Collection:
Green, Max: Files, 1985-1988
Folder Title:
Travel (1 of 2)
Box: 28

WITHDRAWAL SHEET

Ronald Reagan Library

Collection Name GREEN, MAX: FILES

File Folder TRAVEL (1 OF 2)

Box Number

Withdrawer

MJD 11/14/2001

FOIA

F03-0020/06

THOMAS

80

DOC NO	Doc Type	Document Description	No of Pages	Doc Date	Restrictions
1	FORM	TRAVEL VOUCHER	1	3/19/1987	B6
2	FORM	TRAVEL VOUCHER	1	3/4/1987	B6
3	FORM	TRAVEL VOUCHER	1	1/27/1987	B6
4	FORM	TRAVEL VOUCHER	1	ND	B6
5	FORM	TRAVEL VOUCHER	1	11/12/1986	B6
6	FORM	TRAVEL VOUCHER	1	10/29/1986	B6
7	FORM	TRAVEL VOUCHER	1	10/29/1986	B6

MAX GREEN TRAVEL

9/19-23 Israel $350 Gerstein, $350 G. Klein, $1000 UJA

10/14-15 AJC NY
JCRC Boston

10/26-7 Greek Orth Archdiocese

10/30-31 NYC w. MM (G. Klein Bkfst) Official business

11/6-7 NYC- Defenders of Jerusalem
American Society

11/16 Princeton

11/18 ODA Brooklyn

June 20
Synagogue NCI

WITHDRAWAL SHEET
Ronald Reagan Library

Collection Name	*Withdrawer*
GREEN, MAX: FILES	MJD 11/14/2001
File Folder	*FOIA*
TRAVEL (1 OF 2)	F03-0020/06
	THOMAS
Box Number	
	80

DOC NO	*Document Type / Document Description*	*No of pages*	*Doc Date*	*Restrictions*
1	FORM TRAVEL VOUCHER	1	3/19/1987	B6

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

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

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

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) thru (g) Show amount incurred for each meal including tax and tips, and daily total meal cost.

(h) Show expenses, such as laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc (other than for meals)

(i) Complete for per diem and actual expense travel.

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

(m) Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE ____ OF ____ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME GREEN

DATE 1987 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: ¢ NO. OF MILES (k)	MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
3/5	1:00p	Depart White House						TAXI					8.50
	1:15p	Arrive Natl. Airpt.											
	2:30p	Arrive LaGuardia						TAXI					18.00
	3:00p	Arrive 515 Park			6.22	6.22			6.22			6.22	
	6:00p	Depart 515 Park						TAXI					22.00
	6:30p	Arrive LaGuardia											
	7:30p	Arrive Natl. Airpt.						TAXI					7.50
	8:00p	Arrive Ken. Center											
								SUBTOTALS ▶				6.22	56.00
								TOTALS ▶					

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

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

TOTAL AMOUNT CLAIMED ▶ $62.22

In compliance with the Privacy Act of 1974, the following information is provided. Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

THANK YOU

NYC
lunch/dinner

03-05"87 15:19
COUNTR 6.22
TOTAL 6.22
CASH 20.00
CHANG 13.78
ITM 1
A01#0000 R7549

+2.00 toll +
2.50 tip - total 18.00

—TAXICAB RECEIPT—

DATE 3-5-1987

REC'D FROM KSA

FARE AMOUNT $ 8.50

TRIP FROM Wash. DC

TRIP TO NTL AIRPORT

ASSN. District CAB NO. 478

I.D. NO. 49184

SIGNATURE KSA

07

THE FORMS WORKS INC. HYATTSVILLE, MD 20781 191980-BD

RECEIPT

Amt. $ 7.50 cents

To Kennedy Center

From airport

Date 3-5-87 Cab No.

Driver Name

+ 2.00 toll
+ 2.50 tip
= 22.00

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 11190

Date of Request February 27, 1987

1. **TRAVELER:**

Name: Max Green ☒ White House Staff

Extension: 6270 Room: 196 ☐ Other:

2. **PURPOSE(s) and DATE(s):** 3/5/87 to accompany Dov Zakheim of DOD who will speak before Conference of Presidents of Major Jewish Organizations

3. **ITINERARY:** Washington D.C. to New York City and return
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
3/5/87	1:oopm	air	3/5/87	6:00pm	air

5. **FUNDING SOURCE:**

☒ OFFICIAL ☐ POLITICAL ☐ 501(c)(3) ☐ OTHER

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $
☐ Hotel Name:	Recipient's Signature:
☐ Other:	Date:

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:** Max Green
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head: [signature]

Approving Official (Political or Foreign Travel):

Deputy Assistant to the President for Administration: [signature]

9 FOR TRANSPORTATION OFFICE USE ONLY:

Control No. 07-583-718 Account: 001540850 2703 $140.00

(5 10 85)

ORIGINAL (Return With Voucher)

113 - ~~$~~ A - M703

VOUCHER WORKSHEET

TRAVELER'S NAME: Green, Max

AUTH. NO. 11190

DATE	PER DIEM	BREAKFAST	LUNCH	DINNER	MISC. SUB.	( ) BILLED HOTEL	DAILY TOTAL	NOTES
3/5		Traveler Was Not Gone for 10 hours –						
		No Sustinence Allowed –						

	#days	less hotel if billed		
	rate	grand total subsistence		Object Codes 23 or 24
	amount			
	less incidentals on hotel			22

Other expenses

Air/rail fare		21
Local trans (list dates and amounts)	56.00	25
Auto Rent – (excludes insurance) $ ________		26
Other travel (specify)		29
Phone calls – Certified as official business ( )		52
Other misc. (specify)		
TOTAL	56.00	

WITHDRAWAL SHEET
Ronald Reagan Library

Collection Name	*Withdrawer*
GREEN, MAX: FILES	MJD 11/14/2001
File Folder	*FOIA*
TRAVEL (1 OF 2)	F03-0020/06
	THOMAS
Box Number	
	80

DOC NO	*Document Type* / *Document Description*	*No of pages*	*Doc Date*	*Restrictions*
2	FORM TRAVEL VOUCHER	1	3/4/1987	B6

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B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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

VOUCHER WORKSHEET

TRAVELER'S NAME: [illegible]

AUTH. NO.: [illegible]

DATE	PER DIEM	BREAKFAST	LUNCH	DINNER	MISC. SUB.	( ) BILLED HOTEL	DAILY TOTAL	NOTES
	[illegible]							

#days	
rate	
amount	
less incidentals on hotel	

less hotel if billed		
grand total subsistence		**Object Codes** 23 or 24
		22

Other expenses

Air/rail fare		21
Local trans (list dates and amounts)	5.50	25
Auto Rent – (excludes insurance) $ ____________		26
Other travel (specify)		29
Phone calls – Certified as official business ( )		52
Other misc. (specify)		____
TOTAL	5.50	

WITHDRAWAL SHEET

Ronald Reagan Library

Collection Name	*Withdrawer*
GREEN, MAX: FILES	MJD 11/14/2001
File Folder	*FOIA*
TRAVEL (1 OF 2)	F03-0020/06
	THOMAS
Box Number	
	80

DOC NO	*Document Type* *Document Description*	*No of pages*	*Doc Date*	*Restrictions*
3	FORM TRAVEL VOUCHER	1	1/27/1987	B6

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

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

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationship to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel:
- *Col (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost
- *(h)* Show expenses, such as laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals)
- *(i)* Complete for per diem and actual expense travel
- *(j)* Show total subsistence expense incurred for actual expense travel
- *(m)* Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (j) or maximum rate
- *(n)* Show expenses, such as taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet PAGE ____ OF ____ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME

DATE 19 87 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	ITEMIZED SUBSISTENCE EXPENSES — MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE ¢ — NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
1-12	5:40 am	Depart SS, MD										TAXI	6 50
	7:00 am	Depart Washington					Air Fare, Paid by Max Green						75 00
	8:00 am	Arrive New York City			30 00				30 00			30 00	(Taxi) 19 85
	9:00 pm	Depart New York City										Taxi	18 00
							Air Fare Paid by Max Green						75 00
	10:00 pm	Arrive Washington, D.C.										Taxi	6 50
	11:00 pm	Arrive Silver Spring, MD											
									SUBTOTALS ▶				
									TOTALS ▶			30 00	200 85

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

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

TOTAL AMOUNT CLAIMED ▶ $230.85

FARE $002.90
TOTAL $002.90

I LOVE NEW YORK

NEW YORK

FOR COMPLAINTS

$1.75

Date 1/12 1982

OFFICIAL TAXI RECEIPT

FROM

TO $1.75

FARE PAID $11 12.75

SIGNATURE #

FROM To

TO

RECEIVED FROM

FOR

AMOUNT 6.50 DATE TIME

DRIVER VEH. NO.

THANK YOU!

6.50

THIS STUB FOR YOUR CONVENIENCE

DATE	SERVER	AMOUNT	CHECK NO
1/2		$30.00	04975

EASTERN PASSENGER RECEIPT

12 JAN 87

X (signature)

(name if other than below)

—CREDIT CARD INFORMATION—

3710 690667 62002

08/86 THRU 07/88 82 AX

MAX GREEN

007 4141056088 1

175.00
50.00

AIR-SHUTTLE

RECEIPT

For Transportation between

NEW YORK & WASHINGTON

NOT VALID FOR TRANSPORTATION

EASTERN PASSENGER RECEIPT

12 JAN 87

X (signature)

(name if other than below)

—CREDIT CARD INFORMATION—

3710 690667 62002

08/86 THRU 07/88 82 AX

MAX GREEN

007 4141031088 5

175.00
50.00

EASTERN

AIR-SHUTTLE

RECEIPT

For Transportation between

NEW YORK & WASHINGTON

NOT VALID FOR TRANSPORTATION

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 11523

Date of Request: January 5, 19[illegible]7

1. **TRAVELER:**

Name: [illegible] Gree[illegible] ☒ White House Staff

Extension: [illegible] Room: [illegible] ☐ Other:

2. **PURPOSE(s) and DATE(s):** [illegible]

[illegible] York City [illegible]

Also Attend meetings with [illegible] leaders in [illegible] York.

3. **ITINERARY:** [illegible] York City [illegible]

(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date	Time	Mode	Date	Time	Mode:
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

5. **FUNDING SOURCE:**

☒ OFFICIAL ☐ POLITICAL ☐ 501(c)(3) ☐ OTHER

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $
☐ Hotel Name:	Recipient's Signature:
☐ Other:	Date

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:**

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

8. **APPROVING SIGNATURES:**

Office Head:

Approving Official (Political or Foreign Travel):

Deputy Assistant to the President for Administration:

9 *FOR TRANSPORTATION OFFICE USE ONLY*

Control No. Account:

(5 10 85)

ADMINISTRATIVE OFFICE COPY

VOUCHER WORKSHEET

TRAVELER'S NAME: Green Max

AUTH. NO: 11523

DATE	PER DIEM	BREAKFAST	LUNCH	DINNER	MISC. SUB.	( ) BILLED HOTEL	DAILY TOTAL	NOTES
1/12	16.50							
	$33.00/day per diem							
	rate -							

1/2	#days	less hotel if billed		
22.00	rate	grand total subsistence		Object Codes 23 or 24
16.50	amount			
16.50	less incidentals on hotel		16.50	24

Other expenses

Air/rail fare – reimbursed government rate any (\$20 / way)	140.00	21
Local trans (list dates and amounts)	50.90	25
Auto Rent – (excludes insurance) $ ________		26
Other travel (specify)		29
Phone calls – Certified as official business ( )		52
Other misc. (specify)		
TOTAL	207.40	

FROM 845 N. Belgrade [illegible]

TO 55 Metro Stop

RECEIVED FROM

FOR

AMOUNT 5.50 DATE 1/12 TIME

DRIVER VEH. NO. 272

THANK YOU!

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 10658

Date of Request October 10, 1986

1. **TRAVELER:**

Name: Max Green ☒ White House Staff

Extension: 6270 Room: 196 ☐ Other:

2. **PURPOSE(s) and DATE(s):** October 26, 1986 - Attend as dais guest at Feastday testimonial dinner in honor of Archbishop Lakovos, Greek Orthodox Archdiocese of North and South America.

3. **ITINERARY:** Washington, D. C. to New York City and return
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
10/26/86	5:00pm	Air	10/27/86	9:00am	Air

5. **FUNDING SOURCE:**

☐ OFFICIAL ☐ POLITICAL ☒ 501 (c)(3) ☐ OTHER

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $
☐ Hotel Name:	Recipient's Signature:
☐ Other:	Date:

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:** Max Green
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head: [signature]

Approving Official (Political or Foreign Travel):

Deputy Assistant to the President for Administration:

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No. Account:

(5/10/85)

ORIGINAL (Return With Voucher)

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 10658

Date of Request October 10, 1986

1. **TRAVELER:**

Name: Max Green ☒ White House Staff

Extension: 6270 Room: 196 ☐ Other:

2. **PURPOSE(s) and DATE(s):** October 26, 1986 - Attend as dais guest at Feastday testimonial dinner in honor of Archbishop Iakovos, Greek Orthodox Archdiocese of North and South America.

3. **ITINERARY:** Washington, D. C. to New York City and return
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
10/26/86	5:00pm	Air	10/27/86	9:00am	Air

5. **FUNDING SOURCE:**

☐ OFFICIAL ☐ POLITICAL ☒ 501 (c)(3) ☐ OTHER

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $
☐ Hotel Name:	Recipient's Signature:
☐ Other:	Date:

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:**
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head:

Approving Official
(Political or Foreign Travel):

Deputy Assistant to the President
for Administration:

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No. Account:

(5/10/85)

TRAVELER'S COPY

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. **ADVANCES FOR OFFICIAL TRAVEL ONLY**

   Cash travel advances will not be provided for political trips.

   Advances will not be provided to anyone with an outstanding unaccounted-for advance.

   Advances over $250 require 48-hour notice to White House Administrative Office, Extension 2500.

2. **ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS**

   Any travel advance which is neither repaid nor accounted for in full by an expense voucher within 15 days after return may be deducted from the staff member's salary.

3. **GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY**

   Government-issued tickets shall be used for official trips only (i.e., no political or personal travel). The entire cost of any government-issued tickets that are used for unofficial travel will be considered a personal travel advance and treated accordingly.

4. **TO OBTAIN REIMBURSEMENT, RECEIPTS ARE REQUIRED FOR ALL EXPENDITURES REGARDLESS OF THE AMOUNT**

5. **FOR DETAILED INFORMATION REGARDING TRAVEL REGULATIONS AND POLICIES, PLEASE REFER TO THE WHITE HOUSE TRAVEL HANDBOOK**
   (Additional copies available by calling Extension 2500.)

WITHDRAWAL SHEET

Ronald Reagan Library

Collection Name	*Withdrawer*
GREEN, MAX: FILES	MJD 11/14/2001
File Folder	*FOIA*
TRAVEL (1 OF 2)	F03-0020/06
	THOMAS
Box Number	
	80

DOC NO	*Document Type / Document Description*	*No of pages*	*Doc Date*	*Restrictions*
4	FORM TRAVEL VOUCHER	1	ND	B6

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

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B-3 Release would violate a Federal statute [(b)(3) of the FOIA]
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B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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

איחוד
ליהדות
מתקדמת
באמריקה

Union of American Hebrew Congregations

PATRON OF HEBREW UNION COLLEGE—JEWISH INSTITUTE OF RELIGION
ONE KALISA WAY, SUITE 108, PARAMUS, NJ 07652 (201) 599-0080

NEW JERSEY-WEST HUDSON VALLEY COUNCIL
Rabbi Daniel H. Freelander
Regional Director

23 September, 1986
19 Elul, 5746

Max Green
Assoc. Director, Office of Public Liaison
The White House
Washington, D.C.

Dear Mr. Green,

Thank you for agreeing to participate in the Regional Biennial of the New Jersey-West Hudson Valley Council of the Union of American Hebrew Congregations. This letter confirms our recent telephone conversation. The Convention will be held in Princeton, New Jersey at the Hyatt Regency Hotel from Friday, November 14 through Sunday, November 16, 1986.

All workshops will take place at the Hyatt. I am enclosing a copy of the program for the weekend. Information about the other participants in your workshop, as well as the description and time it is taking place, are included on the attached form.

Since each workshop spans a period of one hour and twenty-five minutes, you should plan on speaking for 15-20 minutes, leaving time for each participant's presentation, questions, and discussion. You can expect 30-50 people in attendance at your workshop. Distribute any materials you wish. You should also feel free to contact the other workshop participants. I would appreciate it if you would send me a short personal biography, so that the chairperson can give you an appropriate introduction.

Also enclosed is a Biennial Registration Packet. We hope you will try to attend as much of the weekend as possible. Further confirmation and driving directions to the Convention will be sent out in late October.

I look forward to seeing you at Biennial. If you have any questions, please don't hesitate to call me.

Very truly yours,

Nancy Hausman

Cantor Nancy S. Hausman
Administrative Intern

Please call us with your transpotation arrangements. Thanks.

WITHDRAWAL SHEET
Ronald Reagan Library

Collection Name	*Withdrawer*
GREEN, MAX: FILES	MJD 11/14/2001
File Folder	*FOIA*
TRAVEL (1 OF 2)	F03-0020/06
	THOMAS
Box Number	
	80

DOC NO	*Document Type* *Document Description*	*No of pages*	*Doc Date*	*Restric-tions*
5	FORM TRAVEL VOUCHER	1	11/12/1986	B6

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

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

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

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) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.
(h) Show expenses, such as laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.
(j) Show total subsistence expense incurred for actual expense travel.
(m) Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.
(n) Show expenses, such as taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE ____ OF ____ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME

DATE 19 86 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	ITEMIZED SUBSISTENCE EXPENSES — MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: ¢ NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
6-1	12pm	Depart Washington											
	1pm	Arrive New York						TAXI					11 00
6-2	8am	Depart New York											
	9am	Arrive Washington											
										SUBTOTALS ▶			
										TOTALS ▶			11 00

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

In compliance with the Privacy Act of 1974, the following information is provided. Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number, disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances, however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

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

TOTAL AMOUNT CLAIMED ▶

☆U.S.GPO:1982-0-361-526/7471

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

No. 6900

(TRAVELER TO COMPLETE SECTIONS 1-8.)

Date of Request May 22, 1986

1. **TRAVELER**

Name: MAX GREEN ☐ White House Staff

Extension: 6270 Room: 196 ☐ Other

2. **PURPOSE(S) and DATE(S):** To meet with the National Board of Directors of the United Synagogue of America to discuss concerns dealing with the Administration's domestic and foregin policy. Expenses to be paid by the non profit 501-c-3 organizationa, USof A.

3. **ITINERARY** NY, NY

(List all cities where stopover occurs.)

4. **DEPARTURE:**

Date: June 1, 1986

Time: AM

Mode: AIR

RETURN:

Date: June 2, 1986

Time: AM

Mode: AIR

5. **NATURE:** ☒ 100% Official ☐ 100% Political

6. **SIGNATURES:**

Traveler: X Max Green (2?)

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

Department Head

Approving Officer
(Special Assistant to the President for Administration)

7. **ESTIMATED COSTS:**

No. of Days Per Diem

Hotel Name

Hotel Daily Rate $

Other

SPECIAL EXPENSES:

☐ Registration Fee of $

Confirmed as a 501(c)(3) organization

8. **TRAVEL ADVANCE R**

Signature of Recipient:

REPAID: Amount

9. *FOR TRANSPORTATI*

GTR No.

113-0-M606

(8/13/81)

ORIGINAL (Return with Voucher)

VOUCHER WORKSHEET	TRAVELER'S NAME Green, Max							AUTH. NO. 6900
DATE	PER DIEM	BREAKFAST	LUNCH	DINNER	MISC. SUB.	( ) BILLED HOTEL	DAILY TOTAL	NOTES

Note: All other expenses paid for by a 501(c)(3) organization - (United Synagogue of America)

	#days	less hotel if billed	
	rate	grand total subsistence	
	amount		Object Codes 23 or 24
	less incidentals on hotel		
			22

Other expenses

Air/rail fare		21
Local trans (list dates and amounts) receipts indicate greater sum but only \$11.00 claimed -	11.00	25
Auto Rent - (excludes insurance) \$ ________		26
Other travel (specify)		29
Phone calls - Certified as official business ( )		52
Other misc. (specify)		
TOTAL	11.00	

11^{00}

TRAVEL VOUCHER

(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU DIVISION OR OFFICE: EOP

2. TYPE OF TRAVEL
☐ TEMPORARY DUTY
☐ PERMANENT CHANGE OF STATION

3. VOUCHER NO.

4. SCHEDULE NO.

5. TRAVELER (PAYEE)

a. NAME *(Last, first, middle initial)*: Green, Max

b. SOCIAL SECURITY NO.

c. MAILING ADDRESS *(Include ZIP Code)*: 196 OEOB, The White House, Washington, DC 20500

d. OFFICE TELEPHONE NO.: 456-6270

e. PRESENT DUTY STATION

f. RESIDENCE *(City and State)*

6. PERIOD OF TRAVEL
a. FROM: 10/14/86
b. TO: 10/15/86

7. TRAVEL AUTHORIZATION
a. NUMBER(S): 6890
b. DATE(S): 9/29/86

10. CHECK NO.

8. TRAVEL ADVANCE

a. Outstanding
b. Amount to be applied
c. Amount due Government *(Attached: ☐ Check ☐ Cash)*
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

11. PAID BY

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side.)*

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)	POINTS OF TRAVEL TO (f)

Marriott
HOTELS • RESORTS

ROOM SERVICE

DATE 10/14 AMOUNT 12.75

708 64427

CUSTOMER'S RECEIPT

THANK YOU

13. I certify that this voucher is true and correct to the best of my knowledge and belief, ... 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 ▶ [signature] DATE 10-30-86 AMOUNT CLAIMED ▶ $ 12 75

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

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
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 ▶ DATE

17. *FOR FINANCE OFFICE USE ONLY*
COMPUTATION $

a. DIFFERENCES, IF ANY *(Explain and show amount)*

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

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol):* $

d. NET TO TRAVELER ▶ $

18. ACCOUNTING CLASSIFICATION

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) thru (g)* 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).

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Complete this information if this is a continuation sheet. PAGE ____ OF ____ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME

DATE 19 86 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	ITEMIZED SUBSISTENCE EXPENSES — MEALS: BREAK FAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: ¢ NO. OF MILES (k)	AMOUNT CLAIMED — MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
10/14	10 am	Depart Washington											
	11 am	Arrive New York											
	3:30pm	Depart New York											
	4:30pm	Arrive Boston			12 75				12 75			12 75	
10/15	9:30am	Depart Boston											
	11 am	Arrive Washington											
									SUBTOTALS ▶				
									TOTALS ▶			12 75	

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

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

TOTAL AMOUNT CLAIMED ▶ $12.75

:1982-0-361-526/7471

STANDARD FORM 1012 BACK (10-77)

—TAXICAB RECEIPT—

(FOR A RADIO CAB CALL RADIO R US)

544-6666

DATE ______________ 19 ____ TIME ______________

REC'D FROM ______________________________

TRIP START ______________________________

TRIP END ______________________________

FARE 3,08

REGULAR	$
RADIO	$
RUSH HOUR	$
SNOW EMER.	$
CONTRACT	$
TIP	$ 1.50
TOTAL	$ 3.58

ASSN. Windsor CAB NO. 67

DRIVER I.D. NO. ______________

SIGNATURE ______________

37

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 11517

Date of Request: October 29, 1986

1. **TRAVELER:**

Name: Max Green ☑ White House Staff

Extension: 6270 Room: 196 ☐ Other:

2. **PURPOSE(s) and DATE(s):** November 18, 1986; Attend luncheon ceremony where Secretary Baldrige will be speaking and tour neighborhood to reach out to strong Administration supporters: 501(c) (3) confirmed by library

3. **ITINERARY:** Washington, DC to New York
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
11-18-86	10 am	Air	11-18-86	3:30pm	Air

5. **FUNDING SOURCE:**

☐ OFFICIAL ☐ POLITICAL ☐ 501 (c)(3) ☐ OTHER

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $
☐ Hotel Name:	Recipient's Signature:
☐ Other:	Date:

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:**
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head:

Approving Official
(Political or Foreign Travel):

Deputy Assistant to the President
for Administration:

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No. Account:

TRAVELER'S COPY

Thanks again,
Matt!

Maralyn

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. **ADVANCES FOR OFFICIAL TRAVEL ONLY**

   Cash travel advances will not be provided for political trips.

   Advances will not be provided to anyone with an outstanding unaccounted-for advance.

   Advances over $250 require 48-hour notice to White House Administrative Office, Extension 2500.

2. **ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS**

   Any travel advance which is neither repaid nor accounted for in full by an expense voucher within 15 days after return may be deducted from the staff member's salary.

3. **GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY**

   Government-issued tickets shall be used for official trips only (i.e., no political or personal travel). The entire cost of any government-issued tickets that are used for unofficial travel will be considered a personal travel advance and treated accordingly.

4. **TO OBTAIN REIMBURSEMENT, RECEIPTS ARE REQUIRED FOR ALL EXPENDITURES REGARDLESS OF THE AMOUNT**

5. **FOR DETAILED INFORMATION REGARDING TRAVEL REGULATIONS AND POLICIES, PLEASE REFER TO THE WHITE HOUSE TRAVEL HANDBOOK**
   (Additional copies available by calling Extension 2500.)

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 11517

Date of Request October 29, 1986

1. **TRAVELER:**

Name: Max Green ☒ White House Staff

Extension: 6270 Room: 196 ☐ Other:

2. **PURPOSE(s) and DATE(s):** November 18, 1986; Attend luncheon ceremony where Secretary Balridge will be speaking and tour neighborhood to reach out to strong Administration supporters; 501(c) (3) confirmed by library

3. **ITINERARY:** Washington, DC to New York
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
11-18-86	10 am	Air	11-18-86	3:30pm	Air

5. **FUNDING SOURCE:**

☐ OFFICIAL ☐ POLITICAL ☐ 501(c)(3) ☐ OTHER

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $
☐ Hotel Name:	Recipient's Signature:
☐ Other:	Date:

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:** Max Green
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head: [signature]

Approving Official (Political or Foreign Travel):

Deputy Assistant to the President for Administration: Jonathan Miller / cos

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No. Account:

(5/10/85)

ORIGINAL (Return With Voucher)

113-0-

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 11520

Date of Request: November 4, 1986

1. **TRAVELER:**

Name: Max Green ☒ White House Staff

Extension: 6278 Room: 196 ☐ Other:

2. **PURPOSE(s) and DATE(s):** November 6-7, 1986: Deliver Presidential message at Defender of Israel awards dinner; attend seminar on Argentinian Jews.

Expenses paid for by 501(c)(3) organization.

3. **ITINERARY:** Washington, DC to New York City and return.
(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
11-6-86	p.m.	air	11-7-86	p.m.	air

5. **FUNDING SOURCE:**

☐ OFFICIAL ☐ POLITICAL ☒ 501 (c)(3) ☐ OTHER

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $
☐ Hotel Name:	Recipient's Signature:
☐ Other:	Date:

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:**
(I have read and agree to the terms set forth on the reverse side.)

8. **APPROVING SIGNATURES:**

Office Head:

Approving Official
(Political or Foreign Travel):

Deputy Assistant to the President
for Administration:

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No. Account:

(5/10/85)

TRAVELER'S COPY

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. **ADVANCES FOR OFFICIAL TRAVEL ONLY**

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   (Additional copies available by calling Extension 2500.)

SAUL I. STERN

A vigorous, dynamic leader, Saul I. Stern has a record of service to the community — locally and nationally — that is highlighted by commitment and accomplishment.

As a co-founder of JINSA, and President since 1981, Saul has been instrumental in transforming the organization from a small-scale effort to a national group with 15,000 members. Under his leadership, the annual JINSA "Fly-In" has become recognized as a high level forum to foster dialogue between the Pentagon and the American Jewish community.

Saul's civic, charitable and governmental activities are legion and include: Board and Executive Committee, Council of Jewish Federations; Chairman, Public Social Policy Committee; Executive Board, American Jewish Committee; Director, Greater Washington Jewish Community Foundation; Visiting Committee, University of Chicago Law School; Board Member, University of Maryland Medical Systems; and Board of Advisors, University of Maryland School of Public Affairs.

He has served in the past as President, Jewish Council for the Aging and Jewish Social Service Agency; V.P. and member of the Executive Committee and Board, United Jewish Appeal Federation of Greater Washington; Secretary, Jewish Community Council; and Chairman, Maryland State Planning Commission. He has been a member of President Kennedy's Appalachian Regional Council, the Small Business Administration National Advisory Council, and the Montgomery County Ethics Commission.

Saul has been active in the local, state and national Democratic Party and was a delegate to the 1984 Democratic National Convention.

The Jewish Institute for National Security Affairs is fortunate to have had Saul Stern as its leader and is privileged to extend to him the recognition he so richly deserves.

ALAN LEE KEYES

In October 1986, Ambassador Alan Lee Keyes, Assistant Secretary of State for International Organization Affairs, was honored by the Government of Israel for his role in the United Nations conference on the decade of women held last year in Nairobi. As a member of the U.S. delegation to the conference, Ambassador Keyes assumed a leading role in producing the first major U.N. conference final report since 1975 that did not contain the infamous *"Zionism is Racism"* formulation. When the PLO delegation protested the final report, Keyes took the floor. In ringing terms, he emphasized the strength of the U.S. commitment to Israel in the United Nations and elsewhere.

It is this decisive and effective leadership that has characterized the illustrious career of 36 year-old Alan Keyes.

Prior to his current post, Alan Lee Keyes served as the U.S. Representative to the United Nations Economic and Social Council, with the rank of Ambassador. While in the position, he represented the United States at the U.N. General Assembly and at numerous international meetings and conferences.

He has held positions as: a consultant with the National Security Council; a member of the State Department's Policy Planning Staff; desk officer in the State Department's Office of Southern African Affairs; Vice-Consul at the U.S. Consulate General in Bombay, India.

Ambassador Keyes received his Ph.D. in Government from Harvard University.

Alan Keyes' commitment to the ideals on which our country is founded is exemplified by his distinguished record of performance.

to honor

Saul I. Stern

on the occasion of his retirement
as President of the

Jewish Institute for
National Security Affairs

with keynote speaker

Alan Lee Keyes
Assistant Secretary of State

on Saturday Evening, November Eighth
nineteen hundred and eighty-six
at the

Sheraton Washington Hotel
2660 Woodley Road, Northwest
Washington, District of Columbia

Reception: Seven o'clock — *RSVP*
Dinner: Eight o'clock — *Enclosed*

JINSA Board of Advisors

Senator Rudy Boschwitz
Lt. Gen. Devol Brett (Ret.)
Dr. Lawrence Goldmuntz
The Honorable Jack Kemp
I. L. Kenen
The Honorable Jeane J. Kirkpatrick
Professor Walter Laqueur
Professor Michael Ledeen
Ivan Novick
Nathan Perlmutter
Professor Eugene V. Rostow
Professor David Sidorsky
Dr. John Silber
Lt. Gen. Eugene Tighe (Ret.)
Jacques Torczyner
General John Vogt (Ret.)
Admiral Elmo Zumwalt (Ret.)

Saul J. Stern Tribute Dinner

Honorary Chairmen

The Honorable Jeane J. Kirkpatrick   Ambassador Max M. Kampelman

Chairman

Seymour S. Abensohn

Committee

Morris J. Amitay
Howard Bender
Diane Blumberg
Marvin Blumberg
Paul Berger
Clement Caditz
Elliot H. Cole
Lester Deutsch
Jerome J. Dick
Melvyn Estrin
Milton D. Fanaroff
Herbert A. Fierst
Morton Funger
Peter Gilbert
Nathan Golden
Bryan W. Littlefield
Ivan Novick
Leon Reiskin
Nina Rosenwald
David M. Schwartz
Jack Serber
Andrew M. Stern
Samson B. Stern
Sami Totah

347-5425

Jewish Institute for National Security Affairs (JINSA) is a non-profit, non-partisan educational organization whose activities are designed to increase awareness and understanding of the relationship between the security of Israel and the security of the United States and the things which can and must be done to preserve that security.

JINSA

Cordially Invites You

Matt - called
Sir Dan coming
D. B. need
anything for
tickets?
anne?

United Jewish Appeal-Federation of Jewish Philanthropies of New York, Inc.
130 East 59th Street, New York, N.Y. 10022 (212) 980-1000

Ernest W. Michel
Executive Vice President

Cont
Gary Thirer - 212-679-6868

[illegible]

Former Pres of Costa Rica [illegible]

Eliahu Essas -
[illegible]
6:30 Temple of Dendur
7:15 ceremony

October 8, 1986

Mr. Max Green
The White House
Washington, D.C.
20500

Dear Mr. Green:

I've been asked by the leadership of the Argentine Jewish community to invite you to a conference: "The Jewish Community of Argentina -- Assessing its Role in National Life," which will take place in New York on November 6th and 7th.

Our involvement is due to the fact that I just returned from Buenos Aires together with a group of some 100 major UJA-Federation leaders and contributors who participated in the first UJA-Federation Mission to South America.

Among the participants in this conference are two Jewish Argentine Cabinet Ministers as well as Jacobo Timerman. I'm enclosing a draft outline of the agenda which will give you a pretty good idea as to the content. Guido Guelar, one of the organizers of this conference, a fifth-generation Argentine and leading member of the Argentine Jewish community, is Chairman of this conference.

In case you plan to attend, please call John Dwyer, Executive Director of the Americas Society, at (212) 249-8950. You of course are invited as a guest of the Society which will be pleased to assume any expenses you may incur in this regard.

Warmest regards and all good wishes for a Happy and Healthy New Year.

Cordially,

EWM:ba

encl.

Matt - ~~Sy I'll~~ call & tell them I'll attend on Friday. Thursday I can't go. ~~for~~ Ask if I can get a tape & I won't need a hotel room.

212 ~~421~~ 752-1621

TRAVEL VOUCHER

(Read the Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU DIVISION OR OFFICE: EOP

2. TYPE OF TRAVEL
- ☐ TEMPORARY DUTY
- ☐ PERMANENT CHANGE OF STATION

3. VOUCHER NO.

4. SCHEDULE NO.

5. TRAVELER (PAYEE)

a. NAME *(Last, first, middle initial)*: GREEN, MAX

b. SOCIAL SECURITY NO.

c. MAILING ADDRESS *(Include ZIP Code)*:
196 OEOB, The White House
Washington, D.C. 20500

d. OFFICE TELEPHONE NO.: 456-6270

e. PRESENT DUTY STATION

f. RESIDENCE *(City and State)*

6. PERIOD OF TRAVEL

a. FROM	b. TO
9-26-86	9-26-86

7. TRAVEL AUTHORIZATION

a. NUMBER(S)	b. DATE(S)
6889	9-26-86

8. TRAVEL ADVANCE

a. Outstanding	
b. Amount to be applied	
c. Amount due Government *(Attached: ☐ Check ☐ Cash)*	
D. Balance outstanding	

9. CASH PAYMENT RECEIPT

a. DATE RECEIVED

b. AMOUNT RECEIVED $

c. PAYEE'S SIGNATURE

10. CHECK NO.

11. PAID BY

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side.)*

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)	POINTS OF TRAVEL TO (f)

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 ▶ X Max Green 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 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

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

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 ▶ DATE

17. *FOR FINANCE OFFICE USE ONLY* COMPUTATION $

a. DIFFERENCES, IF ANY *(Explain and show amount)*

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

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol)*: $

d. NET TO TRAVELER ▶ $

18. ACCOUNTING CLASSIFICATION

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) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost. *(h)* Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals). *(i)* Complete for per diem and actual expense travel. *(j)* Show total subsistence expense incurred for actual expense travel. *(m)* Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lesser of the amount from col. (j) or maximum rate. *(n)* Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE ___ OF ___ PAGES

TRAVEL AUTHORIZATION NO.

TRAVELER'S LAST NAME GREEN

DATE 19 86 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanations of expense) (c)	BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: ¢ NO. OF MILES (k)	MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
9/26	2 pm	Depart WH en route to Baltimore											
	3 pm	Arrive Baltimore											5.00
9/26	6 pm	Depart Baltimore											
	7 pm	Arrive Silver Spring (Residence)											
		PLEASE NOTE: Mr. Green did not take the train as initially planned. Instead, he got a ride with Richard Straus. Mr. Green paid $5.00 for parking. The receipt was lost.											
									SUBTOTALS ▶				
									TOTALS ▶				

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

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

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

TOTAL AMOUNT CLAIMED ▶ 5.00

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

No. 6890

(TRAVELER TO COMPLETE SECTIONS 1-8.) Date of Request 9-29-86

1. **TRAVELER**

Name: MAX GREEN ☒ White House Staff

Extension: 6270 Room: 196 ☐ Other ______

2. **PURPOSE(S) and DATE(S):** October 14, 1986

To address major Jewish groups and explain Administration's policies to leaders of the groups.

3. **ITINERARY** Washington to New York City to Boston to Washington

(List all cities where stopover occurs.)

This travel is to be paid for by the American Jewish Committee, New York, NY a 501(c)(3) organization

4. **DEPARTURE:**

Date: 10-14-86

Time: 9:00 a.m.

Mode: Air

RETURN:

Date: 10-15-86

Time: 8:00 a.m.

Mode: Air

5. **NATURE:** ☒ 100% Official ☐ 100% Political

6. **SIGNATURES:**

Traveler: ______

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

______
Department Head

______
Approving Officer
(Special Assistant to the President for Administration)

7. **ESTIMATED COSTS:**

No. of Days Per Diem ______

Hotel Name ______

Hotel Daily Rate $______

Other ______

SPECIAL EXPENSES:

☐ Registration Fee of $______

☐ Commercial Car Rental

☐ Excess Baggage

☐ Other ______

8. **TRAVEL ADVANCE REQUESTED:** ☐ YES ☐ No Amount: $______

Signature of Recipient: ______ Date: ______

REPAID: Amount ______ Date ______ Schedule ______ Balance this trip ______

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

GTR No. ______ Amount $______

(8/13/81)

TRAVELER'S COPY

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS, AS WELL AS THE FOLLOWING ADMINISTRATIVE POLICIES RELATING TO TRAVEL ADVANCES AND GOVERNMENT-ISSUED TICKETS

1. **ADVANCES FOR OFFICIAL TRAVEL ONLY**

   Cash travel advances will not be provided for political trips.

   Advances will not be provided to anyone with an outstanding unaccounted-for advance.

   Advances over $250 require 48-hours notice to White House Administrative Office, extension 2500, except in emergencies.

2. **ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS**

   Any travel advance which is not either repaid or accounted for in full by an expense voucher, within 15 days after return, will be repaid by a deduction from the Staff member's salary.

3. **GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY**

   Government-issued tickets shall not be requested or used for anything other than 100% official trip (i.e., no political or personal travel). The entire cost of any government-issued tickets that end being used for unofficial travel will be considered a personal travel advance and treated accordingly.

WITHDRAWAL SHEET
Ronald Reagan Library

Collection Name	*Withdrawer*
GREEN, MAX: FILES	MJD 11/14/2001
File Folder	*FOIA*
TRAVEL (1 OF 2)	F03-0020/06
	THOMAS
Box Number	
	80

DOC NO	*Document Type / Document Description*	*No of pages*	*Doc Date*	*Restrictions*
6	FORM TRAVEL VOUCHER	1	10/29/1986	B6

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

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

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

6. EXPENDITURES—*Continued*

Show appropriate code in col. (b):
A—Local travel
B—Telephone or telegraph, or
C—Other Expenses *(itemized)*

(Explain expenditures in specific detail.)

DATE 19 86 (a)	CODE (b)	(c) FROM	(d) TO	MILEAGE RATE ¢ / NO. OF MILES (e)	AMOUNT CLAIMED: MILEAGE (f)	FARE OR TOLL (g)	ADD. PERSONS (h)	TIPS AND MISCELLANEOUS (i)
8-1	A	WHITE HOUSE	415 2nd St NE			3 50		60
8-5	A	WHITE HOUSE	2nd + Mass NE			3 00		50
8-5	A	2nd + Mass NE	WHITE HOUSE			3 00		50
8-13	A	Pentagon	WHITE House			6 00		90
8-15	A	White House	415 2nd Ave, NE			2 50		50
8-22	A	STATE DEPT	WHITE House			2 25		35
9-11	A	415 2nd Ave, NE	WHITE House			2 50		50
9-9	A	W House	Pentagon			4 25		65
9-26	A	White House	21st + Mass NW			2 50		50
9-26	A	White House	21st + I Sts, NW			3 00		50
9-30	A	Metro Station, SS, MD	815 N. Belgrade SS, MD			6 00		90
10-1	A	Metro Station, SS, MD	815 N. Belgrade SS, MD			6 00		90
10-1	A	16 + K Sts	~~17~~ + G Sts NW			2 50		50
10-8	A	State Dept	WHITE House			2 50		50
10-8	A	WHITE HOUSE	STATE DEPT.			2 50		50
10-17	A	METRO STATION SS, MD	850 SLIGO Ave, SS, MD			2 50		50
10-17	A	850 Sligo Ave, SS, MD	Metro Station, SS, MD			2 50		50
			Total each column and enter on the front, subtotal line ▶			57 00		9 80

FARE AMOUNT $ 2.50

TRIP FROM Dupont Cir

TO White ...

... 19 ...

...cy 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 ... 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 ... payment or reimbursement to eligible individuals for allowable travel and/or other expenses incurred under appropriate ... reimbursements to the Government. The information will be used by Federal agency officers and employees who have ... be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, ... with the hiring or firing of an employee, the issuance of a security clearance, or ... (SSN) is solicited under the authority of the Internal Revenue Code (26 ... disclosure is MANDATORY on vouchers claiming ... instances; however, failure to provide

WITHDRAWAL SHEET
Ronald Reagan Library

Collection Name
GREEN, MAX: FILES

Withdrawer
MJD 11/14/2001

File Folder
TRAVEL (1 OF 2)

FOIA
F03-0020/06
THOMAS

Box Number

80

DOC NO	*Document Type* *Document Description*	*No of pages*	*Doc Date*	*Restrictions*
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C. Closed in accordance with restrictions contained in donor's deed of gift.

THE WHITE HOUSE OFFICE
OFFICIAL TRAVEL AUTHORIZATION

NO. 11516

Date of Request October 27, 1986

1. **TRAVELER:**

Name: Max Green ☒ White House Staff

Extension: 6270 Room: 196 ☐ Other: ______

2. **PURPOSE(s) and DATE(s):** November 16, 1986 - Speak before Union of American Hebrew Congregations Regional Biennial Workshop. Paid for by U.A.H. 501(c)(3) status confirmed by law library.

3. **ITINERARY:** Washington, DC to Princeton, New Jersey and return

(List all cities where stopovers occur.)

4.

DEPARTURE			RETURN		
Date:	Time:	Mode:	Date:	Time:	Mode:
11-16-86		Train	11-16		Train or air

5. **FUNDING SOURCE:**

☐ OFFICIAL ☐ POLITICAL ☒ 501 (c)(3) ☐ OTHER ______

6.

SPECIAL EXPENSES	TRAVEL ADVANCE REQUESTED
☐ Commercial Car Rental ☐ Taxi	☐ Yes ☐ No ☐ Amount $ ______
☐ Hotel Name: ______	Recipient's Signature: ______
☐ Other: ______	Date: ______

Please See Reverse Side for Further Instructions Regarding Travel Expenses

7. **TRAVELER'S SIGNATURE:** ______

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

8. **APPROVING SIGNATURES:**

Office Head: ______

Approving Official
(Political or Foreign Travel): ______

Deputy Assistant to the President
for Administration: ______

9. *FOR TRANSPORTATION OFFICE USE ONLY:*

Control No. ______ Account: ______

(5/10/85)

TRAVELER'S COPY

THIS APPROVAL IS SUBJECT TO ALL APPLICABLE GOVERNMENT LAWS AND REGULATIONS AS WELL AS THE FOLLOWING ADMINISTRATIVE TRAVEL POLICIES

1. <u>ADVANCES FOR OFFICIAL TRAVEL ONLY</u>

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   Advances over $250 require 48-hour notice to White House Administrative Office, Extension 2500.

2. <u>ADVANCES TO BE REPAID FROM SALARY AFTER 15 DAYS</u>

   Any travel advance which is neither repaid nor accounted for in full by an expense voucher within 15 days after return may be deducted from the staff member's salary.

3. <u>GOVERNMENT TICKETS FOR OFFICIAL TRAVEL ONLY</u>

   Government-issued tickets shall be used for official trips only (i.e., no political or personal travel). The entire cost of any government-issued tickets that are used for unofficial travel will be considered a personal travel advance and treated accordingly.

4. <u>TO OBTAIN REIMBURSEMENT, RECEIPTS ARE REQUIRED FOR ALL EXPENDITURES REGARDLESS OF THE AMOUNT</u>

5. <u>FOR DETAILED INFORMATION REGARDING TRAVEL REGULATIONS AND POLICIES, PLEASE REFER TO THE WHITE HOUSE TRAVEL HANDBOOK</u>
   (Additional copies available by calling Extension 2500.)