Leave Cincinnati via Delta # 253			\$ -			\$ -	\$ -			
	9:25a	Arrive Little Rock			\$ -			\$102.00	\$ -	\$ -		
		Pick up National Rental car (\$40/day + \$1 recovery tax/day + \$4.80 tax/day = \$45.80)			\$ -			\$ -	\$ -			
		2 days rental car at 45.80/day + \$5.59 gas = \$97.19)			\$ -			\$ -	\$ -	\$97.19		
					\$ -			\$ -	\$ -			
	OVRNGT	Holiday Inn (\$79.00/night + \$7.90 tax = \$86.90)			\$ -	\$86.90		\$ -	\$ 86.90			
					\$ -			\$ -	\$ -			
		Per diem (3/4 day at \$30.00 = \$22.50)	0.75	\$30.00	\$ 22.50			\$ -	\$ 22.50			
					\$ -			\$ -	\$ -			
6/24/97	12:01a-				\$ -			\$ -	\$ -			
	7:15p	In Little Rock on OIC business			\$ -			\$ -	\$ -			
	6:30p	Turn in National Rental car			\$ -			\$ -	\$ -			
	7:15p	Depart Little Rock via TWA #54			\$ -			\$ -	\$ -			
	8:27p	Arrive St. Louis International Airport			\$ -			\$ -	\$ -			
	9:15p	Depart St. Louis International Airport via TWA #240			\$ -			\$ -	\$ -			
					\$ -			\$ -	\$ -			
		Per diem (1 day at \$30.00 = \$30.00)	1.00	\$30.00	\$ 30.00			\$ -	\$ 30.00			
					\$ -			\$ -	\$ -			
6/25/97	12:11a	Arrive Washington National Airport			\$ -			\$102.00	\$ -	\$ -		
	1:00a	Arrive home via personal car (\$56 total for parking)			\$ -			\$ -	\$ -	\$56.00		
					\$ -			\$ -	\$ -			
		Per diem (3/4 day at \$30.00 = \$22.50)	0.75	\$30.00	\$ 22.50			\$ -	\$ 22.50			
					\$ -			\$ -	\$ -			
		Note: The return flight was changed during travel.			\$ -			\$ -	\$ -			
		Original ticket returned for refund.			\$ -			\$ -	\$ -			
SUBTOTAL								\$ 204.00	\$ -	\$ 161.90	\$ 97.19	\$ 56.00
TOTALS								\$ 204.00	\$ -	\$ 161.90	\$ 97.19	\$ 56.00

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 USC 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 USC 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 performances 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 Number (SSN) is solicited under the authority of the Internal Revenue Code (26 USC 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.

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3324	
Social Security Number: [] - - - FOIA(b)(6)		Accounting Classification: [] FOIA(b)(4)	
Requested By: W. Hickman Ewing, Jr. Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary: <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: Washington, DC VIA: VIA: VIA: To: Little Rock, Arkansas And return <input checked="" type="checkbox"/> Dep. Date: June 23, 1997 Return Date: June 25, 1997	Estimated Cost: Transportation \$ 250.00 Actual subsistence or per diem \$ 200.00 Other \$ 150.00 Total \$ 600.00 <input type="checkbox"/> ATM Advance Authorized \$	Mode of Transportation Authorized: <input checked="" type="checkbox"/> By Common Carrier <input checked="" type="checkbox"/> By Government-Furnished Auto <input checked="" type="checkbox"/> By Rental Vehicle or Special Conveyance <input type="checkbox"/> By Privately-Owned Vehicle <input type="checkbox"/> POV Determined to be Most Advantageous to Government <input type="checkbox"/> Cost Not to Exceed that of Common Carrier <input type="checkbox"/> Based on Cost of Government Furnished Auto <input type="checkbox"/> \$ _____ Mileage Rate Authorized <input type="checkbox"/> Other GSA (BOAC): 10349E	Mode of Subsistence Authorized: <input type="checkbox"/> Actual subsistence up to \$ _____ per day. Actual subsistence requires approval by appropriate authorizing official. <input checked="" type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed \$87.00/night for lodging and \$30.00 per day for M&IE <input type="checkbox"/> Per diem of \$ _____ per day. <input type="checkbox"/> Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
- 2. Use of foreign flag carrier(s) as shown in justification statement below.
- 3. Rental of business quarters (hire of room, quarters for conference, etc.)
- 4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
- b. Training
- c. Meetings, Conferences and Speeches
- d. Relocation Travel
- e. Other Travel

Justification (if appropriate)

Authorization is granted for TDY travel to Little Rock, Arkansas, on a biweekly basis for 2-3 night stays for investigative purposes. OIC corporate apartment must be used for lodging; if unavailable, local lodging is authorized. Per diem allowance is \$87.00 (including tax) per night for lodging and \$30.00 per day for M&IE (\$22.50 for travel days). One phone call home per day is allowed up to a maximum of \$5.00 during stays in Little Rock of two or more consecutive nights. GSA fleet vehicle is authorized for TDY official use; official use shall include daily travel to/from/between lodging and work sites and incidental local and personal use. Fuel reimbursement not applicable to non-business mileage. Claims resulting from accidents shall be asserted against the Government in accordance with 41 CFR 101-39-4. If GSA vehicle unavailable, rental car is authorized.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature [Signature] Title Administrative Officer Date 7/8/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations. A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.

Holiday Inn SELECT

201 South Shackleford
Little Rock, Ar. 72211 501-223-3000

Name & Address

PRETT KAVANAGH
[Redacted Address Box]

Room _____
Arrive Date _____
Dept. Date _____
Folio # _____
Room Rate _____
Account _____
Mkt/Seg _____

I authorize you to bill the full balance of my account to my credit card which was presented upon registration.
EXPRESS CHECK - OUT
SIGNATURE _____

The management is not responsible for any valuables not secured in safety deposit boxes provided at the front office. I agree that my liability for the charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of such charges.
 SIGNATURE _____

DATE	CODE	REFERENCE	ID	DESCRIPTION	CHARGE	PAYMENT	BALANCE
------	------	-----------	----	-------------	--------	---------	---------

10/15	011	0625000	000	SUET ROOM	100.00		100.00
10/15	012	0625001	000	SECURITY TAX	10.00		110.00
10/15	014	0625000	000	AMER EXPRESS	10.00		120.00

FOIA(b)(6)



TERMS DUE UPON RECEIPT

A Service Charge will be charged each month to all balances over 30 days which shall be equal to 1/12 of the annual percent allowed by law.

ACCT. NO. _____

CARD MEMBER NAME
PRETT KAVANAGH

ESTABLISHMENT NO. & LOCATION ESTABLISHMENT AGREES TO TRANSMIT TO CARD ISSUER FOR PAYMENT
Holiday Inn West
201 South Shackleford
Little Rock, Ar. 72211

CARD MEMBER'S SIGNATURE

DATE OF CHARGE 10/15/07	FOLIO NO./CHECK NO. 10000000
AUTHORIZATION	ID
PURCHASES & SERVICES	
TOTAL AMOUNT	120.00

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND

NATIONAL CAR RENTAL

RA: LR18686-2 VEH: 80403-LR61355
 RENTAL: 06/23/97 0934 LIT 80403-00
 RETURN: 06/24/97 1845 LIT 80403-00
 MI OUT: 26459 MI IN: 26491 MI DRV: 32

BRETT KAVANAUGH

2 DAYS @ 0 WEEKS @ 0 HOURS @
 \$40.00 \$240.00 \$13.25
 SPEC 0 MILES @
 \$800.00 \$.00

RATE CHG \$ 80.00
 * TOTAL T&M \$ 80.00
 REFUEL SC \$ 5.59
 NET DUE \$ 85.59
 TAX RECOVERY \$ 2.00
 TAX 12.000% \$ 9.60
 AMT DUE \$ 97.19

*TAXABLE CHARGES

YOUR SATISFACTION IS IMPORTANT TO US

THANK YOU FOR CHOOSING NATIONAL

PASSENGER TICKET AND BAGGAGE CHECK
 PASSENGER COUPON
BOARDING PASS 7

NAME OF PASSENGER
KAVANAUGH/BRETT

FROM
CINCINNATI
 TO
LITTLE ROCK

DELTA 

CARRIER/FLIGHT **DL 253** CLASS/DATE/TIME **L23JUN 855A**

GATE BOARD TIME SEAT SMOKE
18D NO

ADDITIONAL SEAT INFORMATION
 PCS CK WT UNCK WT SEQ NO PCS CK WT UNCK WT

BAGGAGE ID NR

DOCUMENT NUMBER
1LCVGFT0 /TD

PASSENGER TICKET AND BAGGAGE CHECK
 PASSENGER COUPON
BOARDING PASS 7

NAME OF PASSENGER
KAVANAUGH/BRETT

FROM
WAS-NATIONAL
 TO
CINCINNATI

DELTA 

CARRIER/FLIGHT **DL 347** CLASS/DATE/TIME **L23JUN 645A**

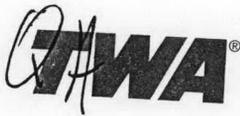
GATE BOARD TIME SEAT SMOKE
42D NO

ADDITIONAL SEAT INFORMATION
 PCS CK WT UNCK WT SEQ NO PCS CK WT UNCK WT

BAGGAGE ID NR

DOCUMENT NUMBER
1LDCHE19 /TD

FOIA(b)(6)



FLIGHT • CLASS • ORIGIN • DEST
TW0054 Y LIT STL

SEAT SMOKING
21-C EXIT NO

KAVANAUGH/BRETT
 DATE
LT1 ZL 24JUN97

10/96 THRU 09/98
 BRETT M KAVANAUGH
 AOUSC-01C-MGSL

67032350019
 1030501308

HOLIDAY INN SLT, 062397 5395964
 LITTLE ROCK AR

EXPIRATION DATE
 DATE CHECKED

DATE	CLERK
6/23	JL
ROOM / FOLIO NO.	
CHECK IN DATE	458
CHECK OUT DATE	



CARDHOLDER SIGN HERE

Brett Kavanaugh

AUTHORIZATION DATE	APPROVAL CODE	AMOUNT
6/23	4548	100.00

PURCHASES & SERVICES	TYPE OF DELAYED CHG.
TAXES	AMT. OF DELAYED CHG.
TIPS-MISC.	
TOTAL	REVISED TOTAL
86.70	

ANY CHARGES THAT DID NOT APPEAR ON YOUR BILL AT CHECKOUT TIME WILL BE ADDED IN THE SHADED AREA ABOVE

PRESS HARD!

CUSTOMER COPY - RETAIN FOR YOUR RECORDS

07 3426 4126
PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT
NOT TRANSFERABLE

PASSENGER RECEIPT

030177 0097670 A46
BOARDING PASS

ISSUED BY **ARC** FLIGHT COUPON **X**
NAME OF ISSUING AGENT **DELTA AIR LINES INC** TOUR CODE **XXXXX**
NAME OF PASSENGER **RESEARCH TRAVEL** PLACE OF ISSUE **MD** AGENT CODE **A21841293** DATE OF ISSUE **18 JUN 97**
NAME OF PASSENGER **KAVANAUGH/BRETT** FROM **ROCKVILLE** FROM **DCA**
X/O FROM **KAVANAUGH/BRETT** CARRIER **DL** FLIGHT **347** CLASS **L** DATE **23 JUN 97** STATUS **OK** NOT VALID BEFORE **7 0011** NOT VALID AFTER **7 0011**
X/O TO ****NOT VALID FOR** THIS IS YOUR RECEIPT**
ENDORSEMENTS/RESTRICTIONS ****TRANSPORTATION*** ISSUING AGENT ID **L9Y0*46**

NAME OF PASSENGER
KAVANAUGH/BRETT
FROM **DCA**
XCVG DL347 L 23JUNLDGCA
TO **LIT DL253 L 23JUNLDGCA**

FP **[REDACTED]** C **643743 /FCWAS DL X/CVG**
DL **LIT87.27LDGCA 87.27 END XFDCA3CVG3**

FARE **USD 87.27** EQUIV. FARE PD. ********* ALLOW PCS WT UNCKD
TAX **US 8.73** STOCK CONTROL NO. TX 889 CK **CPN** DOCUMENT NUMBER **CK**
TAX **XF 6.00** **25525400364** **0 006 1384932788 4**
TOTAL **USD 102.00**

CARRIER *****
CARRIER FLIGHT CLASS DATE TIME *****

GATE SEAT SMOKE *****

PCS WT UNCKD BAGGAGE ID NUMBER *****
NOT VALID FOR TRAVEL
0 006 1384932788 4
AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENT

FOIA(b)(6)

RESEARCH TRAVEL

1600 Research Blvd.
Rockville, MD. 20850

(301) 251-0370
(800) 446-4200
FAX (301) 294-6208

This itinerary is based on schedules and fares in effect the day the ticket is issued. Reconfirm all flights with the appropriate carrier 24 hours prior to domestic and 72 hours prior to international flights. Failure to use any continuing reservations can result in automatic cancellation.

IMPORTANT: Unused tickets may have value. Please return for possible credit or refund.

SALES PERSON: 46 ITINERARY/INVOICE NO. 0097670 DATE: 18 JUN 97
CUSTOMER NBR: 030177 QDPACU PAGE: 01

TO: OFFICE OF THE INDEPENDENT DELIVER
COUNSEL
1001 PENNSYLVANIA AVE. NW
SUITE 490-NORTH
WASHINGTON, D.C. 20004

FOR: KAVANAUGH/BRETT

23 JUN 97 - MONDAY

AIR DELTA AIR LINES INC FLT:347 COACH
LV WASHINGTON NATL 645A EQP: BOEING 757
DEPART: INTERIM TERMINAL
AR CINCINNATI 820A NON-STOP
KAVANAUGH/BRETT SEAT-39A

AIR DELTA AIR LINES INC FLT:253 COACH
LV CINCINNATI 855A EQP: MD-80
AR LITTLE ROCK 925A NON-STOP
KAVANAUGH/BRETT SEAT-34E

CAR LITTLE ROCK NATIONAL CAR RENTAL CORP ID-5000300
PICK UP-0925 1-INTER CAR AUTO A/C
RETURN-24JUN/1815
RATE IS GUARANTEED
DAILY RATE-USD40.00 UNLIMITED MILEAGE
CONFIRMATION NUMBER 1392627836COUNT

HOTEL LITTLE ROCK OUT-24JUN CORP ID-100205089
HOLIDAY INN 1 NIGHT
HI SELECT LITTLE ROCK WEST 1 ROOM 1 KING LEISURE NON SMKG
201 S SHACKLEFORD RATE-79.00USD PER NIGHT
LITTLE ROCK AR 72211 CANCEL BY 06P DAY OF ARRIVAL
PHONE 501-223-3000
FAX 501-223-2833
GUARANTEED LATE ARRIVAL
CONFIRMATION 68189167

24 JUN 97 - TUESDAY

AIR NORTHWEST AIRLINES FLT:478 COACH
LV LITTLE ROCK 615P EQP: DC-9 STRETCH
AR MEMPHIS 656P NON-STOP
KAVANAUGH/BRETT SEAT-60

AIR NORTHWEST AIRLINES FLT:28 COACH
LV MEMPHIS 800P EQP: AIRBUS A320
AR WASHINGTON NATL 1106P NON-STOP
ARRIVE: MAIN TERMINAL
KAVANAUGH/BRETT SEAT-19F

CONTINUED ON PAGE 2

EASYLINK 7420392L001 24JUN97 16:00/16:00 EST
FROM: 4955438
4955438 4955438 DEPP UD
RESEARCH TRAVEL INC
TO: 2025148802

SALES PERSON: 46 ITINERARY DATE: 24 JUN 97
CUSTOMER NBR: 030177 QDPACU PAGE: 01

TO: OFFICE OF THE INDEPENDENT DELIVER
COUNSEL
1001 PENNSYLVANIA AVE. NW
SUITE 490-NORTH
WASHINGTON, D.C. 20004

FOR: KAVANAUGH/BRETT

24 JUN 97 - TUESDAY

AIR TRANS WORLD AIRLINES FLT:54 COACH
LV LITTLE ROCK 715P EQP: MD-80
AR ST LOUIS INTL 827P NON-STOP
ARRIVE: MAIN TERMINAL
AIR TRANS WORLD AIRLINES FLT:240 COACH
LV ST LOUIS INTL 915P EQP: MD-80
DEPART: MAIN TERMINAL

25 JUN 97 - WEDNESDAY

AR WASHINGTON NATL 1211A NON-STOP
ARRIVE: MAIN TERMINAL
KAVANAUGH/BRETT SEAT-28D

RESEARCH TRAVEL 800-446-4200
AFTER HOURS 800-237-7980, USE CODE SL9Y0

FOIA(b)(6)

U.S. Department of Justice
Washington, DC 20530

Travel Voucher
(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE Office of the Independent Counsel <i>Smith</i>	2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> PERMANENT CHANGE OF STATION	3. VOUCHER NO. 97STAR 0643
-----------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------

4. a. NAME (Last, first, middle initial) KAVANAUGH, Brett M.	b. SOCIAL SECURITY NO. 	5. PERIOD OF TRAVEL a. FROM 2-11-97 b. TO 2-13-97
c. MAILING ADDRESS (Include ZIP Code) 	d. OFFICE TELEPHONE NO. 202-514-8688	6. TRAVEL AUTHORIZATION DATE(S) 11
e. PRESENT DUTY STATION Washington, D. C.	f. RESIDENCE (City and State) Chevy Chase, Maryland	9. CHECK NO.

7. TRAVEL ADVANCE (From Imprest Fund or Treasury Check) a. Outstanding b. Amount to be applied c. Amount due Government (Attached: <input type="checkbox"/> Check <input type="checkbox"/> Cash) d. Balance outstanding	8. CASH PAYMENT RECEIPT a. DATE RECEIVED b. AMOUNT RECEIVED \$ c. PAYEE'S SIGNATURE	10. PAID BY
11-2 PURPOSE OF TRAVEL: <input type="checkbox"/> OPERATIONAL (1) <input type="checkbox"/> TRAINING (3) <input type="checkbox"/> MEETING/CONFERENCE (4) <input type="checkbox"/> RELOCATION (6) <input type="checkbox"/> OTHER (9)		

12. TRANSPORTATION TICKETS, IF PURCHASED WITH CASH OR CREDIT CARD (List below and attach passenger coupon; if credit card is used, show type of credit card (circle one.)	I hereby assign to the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials																																					
	<table border="1"> <thead> <tr> <th rowspan="2">AGENT'S VALUATION OF TICKET (a)</th> <th rowspan="2">ISSUING CARRIER (Initials) (b)</th> <th rowspan="2">MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)</th> <th rowspan="2">DATE ISSUED (d)</th> <th colspan="2">POINTS OF TRAVEL</th> </tr> <tr> <th>FROM (e)</th> <th>TO (f)</th> </tr> </thead> <tbody> <tr> <td>(g) DINERS GTS OTHER</td> <td>\$</td> <td></td> <td></td> <td>Washington, DC</td> <td>St. Louis, Missouri</td> </tr> <tr> <td>(h) CASH</td> <td>\$</td> <td>FOIA(b)(4)</td> <td></td> <td>and return</td> <td></td> </tr> <tr> <td>(i) TOTAL</td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL		FROM (e)	TO (f)	(g) DINERS GTS OTHER	\$			Washington, DC	St. Louis, Missouri	(h) CASH	\$	FOIA(b)(4)		and return		(i) TOTAL	\$					<table border="1"> <tr> <td>(m) TRANS. TICKETS (from reverse) (21-1)</td> <td>\$ 494.00</td> </tr> <tr> <td>(n) MILEAGE (from reverse) (21-2)</td> <td>\$</td> </tr> <tr> <td>(o) SUBSISTENCE (from reverse) (21-4)</td> <td>\$ 253.00</td> </tr> <tr> <td>(p) VEHICLE RENTAL (from reverse) (21-6)</td> <td>\$</td> </tr> <tr> <td>(q) OTHER (from reverse) (21-7)</td> <td>\$ 67.94</td> </tr> </table>	(m) TRANS. TICKETS (from reverse) (21-1)	\$ 494.00	(n) MILEAGE (from reverse) (21-2)	\$	(o) SUBSISTENCE (from reverse) (21-4)	\$ 253.00	(p) VEHICLE RENTAL (from reverse) (21-6)	\$	(q) OTHER (from reverse) (21-7)	\$ 67.94
AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)					MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL																														
		FROM (e)	TO (f)																																			
(g) DINERS GTS OTHER	\$			Washington, DC	St. Louis, Missouri																																	
(h) CASH	\$	FOIA(b)(4)		and return																																		
(i) TOTAL	\$																																					
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(p) VEHICLE RENTAL (from reverse) (21-6)	\$																																					
(q) OTHER (from reverse) (21-7)	\$ 67.94																																					

(j) COST CENTER/ ACCT CLASS:		(m) TRANS. TICKETS (from reverse) (21-1) \$ 494.00
(k) DC NUMBER: 97STAR 3113		(n) MILEAGE (from reverse) (21-2) \$
(l) CALL NUMBER:		(o) SUBSISTENCE (from reverse) (21-4) \$ 253.00
		(p) VEHICLE RENTAL (from reverse) (21-6) \$
		(q) OTHER (from reverse) (21-7) \$ 67.94

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ <i>Brett M. Kavanaugh</i>	DATE	AMOUNT CLAIMED ▶ \$ 814.94
NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).		

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest if the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).) APPROVING OFFICIAL SIGN HERE ▶ <i>[Signature]</i> DATE 2/8-97	17. FOR FINANCE OFFICE USE ONLY COMPUTATION DIFFERENCES (21-1) \$ IF ANY (21-2) (Explain (21-4) and show (21-6) amount) (21-7)
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION			b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION: Certifier's initials: \$
a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR	

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ <i>[Signature]</i> DATE 2/18/97	c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol) \$ d. NET TO TRAVELER ▶ \$
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BOC: 2120-03 = 253.00
2120-04 = 561.94

EXCEPTION TO SF 1012
APPROVED BY GSA/IRMS 7-89

FORM DOJ-534
SEP. 91

97STAR 0643

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.)
- Complete only for actual expense travel
- Col. (d) Show amount incurred for each meal including tax and tips and daily total meal cost.
- Col. (g) thru (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.
- (n) 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.
- (p) Show expenses, such as: taxi/limousine fares, local or long distance telephone calls for Government business, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet.

PAGE 1

OF 2 PAGES

TRAVELER'S AUTHORIZATION NO.

TRAVELER'S LAST NAME
KAVANAUGH

DATE	TIME (Hour and am/pm)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense.)	ITEMIZED SUBSISTENCE EXPENSES								MILEAGE RATE: ¢	TRANSPORTATION TICKETS	AMOUNT CLAIMED			
			MEALS				MISCELLANEOUS SUBSISTENCE	LODGING	TOTAL SUBSISTENCE EXPENSES	NO. OF MILES			MILEAGE	SUBSISTENCE	VEHICLE RENTAL	OTHER
			BREAKFAST	LUNCH	DINNER	TOTAL											(m)	(n)	(o)	(p)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)	
2-11	5:10P	Taxi from OIC/DC to Washington National Airport														
	5:55P	Depart National Airport TWA #91														
	7:21P	Arrive St. Louis Airport														
		Taxi from St. Louis Airport to Marriott Pavilion Hotel with John Bates													26.00	
	OVER-NIGHT	Marriott Pavilion Hotel (364.86 + 9.14 tax)						74.00					74.00			
		Per Diem (3 1/4 day @ \$42 per day = \$31.50)					31.50		31.50				31.50			
2-12		Per Diem in St. Louis					42.00		42.00				42.00			
	OVER-NIGHT	Marriott Pavilion Hotel						74.00					74.00			
		Telephone calls to office (on hotel bill \$5.88 + 7.06 + 9.94)													9.94	
2-13		Taxi from Marriott Hotel to St. Louis Airport (with Bates & Stacy)													32.00	
	1:30P	Depart St. Louis Airport TWA #440														
	4:32P	Arrive Washington National Airport														
											494.00					
											494.00		221.50			67.94

If additional space is required, continue on another Form DOJ-534 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 performances 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.

(21-1) (21-2) (21-4) (21-6) (21-7)

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

TOTAL AMOUNT CLAIMED ▶

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.)

Complete only for actual expense travel

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

(g) 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.

(n) 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.

(p) Show expenses, such as: taxi/limousine fares, local or long distance telephone calls for Government business, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet.

PAGE 2

OF 1 PAGES

TRAVELER'S AUTHORIZATION NO.

TRAVELER'S LAST NAME
KAVANAUGH

DATE	TIME (Hour and am/pm)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense.)	ITEMIZED SUBSISTENCE EXPENSES								MILEAGE RATE: ¢	TRANSPORTATION TICKETS	AMOUNT CLAIMED			
			MEALS				MISCELLANEOUS SUBSISTENCE	LODGING	TOTAL SUBSISTENCE EXPENSES	NO. OF MILES			MILEAGE	SUBSISTENCE	VEHICLE RENTAL	OTHER
			BREAK-FAST	LUNCH	DINNER	TOTAL											(m)	(n)	(o)	(p)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)	
19 97																
2-13		Tax from National Airport to OIC/DC														
		Per Diem \$42 per day = \$1.50 (3/4 day x \$42 per day = \$1.50)					31.50		31.50				31.50			

If additional space is required, continue on another Form DOJ-534 BACK, leaving the front blank.

SUBTOTALS ▶

TOTALS ▶ 494.00

(21-1) (21-2) (21-4) (21-6) (21-7)

31.50

253.00

67.94

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 performances 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), (n), (o) and (p) below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ \$ 814.94

FOIA(b)(6)

U.S. Department of Justice
Washington, DC 20530

Travel Voucher
(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE Office of the Independent Counsel		2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> PERMANENT CHANGE OF STATION	3. VOUCHER NO.
----------------------------------------------------------------------------------------------------	--	------------------------------------------------------------------------------------------------------------------------------------	----------------

4. a. NAME (Last, first, middle initial) KAVANAUGH, Brett M.		b. SOCIAL SECURITY NO. [Redacted]	5. PERIOD OF TRAVEL a. FROM b. TO	
c. MAILING ADDRESS (include ZIP Code) [Redacted]		d. OFFICE TELEPHONE NO. 202-514-8688	6. TRAVEL AUTHORIZATION DATE(S)	
e. PRESENT DUTY STATION Washington, D. C.		f. RESIDENCE (City and State) Chevy Chase, Maryland		9. CHECK NO.

7. TRAVEL ADVANCE (From Imprest Fund or Treasury Check)		8. CASH PAYMENT RECEIPT		10. PAID BY
a. Outstanding		a. DATE RECEIVED	b. AMOUNT RECEIVED	
b. Amount to be applied		\$		
c. Amount due Government (Attached: <input type="checkbox"/> Check <input type="checkbox"/> Cash)		c. PAYEE'S SIGNATURE		
d. Balance outstanding		11-2 PURPOSE OF TRAVEL: <input type="checkbox"/> OPERATIONAL (1) <input type="checkbox"/> TRAINING (3) <input type="checkbox"/> MEETING/CONFERENCE (4) <input type="checkbox"/> RELOCATION (6) <input type="checkbox"/> OTHER (9)		

11-1 FOREIGN TRAVEL

12. TRANSPORTATION TICKETS, IF PURCHASED WITH CASH OR CREDIT CARD (List below and attach passenger coupon; if credit card is used, show type of credit card (circle one).)

I hereby assign to the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE, CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL	
					FROM (e)	TO (f)
(g) DINERS GTS OTHER	\$					
	\$					
(h) CASH	\$					
(i) TOTAL	\$					

(j) COST CENTER/ ACCT CLASS: [Redacted]	(m) TRANS. TICKETS (from reverse) (21-1)	\$
(k) DC NUMBER:	(n) MILEAGE (from reverse) (21-2)	\$
(l) CALL NUMBER: [Redacted]	(o) SUBSISTENCE (from reverse) (21-4)	\$
	(p) VEHICLE RENTAL (from reverse) (21-6)	\$
	(q) OTHER (from reverse) (21-7)	\$

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶	DATE	AMOUNT CLAIMED ▶	\$
----------------------	------	------------------	----

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest if the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶	DATE	17. FOR FINANCE OFFICE USE ONLY COMPUTATION	
		DIFFERENCES IF ANY (Explain and show amount)	
		(21-1)	\$
		(21-2)	
		(21-4)	
		(21-6)	
		(21-7)	

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION			b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION: Certifier's initials:	\$
a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR		

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT		c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol)	\$
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶	DATE		
		d. NET TO TRAVELER ▶	\$

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3113	FOIA(b)(4)
Social Security Number: [redacted] - - - FOIA(b)(6)		Accounting Classification: [redacted]	
Requested By: Kenneth W. Starr Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary: <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: Washington, DC VIA: VIA: VIA: To: St. Louis, MO And return <input checked="" type="checkbox"/> Dep. Date: February 11, 1997 Return Date: February 13, 1997	Estimated Cost: Transportation \$ 500.00 Actual subsistence or per diem \$ 250.00 Other \$ 100.00 Total \$ 850.00 <input type="checkbox"/> ATM Advance Authorized \$	Mode of Transportation Authorized: <input checked="" type="checkbox"/> By Common Carrier <input type="checkbox"/> By Government-Furnished Auto <input type="checkbox"/> By Rental Vehicle or Special Conveyance <input type="checkbox"/> By Privately-Owned Vehicle <input type="checkbox"/> POV Determined to be Most Advantageous to Government <input type="checkbox"/> Cost Not to Exceed that of Common Carrier <input type="checkbox"/> Based on Cost of Government Furnished Auto <input type="checkbox"/> \$ _____ Mileage Rate Authorized <input type="checkbox"/> Other GSA (BOAC):	Mode of Subsistence Authorized: <input type="checkbox"/> Actual subsistence up to \$ _____ per day. Actual subsistence requires approval by appropriate authorizing official. <input checked="" type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed \$74.00/night + tax lodging and \$42.00/day M&IE <input type="checkbox"/> Per diem of \$ _____ per day. <input type="checkbox"/> Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
- 2. Use of foreign flag carrier(s) as shown in justification statement below.
- 3. Rental of business quarters (hire of room, quarters for conference, etc.)
- 4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
- b. Training
- c. Meetings, Conferences and Speeches
- d. Relocation Travel
- e. Other Travel

Justification (if appropriate)

Travel authorized from Washington, DC, to St. Louis, MO, for oral argument before the 8th Circuit. Allowances are \$74.00 + tax for lodging, \$42.00 for M&IE, and \$5.00 telephone.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Justin R. Harris Title Administrative Officer Date 2/11/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.

TAXI RECEIPT

→ Lambert St. Louis Airport →

From: Airport

Date: 2/11/97

To Marriott

To _____

Amount \$ 26 Driver _____

Cab Co. _____ Cab # _____

*Thank You. Have a pleasant stay in St. Louis
including tip for
Kavanaugh + Bates*

AUTO LIVERY CAB CO.

722 N. 17th. St.
St. Louis, MO 63103
(314) 241-7722

CAB CREDIT AUTHORIZATION

DATE 2-13-97 TIME _____ A.M.
P.M.

CAB NO. 21 DRIVER [Signature]

FROM Marriott

TO Airport

TO _____

TO _____

Meter Fare	<u>32</u>	<u>00</u>
Total	<u>32</u>	<u>00</u>

Account No.

SIGNATURE _____

FIRM NAME _____

ADDRESS _____

for Kavanaugh, Starr, + Bates

ST. LOUIS **Marriott**
 PAVILION DOWNTOWN

One Broadway, St. Louis, Missouri 63102 (314) 421-1776

GUEST FOLIO

632 KAVANAUGH/BRETT 64.86 02/13/97 13:00 ACCT#
 ROOM NAME RATE DEPART TIME 5451
 DDB RESEARCH TRAVEL INC 02/11/97 19:59
 TYPE ARRIVE TIME

80 PLAZA 270 MD
 ROOM ROCKVILLE
 CLERK 208503172
 ADDRESS PAYMENT HG#:

DATE	REFERENCE		CHARGES	CREDITS	BALANCE DUE
02/11	ROOM.	632, 1	64.86		
02/11	RM TX	632, 1	4.44		
02/11	CITY TAX	632, 1	2.43		
02/11	OCCUPTAX	632, 1	2.27		
02/12	LNG DIST	9040-202	5.88		
02/12	LNG DIST	9060-202	4.06		
02/12	ROOM.	632, 1	64.86		
02/12	RM TX	632, 1	4.44		
02/12	CITY TAX	632, 1	2.43		
02/12	OCCUPTAX	632, 1	2.27		
02/13	AX CARD				
				\$157.94	

202 → both to office

SETTLED TO: AMERICAN EXPRESS CURRENT BALANCE .00

PASSENGER RECEIPT

ISSUED BY **ARC** UNIT COUPON
TRANS WORLD AIRLINES **XXXXX** TOUR CODE
NAME OF ISSUING AGENT **RESEARCH TRAVEL** PLACE OF ISSUE **MD** AGENT CODE **A21841293**
NAME OF PASSENGER **KAVANAUGH/BRETT** ROCKVILLE **MD** DATE OF ISSUE **04FEB97**
RPN/CARRIER CODE **RVMEJE/AA** YCADCA FARE BASIS/TICKET DESIGNATOR **7** FCI **00117**
X/O **FROM** ****NOT VALID FOR**** CARRIER FLIGHT CLASS DATE TIME STATUS NOT VALID BEFORE NOT VALID AFTER
X/O **TO** ****TRANSPORTATION*** **THIS IS YOUR RECEIPT** ISSUING AGENT ID **L9Y0*46**
ENDORSEMENTS/RESTRICTIONS **FOIA(b)(6)**

FP / 497808 /FCWAS TW STL24
4.00 TW WAS244.00YCADCA 488.00 END XFDCA3STL3

FARE	USD	488.00	EQUIV. FARE PD.		ALLOW	PCS	WT	UNCKD
TAX	XF	6.00	STOCK CONTROL NO. TX 889	CK	*****	*****	*****	*****
TAX			28743820243		CPN	DOCUMENT NUMBER	CK	
TOTAL	USD	494.00			0	015 1351387548	4	

030177 0094100 A46
BOARDING PASS

NAME OF PASSENGER **KAVANAUGH/BRETT**
FROM **WASHINGTON NATL**
TO **ST LOUIS INTL**

CARRIER **TRANS WORLD AIRLI**
CARRIER **TW** FLIGHT **91** CLASS **Y** DATE **11FEB97** TIME
GATE **20D** SEAT **NO** SMOKE

PCS **1** WT **015** UNCKD **1351387548** BAGGAGE ID NUMBER
AA21841293

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM TO ANY ENTITY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS.

PASSENGER TICKET AND BAGGAGE CHECK
PASSENGER COUPON

NAME OF PASSENGER **KAVANAUGH/BRETT** 6E0935
FROM **ST LOUIS**
TO **WASH/NATIONAL**

CARRIER/FLIGHT **TW 0440** CLASS/DATE **Y 13FEB97** TIME
GATE **32** BOARD TIME **09-C** SEAT **NO** SMOKE

ADDITIONAL SEAT INFORMATION
PCS **1** CK **WT** UNCK **WT** SEQ. NO. **PCS** CK **WT** UNCK **WT**
BAGGAGE ID. NR.
DOCUMENT NUMBER

SF5ZG ST1/XR

FOIA(b)(6)

U.S. Department of Justice
Washington, DC 20530

Travel Voucher
(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE <i>OIC-stm</i>		2. TYPE OF TRAVEL <input type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> PERMANENT CHANGE <input checked="" type="checkbox"/> OF STATION		3. VOUCHER NO. <i>97STAR 0195</i>	
4. a. NAME (Last, first, middle initial) Kavanaugh, Brett M.		b. SOCIAL SECURITY NO. []		5. PERIOD OF TRAVEL a. FROM 10/27/96 b. TO 10/29/96	
c. MAILING ADDRESS (Include ZIP Code) []		d. OFFICE TELEPHONE NO. (202) 514-8778		6. TRAVEL AUTHORIZATION DATE(S) <i>10</i>	
e. PRESENT DUTY STATION Washington, DC		f. RESIDENCE (City and State) Chevy Chase, MD		9. CHECK NO.	
7. TRAVEL ADVANCE (From Imprest Fund or Treasury Check)		8. CASH PAYMENT RECEIPT		10. PAID BY	
a. Outstanding		a. DATE RECEIVED b. AMOUNT RECEIVED \$			
b. Amount to be applied		c. PAYEE'S SIGNATURE			
c. Amount due Government (Attached: <input type="checkbox"/> Check <input type="checkbox"/> Cash)					
d. Balance outstanding		11-2 PURPOSE OF TRAVEL: <input type="checkbox"/> OPERATIONAL (1) <input type="checkbox"/> TRAINING (3)			
11-1 FOREIGN TRAVEL <input type="checkbox"/>		<input type="checkbox"/> MEETING/CONFERENCE (4) <input type="checkbox"/> RELOCATION (6) <input type="checkbox"/> OTHER (9)			
12. TRANSPORTATION TICKETS, IF PURCHASED WITH CASH OR CREDIT CARD (List below and attach passenger coupon; if credit card is used, show type of credit card (circle one.))		I hereby assign to the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7)			Traveler's Initials
				POINTS OF TRAVEL	
				FROM TO	
				(e) (f)	
(g) DINERS GTS OTHER \$					
(h) CASH \$		FOIA(b)(4)			
(i) TOTAL \$					
		(m) TRANS. TICKETS (from reverse) (21-1) \$ 299.00			
(j) COST CENTER/ ACCT CLASS:		(n) MILEAGE (from reverse) (21-2) \$ <i>18.60</i>			
(k) DC NUMBER: <i>97TSMZ 3033</i>		(o) SUBSISTENCE (from reverse) (21-4) \$ 227.70			
(l) CALL NUMBER:		(p) VEHICLE RENTAL (from reverse) (21-6) \$ 69.20			
		(q) OTHER (from reverse) (21-7) \$ 60.00			
13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.					
TRAVELER SIGN HERE <i>Brett M. Kavanaugh</i>		DATE <i>10/31/96</i>		AMOUNT CLAIMED <i>\$ 674.50</i>	
NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; I.d. 1001).					
14. This voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)				17. FOR FINANCE OFFICE USE ONLY COMPUTATION	
APPROVING OFFICIAL SIGN HERE <i>Gregory Meyer</i> DATE <i>11/4/96</i>				DIFFERENCES (21-1) \$	
				(21-2)	
				(21-4)	
				(21-6)	
				(21-7)	
15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION				b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION: Certifier's Initials: \$	
a. VOUCHER NO.		b. D.O. SYMBOL		c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol) \$	
		c. MONTH & YEAR		d. NET TO TRAVELER \$	
16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT AUTHORIZED CERTIFYING OFFICIAL SIGN HERE					
				DATE	

BOC: 2120-02 = 18.60

2120-03 = 227.70

2120-04 = 428.20

EXCEPTION TO SF 1012 APPROVED BY GSA/IRMS 7-69

FORM DOJ-634 SEP. 91

97STAR 0195 FOIA # none (UATS 16315) DocId: 70105254 Page 39

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.)
- Complete only for actual expense travel
- 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.
- (n) 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.
- (p) Show expenses, such as: taxi/limousine fares, local or long distance telephone calls for Government business, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet.

PAGE _____ OF _____ PAGES

TRAVELER'S AUTHORIZATION NO. _____

TRAVELER'S LAST NAME _____

DATE 19__	TIME (Hour and am/pm)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense.)	ITEMIZED SUBSISTENCE EXPENSES								MILEAGE RATE: 31¢	TRANS-PORTATION TICKETS (l)	AMOUNT CLAIMED				
			MEALS				MISCEL- LANEOUS SUBSIS- TENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSES (j)	NO. OF MILES (k)			MILEAGE (m)	SUBSIS- TENCE (n)	VEHICLE RENTAL (o)	OTHER (p)	
			BREAK- FAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)											
10/27	9:10a	Depart Birmingham Airport									30		9 30	unl			
	12:32p	Arrive Little Rock Airport															
		Rental Car													69 20		
10/29	12:15p	Depart Little Rock Airport															
	4:59p	Arrive National Airport															
		Free Shuttle to BWI POV Parking BWI															60 00
	9:00p	Arrive Residence															
		POV 30 miles to residence @ .31¢/mile											9 30				
		Hotel												145 20			
		Airfare										299 00					
		M&IE 2 3/4 days @ \$80												unl 75 00			
													18 60				
													299 00	227 70	69 20	60 00	

If additional space is required, continue on another Form DOJ-534 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 performances 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.

(21-1) (21-2) (21-4) (21-6) (21-7)

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

TOTAL AMOUNT CLAIMED ▶ \$674.50

~~\$665.20~~

REQUEST

Traveler's Name Brett M. Kavanaugh		FOIA(b)(6)	Document Number 97 T STR 3033
Social Security Account Number			Accounting Classification
Requested By Signature			Organization ODE
Title			Official Duty Station Wash DC. FOIA(b)(4)
Date			
Planned Itinerary		Estimated Cost	Mode of Transportation Authorized
<input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: <u>Birmingham, Alabama</u> VIA: _____ VIA: _____ VIA: <u>Little Rock, Arkansas</u> To: <u>Washington, D.C.</u> And return <input type="checkbox"/> Dep. Date <u>10/27/96</u> Return Date <u>10/29/96</u>		Transportation \$ <u>299.00</u> Actual subsistence or per diem \$ <u>182.00</u> Other \$ <u>150.00</u> Total \$ <u>631.00</u> <input type="checkbox"/> ATM Advance Authorized \$ _____	(Check applicable box(es)) <input checked="" type="checkbox"/> BY COMMON CARRIER <input type="checkbox"/> BY GOVERNMENT-FURNISHED AUTO <input checked="" type="checkbox"/> BY RENTAL VEHICLE OR SPECIAL CONVEYANCE <input checked="" type="checkbox"/> BY PRIVATELY OWNED VEHICLE <input type="checkbox"/> POV DETERMINED TO BE MOST ADVANTAGEOUS TO GOVERNMENT <input type="checkbox"/> COST NOT TO EXCEED THAT OF COMMON CARRIER <input type="checkbox"/> BASED ON COST OF GOVERNMENT FURNISHED AUTO <input checked="" type="checkbox"/> \$ <u>31</u> MILEAGE RATE AUTHORIZED <input checked="" type="checkbox"/> OTHER <input checked="" type="checkbox"/> Taxi GSA (BOAC)
			Mode of Subsistence Authorized
			(Check type) <input type="checkbox"/> Actual subsistence up to \$ _____ per day Actual subsistence requires approval by appropriate authorizing official <input type="checkbox"/> Per diem based on lodging plus meals and incidental expenses NTE \$ _____ <input type="checkbox"/> Per diem of \$ _____ per day <input type="checkbox"/> Extended TDY (Reduced Rate)

- Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es))
- 1. Use of premium class. If premium class air is to be authorized forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
 - 2. Use of foreign flag air carrier(s) as shown in justification statement below.
 - 3. Rental of business quarters (hire of room, quarters for conference, etc.)
 - 4. Other. Specify below.

- Purpose of Travel
- a. Operational/Managerial
 - b. Training
 - c. Meetings, Conferences and Speeches
 - d. Relocation Travel (attach Form DOJ-502)
 - e. Other Travel

Justification (if appropriate) Because Mr. Kavanaugh has personal business in Birmingham, Alabama during the weekend of 10/25-10/27, payment is authorized for air fare from Birmingham, Alabama to Little Rock, Arkansas, and return to Baltimore/Washington International Airport so that Mr. Kavanaugh may conduct official business in Little Rock, Arkansas

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel purposes

or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Judith R. Harris Title Administrative Officer Date 10/24/96

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.



GUEST CHARGES SUMMARY
 LITTLE ROCK (LIT) 10900 FINANCIAL CTR PKY
 LITTLE ROCK, AR, 72211
 (501)227-6000

Toll Free Reservations (800) 321- 2211

THANK YOU FOR SELECTING COURTYARD BY MARRIOTT FOR YOUR TRIP. WE TRUST THAT YOUR EXPERIENCE WITH US HAS INCLUDED WARM AND GRACIOUS SERVICE, AND THE TYPE OF ACCOMMODATIONS EXPECTED.
 WE LOOK FORWARD TO SERVING YOU AGAIN ON FUTURE TRIPS. FOR ADDITIONAL RESERVATIONS, CALL OUR TOLL FREE RESERVATION NUMBER, (800) 321-2211.
 WE LOOK FORWARD TO YOUR NEXT VISIT.

4 BRETT KAVANAUGH ROOM 111 GOVA
 1600 RESEARCH BLVD ROOM TYPE GENR 21841293
 ROCKVILLE MD 208503172 NO. OF GUESTS 1
 PLAZA 270 RATE 66.00
 CLERK LBW

ARRIVE	TIME	DEPART	TIME	FOLIO #
10/27/96	0133PM	10/29/96	08:13AM	PS-93731
DATE	REFERENCE NUMBER	DESCRIPTION	CHARGES	CREDITS
10/27/96	RB111	ROOM CHARGE	66.00	
10/27/96	RT111	ROOM TAX	6.60	
10/28/96	FD278	RESTAURANT ROOM CHARGE	7.51	
10/28/96	MV1718	MOVIE	9.49	
10/28/96	RB111	ROOM CHARGE	66.00	
10/28/96	RT111	ROOM TAX	6.60	
10/29/96	AX08:13	AMERICAN EXPRESS		162.20-

	* CARD #:	FOIA(b)(6)		*
	* Amount:	162.20	Auth: 32	*
	* ** Signature on File **			*

	**	BALANCE	**	.00

The undersigned agrees to make immediate payment upon receipt of statement. In the event such payment is not made within 30 days after receipt of the original statement, it is agreed that the hotel may impose a late payment charge at a rate of 1 1/2% per month (annual rate of 18%), or the maximum allowed by law, on the unpaid balance, and the reasonable cost of collection, including attorney's fees.

SIGNATURE _____

Parsons

BWI
AIRPORT
THANK YOU

PAID

23#

03-289 No.
96-10-20T
029-20:17EX
96-10-6DT
026-06:21EN
C...80.00\$

...80.00\$

.....4DT

*\$60 to
Govt.*

**NATIONAL
CAR RENTAL**

RA: LR23423-0 VEH: 80403-LR19753
RENTAL: 10/27/96 1301 LIT 80403-00
RETURN: 10/29/96 1210 LIT 80403-00
MI OUT:26161 MI IN:26213 MI DRV: 52

BRETT KAVANAUGH

[REDACTED] - - - - [FOIA(b)(6)]

2 DAYS @ 0 WEEKS @ 0 HOURS @
\$30.00 \$180.00 \$10.00
SPEC 0 MILES @
\$500.00 \$.00

RATE CHG	\$	60.00
* TOTAL T&M	\$	60.00
NET DUE	\$	60.00
TAX RECOVERY	\$	2.00
TAX 12.000%	\$	7.20
AMT DUE	\$	69.20

*TAXABLE CHARGES

YOUR SATISFACTION IS IMPORTANT TO US

THANK YOU FOR CHOOSING NATIONAL

RESEARCH TRAVEL

1600 Research Blvd.
Rockville, MD. 20850

(301) 251-0370
(800) 446-4200
FAX (301) 294-6208

This itinerary is based on schedules and fares in effect the day the ticket is issued. Reconfirm all flights with the appropriate carrier 24 hours prior to domestic and 72 hours prior to international flights. Failure to use any continuing reservations can result in automatic cancellation.

IMPORTANT: Unused tickets may have value. Please return for possible credit or refund.

SALES PERSON: 46
CUSTOMER NBR: 030177

ITINERARY/INVOICE NO. 0091947
SUVRAF

DATE: 25 OCT 96
PAGE: 01

TO: OFFICE OF THE INDEPENDENT COUNSEL
1001 PENNSYLVANIA AVE, NW
SUITE 490-NORTH
WASHINGTON, D.C. 20004
DELIVER ON FRIDAY 10/25

FOR: KAVANAUGH/BRETT

27 OCT 96 - SUNDAY

AIR DELTA AIR LINES INC FLT:322 COACH
LV BIRMINGHAM AL 910A EQP: BOEING 757
AR ATLANTA 1103A NON-STOP

AIR DELTA AIR LINES INC SEAT-24D
LV ATLANTA FLT:928 COACH
AR LITTLE ROCK 1205P EQP: MD-80
KAVANAUGH/BRETT SEAT-15B 1232P NON-STOP

OTHER MEMPHIS

NO ADVANCE SEATING FOR THIS FLIGHT

CAR LITTLE ROCK NATIONAL CAR RENTAL CORP ID-5000300
PICK UP-1232P 1-COMPACT CAR AUTO AC

RETURN-28OCT/715P

RATE IS GUARANTEED

DAILY RATE-USD30.00

CONFIRMATION NUMBER

UNLIMITED MILEAGE

1288911801COUNT

HOTEL LITTLE ROCK OUT-28OCT
COURTYARD BY MARRIOTT 1 NIGHT
COURTYARD LITTLE ROCK 1 ROOM GOVT
10900 FINANCIAL CTR PKWY RATE-66.00USD PER NIGHT
LITTLE ROCK AR 72211 CANCEL BY 06P DAY OF ARRIVAL
FONE 501-227-6000
FAX 501-227-6912
GUARANTEED LATE ARRIVAL
CONFIRMATION 80540892

28 OCT 96 - MONDAY

HOTEL LITTLE ROCK OUT-29OCT
COURTYARD BY MARRIOTT 1 NIGHT
COURTYARD LITTLE ROCK 1 ROOM GOVT
10900 FINANCIAL CTR PKWY RATE-66.00USD PER NIGHT
LITTLE ROCK AR 72211 CANCEL BY 06P DAY OF ARRIVAL
FONE 501-227-6000
FAX 501-227-6912
GUARANTEED LATE ARRIVAL
CONFIRMATION 81799077

CONTINUED ON PAGE 2

FOIA # none (URTS 16315) DocId: 70105254 Page 45

RESEARCH TRAVEL

1600 Research Blvd.
Rockville, MD. 20850

(301) 251-0370
(800) 446-4200
FAX (301) 294-6208

This itinerary is based on schedules and fares in effect the day the ticket is issued. Reconfirm all flights with the appropriate carrier 24 hours prior to domestic and 72 hours prior to international flights. Failure to use any continuing reservations can result in automatic cancellation.
IMPORTANT: Unused tickets may have value. Please return for possible credit or refund.

SALES PERSON: 46 ITINERARY/INVOICE NO. 0091947 DATE: 25 OCT 96
CUSTOMER NBR: 030177 SUVBAF PAGE: 02

TO: OFFICE OF THE INDEPENDENT COUNSEL
1001 PENNSYLVANIA AVE. NW
SUITE 490-NORTH
WASHINGTON, D.C. 20004
DELIVER ON FRIDAY 10/25

FOR: KAVANAUGH/BRETT

29 OCT 96 - TUESDAY
AIR TRANS WORLD AIRLINES FLT#50 COACH
LV LITTLE ROCK 123P EQP: 727 STRETCH
AR ST LOUIS INTL 235P NON-STOP
KAVANAUGH/BRETT SEAT-11C
AIR TRANS WORLD AIRLINES FLT#170 COACH
LV ST LOUIS INTL 410P EQP: MD-80
AR BALTIMORE WASHNTN 712P NON-STOP

AIR TICKET	TW1334521119	KAVANAUGH BRETT	
		BILLED TO	FOIA(b)(6) 124.00*
		SUB TOTAL	124.00
		NET CC BILLING	124.00*
		TOTAL AMOUNT DUE	0.00

FARE TO LITTLE ROCK 175.00 - GOVT RATE
FARE TO BWI 124.00 - GOVT RATE

AG-46

3033

REQUEST

Traveler's Name Brett M. Kavanaugh		Document Number 97TSTR3033
Social Security Account Number FOIA(b)(6)		Accounting Classification FOIA(b)(4)
Requested By		Organization OIC
Signature		Official Duty Station WASH DC
Title	Date	Mode of Transportation Authorized (Check applicable box(es)) <input checked="" type="checkbox"/> BY COMMON CARRIER <input type="checkbox"/> BY GOVERNMENT-FURNISHED AUTO <input checked="" type="checkbox"/> BY RENTAL VEHICLE OR SPECIAL CONVEYANCE <input type="checkbox"/> BY PRIVATELY OWNED VEHICLE <input type="checkbox"/> POV DETERMINED TO BE MOST ADVANTAGEOUS TO GOVERNMENT <input type="checkbox"/> COST NOT TO EXCEED THAT OF COMMON CARRIER <input type="checkbox"/> BASED ON COST OF GOVERNMENT FURNISHED AUTO <input checked="" type="checkbox"/> MILEAGE RATE AUTHORIZED <input checked="" type="checkbox"/> OTHER Taxi <input type="checkbox"/> GSA (BOAC)
Planned Itinerary <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations From: Birmingham, Alabama VIA: _____ VIA: _____ VIA: Little Rock, Arkansas VIA: Washington, D.C. To: _____ And return <input type="checkbox"/> 10/27/96 Dep. Date 10/29/96 Return Date _____	Estimated Cost Transportation \$ 299.00 Actual subsistence or per diem \$ 182.00 Other \$ 150.00 Total \$ 631.00 <input type="checkbox"/> ATM Advance Authorized \$ _____		Mode of Subsistence Authorized (Check type) ☐ Actual subsistence up to $ _____ per day Actual subsistence requires approval by appropriate authorizing official ☐ Per diem based on lodging plus meals and incidental expenses NTE $ _____ ☐ Per diem of $ _____ per day ☐ Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es))

1. Use of premium class. If premium class air is to be authorized forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.

2. Use of foreign flag air carrier(s) as shown in justification statement below.

3. Rental of business quarters (hire of room, quarters for conference, etc.)

4. Other. Specify below.

Purpose of Travel

a. Operational/Managerial c. Meetings, Conferences and Speeches e. Other Travel

b. Training d. Relocation Travel (attach Form DOJ-502)

Justification (if appropriate) **Because Mr. Kavanaugh has personal business in Birmingham, Alabama during the weekend of 10/25-10/27, payment is authorized for air fare from Birmingham, Alabama to Little Rock, Arkansas, and return to Baltimore/Washington International Airport so that Mr. Kavanaugh may conduct official business in Little Rock, Arkansas**

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Judith R. Harris Title **Administrative Officer** Date **10/21/96**

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.



REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3113	FOIA(b)(4)
Social Security Number: <input type="text"/> - - - FOIA(b)(6)		Accounting Classification: <input type="text"/>	
Requested By: Kenneth W. Starr Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary: <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: Washington, DC VIA: VIA: VIA: To: St. Louis, MO And return <input checked="" type="checkbox"/> Dep. Date: February 11, 1997 Return Date: February 13, 1997	Estimated Cost: Transportation \$ 500.00 Actual subsistence or per diem \$ 250.00 Other \$ 100.00 Total \$ 850.00 <input type="checkbox"/> ATM Advance Authorized \$	Mode of Transportation Authorized: <input checked="" type="checkbox"/> By Common Carrier <input type="checkbox"/> By Government-Furnished Auto <input type="checkbox"/> By Rental Vehicle or Special Conveyance <input type="checkbox"/> By Privately-Owned Vehicle <input type="checkbox"/> POV Determined to be Most Advantageous to Government <input type="checkbox"/> Cost Not to Exceed that of Common Carrier <input type="checkbox"/> Based on Cost of Government Furnished Auto <input type="checkbox"/> \$ _____ Mileage Rate Authorized <input type="checkbox"/> Other GSA (BOAC):	Mode of Subsistence Authorized: <input type="checkbox"/> Actual subsistence up to \$ _____ per day. Actual subsistence requires approval by appropriate authorizing official. <input checked="" type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed \$74.00/night + tax lodging and \$42.00/day M&IE <input type="checkbox"/> Per diem of \$ _____ per day. <input type="checkbox"/> Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
2. Use of foreign flag carrier(s) as shown in justification statement below.
3. Rental of business quarters (hire of room, quarters for conference, etc.)
4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
 b. Training
 c. Meetings, Conferences and Speeches
 d. Relocation Travel
 e. Other Travel

Justification (if appropriate)

Travel authorized from Washington, DC, to St. Louis, MO, for oral argument before the 8th Circuit. Allowances are \$74.00 + tax for lodging, \$42.00 for M&IE, and \$5.00 telephone.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Justin R. Harris Title Administrative Officer Date 2/11/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3249	FOIA(b)(4)
Social Security Number: [] - - FOIA(b)(6)		Accounting Classification: []	
Requested By: W. Hickman Ewing, Jr. Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary:	Estimated Cost:	Mode of Transportation Authorized:	Mode of Subsistence Authorized:
<input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations.	Transportation \$ 1,500.00	<input checked="" type="checkbox"/> By Common Carrier	<input type="checkbox"/> Actual subsistence up to \$ per day. Actual subsistence requires approval by appropriate authorizing official.
From: Washington, DC	Actual subsistence or per diem \$ 1,000.00	<input checked="" type="checkbox"/> By Government-Furnished Auto	<input checked="" type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed \$65.00/night for lodging and \$30.00 per day for M&IE
VIA:	Other \$ 1,000.00	<input type="checkbox"/> By Rental Vehicle or Special Conveyance	<input type="checkbox"/> Per diem of \$ per day.
VIA:	Total \$ 3,500.00	<input type="checkbox"/> By Privately-Owned Vehicle	<input type="checkbox"/> Extended TDY (Reduced Rate)
VIA:		<input type="checkbox"/> POV Determined to be Most Advantageous to Government	
To: Little Rock, Arkansas		<input type="checkbox"/> Cost Not to Exceed that of Common Carrier	
And return <input checked="" type="checkbox"/>		<input type="checkbox"/> Based on Cost of Government Furnished Auto	
Dep. Date: July 1, 1997	<input type="checkbox"/> ATM Advance Authorized \$	<input type="checkbox"/> \$ Mileage Rate Authorized	
Return Date: September 30, 1997		<input type="checkbox"/> Other	
		GSA (BOAC): 10349E	

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet.)
 - Upgrade to premium class at no extra cost.
- 2. Use of foreign flag carrier(s) as shown in justification statement below.
- 3. Rental of business quarters (hire of room, quarters for conference, etc.)
- 4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
- b. Training
- c. Meetings, Conferences and Speeches
- d. Relocation Travel
- e. Other Travel

Justification (if appropriate)

Authorization is granted for TDY travel to Little Rock, Arkansas, on a biweekly basis for 2-3 night stays for investigative purposes. OIC corporate apartment must be used for lodging; if unavailable, local lodging is authorized. Per diem allowance is \$65.00 (including tax) per night for lodging and \$30.00 per day for M&IE (\$22.50 for travel days). One phone call home per day is allowed up to a maximum of \$5.00 during stays in Little Rock of two or more consecutive nights. GSA fleet vehicle is authorized for TDY official use; official use shall include daily travel to/from/between lodging and work sites and incidental local and personal use. Fuel reimbursement not applicable to non-business mileage. Claims resulting from accidents shall be asserted against the Government in accordance with 41 CFR 101-39-4. If GSA vehicle unavailable, rental car is authorized.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Wesley K. Ewing Title Administrative Officer Date 7/1/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3324	
Social Security Number: - - - - FOIA(b)(6)		Accounting Classification: - - FOIA(b)(4)	
Requested By: W. Hickman Ewing, Jr. Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary: <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: Washington, DC VIA: VIA: VIA: To: Little Rock, Arkansas And return <input checked="" type="checkbox"/> Dep. Date: June 23, 1997 Return Date: June 25, 1997	Estimated Cost: Transportation \$ 250.00 Actual subsistence or per diem \$ 200.00 Other \$ 150.00 Total \$ 600.00 <input type="checkbox"/> ATM Advance Authorized \$	Mode of Transportation Authorized: <input checked="" type="checkbox"/> By Common Carrier <input checked="" type="checkbox"/> By Government-Furnished Auto <input checked="" type="checkbox"/> By Rental Vehicle or Special Conveyance <input type="checkbox"/> By Privately-Owned Vehicle <input type="checkbox"/> POV Determined to be Most Advantageous to Government <input type="checkbox"/> Cost Not to Exceed that of Common Carrier <input type="checkbox"/> Based on Cost of Government Furnished Auto <input type="checkbox"/> \$ _____ Mileage Rate Authorized <input type="checkbox"/> Other GSA (BOAC): 10349E	Mode of Subsistence Authorized: <input type="checkbox"/> Actual subsistence up to \$ _____ per day. Actual subsistence requires approval by appropriate authorizing official. <input checked="" type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed \$ \$87.00/night for lodging and \$30.00 per day for M&IE <input type="checkbox"/> Per diem of \$ _____ per day. <input type="checkbox"/> Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
<input type="checkbox"/> Upgrade to premium class at no extra cost.
<input type="checkbox"/> 2. Use of foreign flag carrier(s) as shown in justification statement below. | <input type="checkbox"/> 3. Rental of business quarters (hire of room, quarters for conference, etc.)
<input checked="" type="checkbox"/> 4. Other. Specify below. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Purpose of Travel:

- | | | |
|----------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> a. Operational/Managerial | <input type="checkbox"/> c. Meetings, Conferences and Speeches | <input checked="" type="checkbox"/> e. Other Travel |
| <input type="checkbox"/> b. Training | <input type="checkbox"/> d. Relocation Travel | |

Justification (if appropriate)

Authorization is granted for TDY travel to Little Rock, Arkansas, on a biweekly basis for 2-3 night stays for investigative purposes. OIC corporate apartment must be used for lodging; if unavailable, local lodging is authorized. Per diem allowance is \$87.00 (including tax) per night for lodging and \$30.00 per day for M&IE (\$22.50 for travel days). One phone call home per day is allowed up to a maximum of \$5.00 during stays in Little Rock of two or more consecutive nights. GSA fleet vehicle is authorized for TDY official use; official use shall include daily travel to/from/between lodging and work sites and incidental local and personal use. Fuel reimbursement not applicable to non-business mileage. Claims resulting from accidents shall be asserted against the Government in accordance with 41 CFR 101-39-4. If GSA vehicle unavailable, rental car is authorized.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature *Gregory K. ...* Title Administrative Officer Date 7/8/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.

REQUEST

Traveler's Name: KAVANAUGH, Brett		Document Number: 97TSTR3249A	
Social Security Number: [redacted] - - - - FOIA(b)(6)		Accounting Classification: [redacted] - - - FOIA(b)(4)	
Requested By: W. Hickman Ewing, Jr. Signature _____		Organization: Office of the Independent Counsel	
Title: _____ Date: _____		Official Duty Station: Washington, DC	
Planned Itinerary: <input type="checkbox"/> Foreign travel. Must be approved as required by DOJ travel regulations. From: Washington, DC VIA: VIA: VIA: VIA: To: Little Rock, Arkansas And return <input checked="" type="checkbox"/> Dep. Date: July 1, 1997 Return Date: September 30, 1997	Estimated Cost: Transportation \$ 1,500.00 Actual subsistence or per diem \$ 1,000.00 Other \$ 1,000.00 Total \$ 3,500.00 <input type="checkbox"/> ATM Advance Authorized \$	Mode of Transportation Authorized: <input checked="" type="checkbox"/> By Common Carrier <input checked="" type="checkbox"/> By Government-Furnished Auto <input checked="" type="checkbox"/> By Rental Vehicle or Special Conveyance <input type="checkbox"/> By Privately-Owned Vehicle <input type="checkbox"/> POV Determined to be Most Advantageous to Government <input type="checkbox"/> Cost Not to Exceed that of Common Carrier <input type="checkbox"/> Based on Cost of Government Furnished Auto <input type="checkbox"/> \$ _____ Mileage Rate Authorized <input type="checkbox"/> Other GSA (BOAC): 10349E	Mode of Subsistence Authorized: <input checked="" type="checkbox"/> Actual subsistence up to \$95.00/night for lodging and \$30.00/day M&IE. Actual subsistence above \$65/night for lodging requires supplemental justification on the travel voucher. <input type="checkbox"/> Per diem based on lodging plus meals and incidental expenses not to exceed <input type="checkbox"/> Per diem of \$ _____ per day. <input type="checkbox"/> Extended TDY (Reduced Rate)

Other Authorization (When the following type(s) of expense(s) can be anticipated, check the appropriate box(es)):

- 1. Use of premium class. If premium class air is to be authorized, forward to appropriate authorizing official. (Justify below or attach separate sheet).
 Upgrade to premium class at no extra cost.
- 2. Use of foreign flag carrier(s) as shown in justification statement below.
- 3. Rental of business quarters (hire of room, quarters for conference, etc.)
- 4. Other. Specify below.

Purpose of Travel:

- a. Operational/Managerial
- b. Training
- c. Meetings, Conferences and Speeches
- d. Relocation Travel
- e. Other Travel

Justification (if appropriate)

Authorization is granted for TDY travel to Little Rock, Arkansas, on a biweekly basis for 2-3 night stays for investigative purposes. OIC corporate apartment must be used for lodging; if unavailable, local lodging is authorized. Per diem allowance is not to exceed \$95.00 (including tax) per night for lodging and \$30.00 per day for M&IE (\$22.50 for travel days). When lodging expense exceeds \$65.00/night, supplemental justification is required on the travel voucher. One phone call home per day is allowed up to a maximum of \$5.00 during stays in Little Rock of two or more consecutive nights. GSA fleet vehicle is authorized for TDY official use; official use shall include daily travel to/from/between lodging and work sites and incidental local and personal use. Fuel reimbursement not applicable to non-business mileage. Claims resulting from accidents shall be asserted against the Government in accordance with 41 CFR 101-39-4. If GSA vehicle unavailable, rental car is authorized.

Travelers are accountable for all transportation tickets, Government Transportation Requests (GTR's), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTR's) are issued to the traveler, the traveler is liable for the value of the tickets issued until all ticket coupons have been used for official travel

purposes or all unused tickets or coupons are properly accounted for on the travel voucher. See paragraphs 301-3.5, 301-10.2(a), and 301-11.5 of the DOJ Travel Supplement, for administrative procedures on the control of and accountability for passenger transportation documents.

AUTHORIZATION

You are authorized to travel at government expense in accordance with DOJ travel regulations, under the conditions outlined in this authorization. You are also authorized to make long distance telephone calls when they are necessary and in the interest of the government.

Signature Megyn Kavanagh Title Administrative Officer Date 7/1/97

Authorization of actual subsistence and foreign travel is limited by DOJ travel regulations.

A travel voucher must be submitted within 10 workdays after the travel is completed, or not later than the 10th workday of the following month for persons in a continuous travel status who file monthly vouchers.