

Trips: Trips - 49

HS L 179:78



Dag Hammarskjölds saml.

Trip to Geneva (ECOSOC) 1961 (collected)

July 18

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	TOTAL SUB- SIS- TENCE	
		D A Y	M O N T H	Y E A R		A B O A R D P L A N E S T R A I N S	I N N O N- S P E- C I- F I E D A R E A S	I N S P E- C I- F I E D A R E A S	I N S P E- C I A L A R E A S			I N S P E- C I A L A R E A S
DEP.: New York	AIR	8	7	61								
ARR.: Geneva		8	7	61								
STOPOVER: Geneva	OFFICIAL <input type="checkbox"/> PERSONAL <input type="checkbox"/>							7	<i>8-14/9/61</i>			
DEP.: Geneva	Air	15	7	61								
ARR.: New York		15	7	61						<i>15/14</i>	<i>last day.</i>	
STOPOVER:	OFFICIAL <input type="checkbox"/> PERSONAL <input type="checkbox"/>											
DEP.:												
ARR.:												
STOPOVER:	OFFICIAL <input type="checkbox"/> PERSONAL <input type="checkbox"/>											
DEP.:												
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STOPOVER:	OFFICIAL <input type="checkbox"/> PERSONAL <input type="checkbox"/>											
DEP.:												
ARR.:												
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	✓ 7					TRANSIT ALLOWANCE
RATE PER DAY APPLICABLE	✓ 35.00					TERMINAL ALLOWANCE
SUBSISTENCE TOTALS	✓ 245.00					<i>✓ \$245.00</i>

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

TOTAL TRAVEL ALLOWANCE *✓ \$245.00*