Collection: Ermarth, Fritz W.: Files
Folder Title: NATO Summit/Moscow Summit Advance Trip 03/01/1988-03/10/1988 (2)
Box: RAC Box 2

WITHDRAWAL SHEET

Ronald Reagan Library

Collection Name ERMATH, FRITZ: FILES

Withdrawer MJD 4/24/2013

File Folder NATO SUMMIT/MOSCOW SUMMIT ADVANCE TRIP 3/1/88-3/10/88 (2)

FOIA F02-073/5 COLLINS

Box Number RAC BOX 2

96

ID	Doc Type	Document Description	No of Pages	Doc Date	Restrictions
158074	MEMO	FRITZ ERMARTH TO COLIN POWELL RE SURVEY TRIP	4	3/11/1988	B1

The above documents were not referred for declassification review at time of processing

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

B-1 National security classified information [(b)(1) of the FOIA]
B-2 Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
B-3 Release would violate a Federal statute [(b)(3) of the FOIA]
B-4 Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
B-6 Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
B-7 Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
B-8 Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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

WITHDRAWAL SHEET

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

5

DATE: April 4, 1988

MAIL CHECK TO: NAME Fritz W. Ermarth

ADDRESS c/o Administrative Office, Room 397, Old Executive Office Bldg
Washington, D.C. 20506

OFFICIAL DUTY DATES: March 1 - 10, 1988

ADVANCE RECEIVED: $250.00 EXCHANGE RATE(S):

FORM OF PAYMENT OF TRANSPORTATION (CASH OR GTR: Mil. Air & Commercial Air

LODGING WAS PROVIDED/PAID FOR BY: White House
(If paid by traveler, receipt must accompany claim.)

TRAVEL SCHEDULE

DATE/TIME	(PLACE) DEPARTEDFROM	DATE/TIME	(PLACE) ARRIVED AT	TAXI/POV/ MISC EXPENSES	NO. MILES	AMOUNT
3/1 0630	Residence	0700	White House	Taxi		$ 20.00
3/1 0745	West Basem.	0840	Andrews AFB	WH Van		
3/1 0845	Andrews AFB	2145	Brussels	Mil Air		
3/4 0900	Brussels	1410	Moscow	Mil Air		
3/8 0800	Moscow	0930	Leningrad	Mil Air		
3/9 1200	Leningrad	1150	Helsinki	Mil Air		

EXPENSES

DATE	LODGING	MEALS Breakfast	Lunch	Dinner	OTHER
3/2-4					Food and Misc. Hotel Service $57.00
3/10					Food en route Helsinki Washington $25.00

ADDITIONAL INFORMATION

1. Attach copies of all transportation stubs. Return unused tickets to Admin Office for refund from airlines when a GTR is used.

2. All expenses incurred MUST be itemized. Receipts for hotels/motels must be submitted. Receipts must be submitted for all other expenses (i.e., taxis, meals, airport parking, etc.) that are $25.00 and over). When receipts are not obtainable, the expenditure must be explained on the Travel Voucher.

3. Always attach the original Travel Authorization to the Travel Voucher.

USE REVERSE SIDE FOR ADDITIONAL SPACE.

TRAVEL SCHEDULE (cont'd.)

DATE/TIME	(PLACE) DEPARTED FROM	DATE/TIME	(PLACE) ARRIVED AT	TAXI/POV/ MISC EXPENSES	NO. MILES	AMOUNT
3/10 0705	Helsinki	0930	London	Commercial Air		
3/10 1415	London	1745	Wash-Dulles	" "		
3/10 1830	Dulles Airport	1915	Residence	POV 15-mile roundtrip	15	

EXPENSES (cont'd.)

DATE	LODGING	MEALS Breakfast	Lunch	Dinner	OTHER

Reservation next stop Sheraton

Name:

Adress:

City: Hotel:

Arrival date: No. nights:

Arrival time: No. rooms:

Room type: No. persons:

I wish to guarantee my booking with Cr. Card Nr.:

Please hand over to reception or send to Sheraton Worldwide Reservation, Place Rogier 3, B-1210 Brussels.
Telephone 02-219.45.96 (office hours). Telex 22989 (see our directory for our telephone numbers in any other country)

Brussels Sheraton Hotel & Towers

DIVISION: ITT INDUSTRIES BELGIUM S.A.
PLACE ROGIER 3
B - 1210 BRUSSELS
TEL.: 219.34.00 - TELEX 26887
TVA 402.963.635 - R.C.B. 324.751

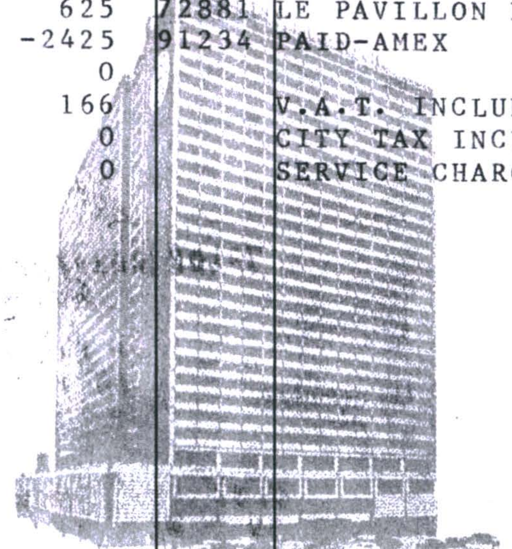
No. AB 117462

TAXE SUR LA VALEUR AJOUTEE
NOTE

monti, lier 10-87

Kredietbank 425-2071621-88 Bruxelles Lambert 310-0319031-84
NOS PRIX SONT T.V.A. ET SERVICE COMPRIS. OUR PRICES INCLUDE SERVICE AND ADDED VALUE TAX

Date	Amount	Reference	Description
03/02	900	84254	LE PAVILLON BFST
03/03	700	77717	LE PAVILLON BFST
03/03	200	40283	POOL REVENUE
03/04	625	72881	LE PAVILLON BFST
03/04	-2425	91234	PAID-AMEX
TOTAL	0		
	166		V.A.T. INCLUDED
	0		CITY TAX INCL.
	0		SERVICE CHARGE



91234

MR ERMATH
US EMBASSY
DO NOT UNBLOCK
25-27 BLD DU REGENT
1000 BXL

Guest name: MR ERMATH
Arrival date: 02/29/88 OPID 37
Departure date: 03/04/88 Time: 08:13:56
Room number: 1123 Room rate: 3,050

SIGNATURE
GUEST'S SIGNATURE

FACTURATION
CHARGE TO:

ADRESSE
ADDRESS

VILLE
CITY

Page: 1

INDEPENDAMMENT D'AUTRES INSTRUCTIONS, LE CLIENT EST LIE JUSQU'A PAIEMENT COMPLET DU SOLDE
REGARDLESS OF INSTRUCTIONS, GUEST IS ALSO LIABLE UNTIL BALANCE HAS BEEN PAID.

Siège Social: CH. de NEERSTALLE 56-70, 1190 BXL

ti, lier 7/30162 - SHEB 000

8

Numéro de la Carte/Cardmember Account Number

3728 064677 32004

Nom du Titulaire de la Carte/Cardmember Name

05/87 THRU 04/89 78 AX

FRITZ W ERMARTH 2879

Code d'autorisation/Approval Code

Numéro de la note ou facture/Check or Bill No.

Nom et adresse de l'Etablissement affilié/Service Establishment

Date de la dépense/Date of Charge

Dec 21 88

Inscrire toute facturation retardée ici./Enter delayed charges below.

EC 21 020 011 81
AE 941 010 618 1
DC 124 388 0
VI 4556 206528
BRUSSELS SHERATON HOTEL

Biens/Prestations
Merchandise/Services

Nature de cette facturation/Type of Delayed Chg

Total de cette facturation/Amt. of Delayed Chg

Pourboires/Divers Tips/Misc

Total après révision/Revised Total

Signature du Titulaire de la Carte/Cardmember Signature

X

Total 2425 FB

Réservé à American Express

Montant converti

Référence/Number

00 7167184

American Express Card/Carte

Ecrire en appuyant/Please Print Firmly

Exemplaire destiné au Titulaire/Cardmember Copy

Relevé de frais/Record of Charges

ROC FORM 49.00.00.790.3

9

EXECUTIVE OFFICE OF THE PRESIDENT
OFFICIAL TRAVEL AUTHORIZATION

(read the Privacy Act Statement and instructions on back)

1. TYPE OF AUTHORIZATION

- [x] TDY
- [ ] Relocation
- [ ] Blanket
- [ ] Amendment (show item no(s) amended)
- [ ] Invitational

2. Traveler (First name, middle initial, last name)

FRITZ W. ERMARTH

3. Travel

Staff Member

4. Organization

National Security Council

5. Office Phone

395-6961

6. Official Duty Station

Washington, D.C.

7. Purpose of Travel

To Accompany the President/Advance Team/Pre-Summit.

8. Itinerary (Point of origin and places to be visited) Washington, D.C. to Brussels, Belgium; to Moscow, USSR; to Leningrad, USSR; to Geneva, Switzerland; to London, UK; and, Return to Washington, D.C.

9(a) Travel begin on or about 3-1-88

9(b) Travel end on or about 3-10-88

10.

- [x] Per Diem
- [ ] Actual Subsistence (High Rate Area)
- [ ] Actual Subsistence (Unusual Circumstances)*

Rates(s):

MODE OF TRAVEL

11(a) Commercial Transportation					11(b) Privately owned vehicle			
Rail		Air						
Coach	Extra Fare*	Coach/Tourist	First Class ‡	in lieu of train in N.E. corridor*	Auto	Plane	Rate auth per mile	☐ Determined more advantageous to Government * ☐ For convenience of traveler NTE common carrier cost
		XXX						

‡ First Class must have approval of Agency Head or Deputy

11(c) ☐ Gov't Owned Vehicle

11(d) ☐ Other (specify)

12. SPECIAL EXPENSES AUTHORIZED

- [ ] Registration Fees (meetings, training, etc.)
- [x] Taxi fares between lodging and/or place of business
- [ ] Commercial Rental Car
- [ ] Excess Baggage not to exceed ______
- [ ] Other

13. ESTIMATED COST	AMOUNT
Per Diem/Actual Subsistence	$ 2,100.00
Transportation	790.00
Miscellaneous	100.00
TOTAL	$ 2,990.00

14. ADVANCE REQUESTED $ 250.00

15.* Special Provisions/Remarks (Justification for first class travel, utilization of plane in N. E. corridor, actual subsistence, annual leave enroute, etc.)

NSC Will Reimburse State Dept for Lodging Expenses.

Authorized 50% Per Diem.

16(a) Requested by

Fritz W. Ermarth

17. Accounting data

1182000 100 XS8I22

16(b) I certify that the travel herein was reviewed and determined to be essential for the accomplishment of agency programs and missions
Approval Official (Signature and Title)

Mary A. Dix
Administrative Officer

18. Funds are available to defray travel costs specified above
Funds Manager's Certification (Signature)

Helen Pahlke

19. Date

2-17-88

20. Travel Authorization No.

XS8I22

OA FORM 22
APRIL 1983

TRAVELER'S COPY

AmericanAirlines ISSUED BY

PASSENGER TICKET AND BAGGAGE CHECK

SUBJECT TO CONDITIONS OF CONTRACT ON PASSENGER'S COUPON

PASSENGER'S COUPON

AIRLINE FORM SERIAL NUMBER: 001:5408:581:835

ENDORSEMENTS CARBON

ORIGIN/DESTINATION: HELSINKI VA WASHINGTON DU

BOOKING REFERENCE

NAME OF PASSENGER: ERMARTH/F

NOT TRANSFERABLE

DATE OF ISSUE: 29FEB88

DATE AND PLACE OF ORIGINAL ISSUE

CONJUNCTION TICKET(S)

W.H.I
WASHINGTON DC

DATE AND PLACE OF ISSUE

/QSAQLR

X/O	NOT GOOD FOR PASSAGE	CARRIER	FLIGHT	CLASS	DATE	TIME	STATUS	FARE BASIS/TKT. DESIGNATOR	NOT VALID BEFORE	NOT VALID AFTER	ALLOW
	FROM HELSINKI VANTAA	PA	99	Y	10MAR	705A	OK	Y1			
O	LONDON HEATHROW	PA	107	Y	10MAR	215P	OK	Y1			
	WASHINGTON DULLES										
	--VOID--										
	TO --VOID--										

BGE. CHK'D. UNCK'D. PCS. WT. UNCK. WT.

FARE: FIM 4530

FARE CALCULATION: 10MAR HEL PA LON PA WAS4530 FIM4530 END

FORM OF PAYMENT: GTR A0-156-447 NSC

TAX

TAX: XU 10.00

TOTAL: USD 1112.15

EQUIV. FARE PD.: USD 1102.15

ROUTE CODE: 42995520306

CPN TICKET NUMBER: 001 5408581835 6

A

REV. 6-86

PRINTED IN U.S.A. BY RAND McNALLY

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM/TO ANY ENTITY OTHER THAN AMERICAN AIRLINES OR ITS AUTHORIZED AGENTS.

12

ADVANCE OF FUNDS APPLICATION AND ACCOUNT

1. TYPE OF ADVANCE	[X] CASH [ ] CHECK
2. TYPE OF TRAVEL	[X] TEMPORARY [ ] PERMANENT
3. NAME (Last, first, middle initial)	ERMARTH, Fritz W.
4. ACCOUNT NO.	--
5. TELEPHONE NUMBER(S)	395-6961
6. SOCIAL SECURITY ACCOUNT NO.	--
7. DEPARTMENT OR ESTABLISHMENT	National Security Council
8. BUREAU, DIVISION OR OFFICE	Washington, D.C.

In compliance with Privacy Act of 1974 the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chapter 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, and E.O. 9397 of November 22, 1943. The primary purpose of the information is to facilitate the review, approval, accounting, and advancement of funds for travel and certain relocation allowance expenses to be incurred under appropriate administrative authorization. The requested information will be used by officers and employees of this agency who have a need for such information in the performance of their official duties. The information will 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, security clearances, or other investigations of the performance of official duty while in Government service. Your Social Security Number (SSN) is solicited for use as an employee identification number. Disclosure of the requested information is voluntary; however, failure to provide the information required may result in delay or suspension of your advance of funds request.

9. APPLICATION — *(For completion by applicant)*

An advance of funds is hereby requested for travel and other expenses to be incurred by me.

a. UNDER AUTHORIZATION NUMBER	XS8I22
b. DATE OF AUTHORIZATION	
c. TRAVEL PERIOD	From 3-1-88 To 3-10-88
d. MAIL CHECK TO [ ] OFFICE [ ] RESIDENCE (Give address — number, street, city, State, ZIP code)	Pick-up @Window
e. BALANCE DUE U.S. FROM PREVIOUS ADVANCE	$
f. AMOUNT HEREIN APPLIED FOR	$ 250.00
g. TOTAL	$ 250.00

Note: Outstanding advances not fully recovered by deductions from reimbursement vouchers must be promptly repaid. When travel is canceled or indefinitely postponed, the full amount of any outstanding advance shall be repaid immediately.

APPLICANT SIGN HERE ▶ Fritz W. Ermarth [signature] DATE

10. APPROVAL ▶ SIGNATURE AND TITLE OF APPROVING OFFICIAL: Mary A. Dix, Admin Officer [signature: Mary A. Dix] DATE APPROVED: 2-17-88

11. APPROPRIATION TO BE CHARGED: 1182000 100 XS8I22

12. REMARKS

13. CASH PAYMENT RECEIVED DATE

1038-108

STANDARD FORM 1038 (REV. 10-77)
Prescribed by GSA, FPMR (41 CFR) 101-7

NSCI 742
Annex II 13

NSC STAFF TRAVEL AUTHORIZATION

DATE: February 12, 1988

1. TRAVELER'S NAME: Fritz W. Ermarth

2. PURPOSE(S), EVENT(S), DATE(S): Advance trip to prepare for upcoming Moscow Summit; March 2 - 10

3. ITINERARY (Please Attach Copy of Proposed Itinerary):

DEPARTURE DATE 3/2/88 RETURN DATE 3/10/88

TIME 1810 hrs TIME 1550 hrs

4. MODE OF TRANSPORTATION:

GOV AIR X COMMERCIAL AIR X POV ___ RAIL ___ OTHER ___

5. ESTIMATED EXPENSES:

TRANSPORTATION 790.00 PER DIEM ___ OTHER ___ TOTAL TRIP COST ___

6. WHO PAYS EXPENSES: NSC X OTHER ___

7. IF NOT NSC, DESCRIBE SOURCE AND ARRANGEMENTS:

8. WILL FAMILY MEMBER ACCOMPANY YOU: YES ___ NO X

9. IF SO, WHO PAYS FOR FAMILY MEMBER (If Travel Not Paid by Traveler, Describe Source and Arrangements): NA

10. TRAVEL ADVANCE REQUESTED: $ 200.00

11. REMARKS (Use This Space to Indicate Any Additional Items You Would Like to Appear on Your Travel Orders):

12. TRAVELER'S SIGNATURE: Fritz W. Ermarth

13. APPROVALS: