

Trips: Trips - 35

HS L 179:78



Dag Hammarskjöld's sand.

Trip to Congo 1960

Aug. 19

Voucher for Reimbursement of Expenses

TO BE COMPLETED BY CLAIMANT

Extra sheets should be attached with full explanation of lengthy or involved travel.

NOTE: Submit a separate Form F.10, "if eligible dependents have itineraries which differ from yours.
Subsistence may be subject to a reduction after 60 days under the Staff Rules.

Do you have eligible dependents residing with you at your official duty station? YES NO

COMMENTS OF
ADM./CERTIFYING
OFFICER
REGARDING
STOP-OVERS,
DELAYS,
ETC.

CITY AND COUNTRY OF DEPARTURE AND ARRIVAL	MODE OF TRAVEL	DATE			HOUR * AM/PM	NUMBER OF DAYS DURING WHICH MAJOR PORTION OF DAY WAS SPENT				RATE PER DAY IN SPE- CIAL AREAS	TOTAL SUB- SIS- TENCE IN SPE- CIAL AREAS
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DEP.: New York	JET	10	8	60							
ARR.: Leopoldville		11	8	60							
STOPOVER: "	OFFICIAL <input checked="" type="checkbox"/> PERSONAL <input type="checkbox"/>										
DEP.: "	JET	15	8	60							
ARR.: New York		16	8	60							
STOPOVER:	OFFICIAL <input type="checkbox"/> PERSONAL <input type="checkbox"/>										
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STOPOVER:	OFFICIAL <input type="checkbox"/> PERSONAL <input type="checkbox"/>										
* HOUR AM/PM should indicate time of departure from or arrival at airports, piers, or railroad stations. Any deviation from itinerary and standards of accommodations authorized by Form PT.8 and any stop-over not authorized thereby must be supported by full explanation; otherwise your claim may be reduced.					TOTAL NUMBER OF DAYS	6				TRANSIT ALLOWANCE	
					RATE PER DAY APPLICABLE	35				TERMINAL ALLOWANCE	
					SUBSISTENCE TOTALS	210					

REMARKS: (List names and ages of dependents, unused tickets, other explanations etc.)

TOTAL TRAVEL ALLOWANCE	\$\$ 210.00
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