

TRAVEL VOUCHER

D. O. Vou. No. _____

Bu. Vou. No. _____

DEPARTMENT OF AIR FORCE—DEPARTMENT FINANCE

U. S. _____
 (Department, bureau, or establishment)

Payee's name _____

Mailing address _____

PAID BY
 J. M. HAYS, JR
 Maj USAF
 Finance Officer
 225-223
 10 MAR 1954

(Official duty station)

(Residence—For use by Postal Service employees only)

Travel and other expenses in the discharge of official duty from 26 Feb to 5 Mar 54 under authority

No. Feb 1 50 46 dated 26 Feb 54 copy of which is attached, or has been previously furnished. I have a travel advance of \$ _____ to which \$ _____ of this voucher should be applied.

MEMORANDUM

AMOUNT CLAIMED →

DOLLARS	Cents
22	56
Differences:	
NET AMOUNT TO TRAVELER	
22	56

(For Administrative Use)

APPROVED:

Total verified correct for charge to appropriation (s) (initials) _____

Applied to travel advance (appropriation symbol) _____

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

MEMORANDUM

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

Appropriation, Limitation, or Project Symbol	442-211	Appropriation Title (Optional)	774-999	Limitation or Project (Amount)	Appropriation (Amount)	
Allotment Symbol	Amount	Obligations Liquidated	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			Symbol	Amount	Symbol	Amount

Paid by Check No. _____

Dated _____

22.56

MEMORANDUM

COMPLETE ALL QUESTIONS. For questions not applicable insert the abbreviation N/A

LAST NAME <u>GREEN</u>	FIRST NAME <u>SMITH</u>	MI <u>L.</u>	GRADE <u>CWO</u>	SERIAL NUMBER [REDACTED]
TRAVEL ORDERS:	PAR <u>1</u>	SO <u>46</u>	HQ <u>21ST AIR DIVISION (SAC)</u>	DTD <u>26 FEB 54</u>

1. Is your name and serial number correct as shown on special orders yes no
2. If the answer to question 1 is yes, underline your name and serial number, and circle the paragraph on two copies of the special orders.

3. What was your last permanent station?
FORBES AFB, TOPEKA, KANSAS

4. Did you receive an advance travel payment at your last station? yes no
If answer is yes, show the amount and the date of payment

5. How did you travel from your last station to Scott AFB, ILL?
If Government T/R's, require memo copies of SF 1030, Transportation Request. PRIVATE OWNED CAR

6. When did you depart your last station? DATE 26 FEB 54 TIME 1415

7. When did you report to this base? DATE 5 MAR 54 TIME 1900

8. Are you claiming dependent travel? yes no If answer is yes, have the dependents completed the travel?

CLAIM IS MADE FOR

<input checked="" type="checkbox"/>	MILEAGE FOR SELF FROM LAST STATION TO SCOTT AFB, ILLINOIS.
<input type="checkbox"/>	MILEAGE FROM LAST STATION TO SCOTT AFB, ILLINOIS FOR SELF AND DEPENDENTS.
<input type="checkbox"/>	OTHER

I certify that the information listed hereon is true and correct and that such information will become a part of the voucher on which reimbursement for travel is claimed.

Smith L. Green
SIGNATURE OF PAYEE

FOR USE OF FINANCE OFFICE ONLY

<u>376</u>	MILES @ 6¢ PER MILE	\$ <u>22.56</u>	FOR MEMBER <input checked="" type="checkbox"/>
	MILES @ 6¢ PER MILE	\$	FOR DEPENDENTS
	MILES @ ¢ PER MILE	\$	FOR
	DAYS @ \$ PER DAY	\$	
GRAND TOTAL TO FACE OF VOUCHER		\$ <u>22.56</u>	
APPN NO.	CHARGE \$		
[REDACTED]	<u>22.56</u>		
TRAVEL CLERKS INITIALS	AUDIT INITIALS		
<u>JK</u>			