

REVIEWED BY JC [Signature]
 DATE 18 Mar 93

DSN 738-0681

NY

5

VEL VOUCHER OR SUBVOUCHER				(Complete by typewriter, ink, or ball point pen: PRESS HARD! do not use pencil)				10. FOR DO USE ONLY		
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM								DO VOUCHER NO.		
LAST NAME, FIRST NAME-MIDDLE INITIAL, (Print Type)				GRADE, RANK, SEN				SUBVOUCHER NO.		
CHECK MAILING ADDRESS (Include ZIP Code)				DUTY PHONE NO.				PAID BY		
[Redacted]				DSN 738-0681				AGTX-OTM-D		
ORGANIZATION AND STATION								19 MAR 1993 RECEIVED		
36TH MAINT CO, TXARNG, GATESVILLE, TX 76528								AGTX-OTM-D		
TRAVEL ORDERS (Paragraph, S.O. No., Issuing Hq., Date) (Include amending orders)								25 28 MAR 1993 DATE OUT		
ORD# 042-215 DTD: 03 MARCH 1993								COMPUTATIONS		
PRIOR TRAVEL PAYMENTS OR ADVANCES UNDER THESE ORDERS (Amount, DO Voucher No., Date received, Place paid, or DO Station No. If none, so state)										
NONE										
1. ITINERARY (See Item 23 for Symbols)										
DATE	LOCAL TIME	PLACE	MODE OF TRAVEL	REASON FOR TRIP	COST OF LODGING	GOVT DED*	OPEN MEALS	POC MILES		
19 93		Roma, Office, Base, Activity, City and State, City and Country, etc.)								
28 FEB	DEP 1500	GATESVILLE, TX	GA							
28 FEB	ARR 1700	MT. CARMEL	TD							
02 MAR	DEP 1400	WACO, TX	GA		NONE		0			
02 MAR	ARR 1600	GATESVILLE, TX	MC							
DEP										
ARR										
DEP										
ARR										
DEP										
ARR										
DEP										
ARR										
DEP										
ARR										
8. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS* (See Item 24)										
DATE	NATURE AND EXPLANATION				AMT. CLAIMED	ALLOWED				
	NONE									
6 Long distance telephone calls are certified as necessary in the interest of the Government.								APPROVING OFFICER (31 USC 680a)		
7. TRAVEL TRAVEL (If none, so state)								SUMMARY OF PAYMENT		
NUMBER	FROM					TO			Per Diem	
		NONE							Actual Expense	
								Mileage or Transp Allowances		
								Reimbursable Expenses		
								Total Entitlement		
								Less Previous Payments		
								Less Voucher Deductions		
								Amt. Charged to Acctg. Class		
								11. PAYMENT DESIRED		
								<input checked="" type="checkbox"/> CHECK <input type="checkbox"/> CASH		
8. LEAVE STATEMENT: _____ days _____ hours taken between _____ and _____								12. <input checked="" type="checkbox"/> PER DIEM REQUESTED		
9. POC TRAVEL: <input type="checkbox"/> OWNER/OPERATOR (See Item 23d) <input type="checkbox"/> PASSENGER								13. BAS RATE		
PENALTY: The penalty for willfully making a false claim is: A MAXIMUM FINE OF \$10,000 OR MAXIMUM IMPRISONMENT OF 5 YEARS, OR BOTH (U.S. Code, Title 18, Section 287.)										
I hereby claim any amount due me. The statements on face, reverse, and attached are true and complete. Payment or credit has not been received.										
18. PRINTING CLASSIFICATION										
16. COLLECTION DATA										
17. COMPUTED BY			18. AUDITED BY			19. TVL RCAD POSTED			20. RECEIVED/Date	

REVIEWED BY *[Signature]*
DATE *18 MAR 93*

MILITARY

DSN 738-0681

TRAVEL VOUCHER OR SUBVOUCHER <small>(Complete by typewriter, ink, or ball point pen; PRESS HARD! do not use pencil)</small>		1a. FOR DO USE ONLY	
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM		OO VOUCHER NO.	
NAME (FIRST NAME, MIDDLE INITIAL, (Last Name)) GRADE/RANK/ASN		SUBVOUCHER NO.	
CHECK MAILING ADDRESS (Include ZIP Code)		PAID BY	
DUTY PHONE NO. DSN 738-0681		AGTX-OTM-D	
ORGANIZATION AND STATION HHD, 111TH SPT BN, TXARNG, SAN ANTONIO, TX 78285		19 MAR 1993 RECEIVED	
TRAVEL ORDERS (Paragraph, S.O. No., Issuing Hq., Date) (Include amending orders) ORD # 042-214 DTD: 03 Mar/049-067 DTD: 12 Mar 93		AGTX-OTM-D	
PRIOR TRAVEL PAYMENTS OR ADVANCES UNDER THESE ORDERS (Amount, DO Voucher No., Date received, Place paid, or DO Station No. If none, so state) NONE		23 28 MAR 1993 DATE OUT	
1. ITINERARY (See Item 23 for Symbols)			
DATE	LOCAL TIME (24 Hour Clock)	PLACE (Home, Office, Base, Activity, City and State, City and Country, etc.)	MODE OF TRAVEL
28 FEB	DEP 1500	GATESVILLE, TX	GA
28 FEB	ARR 1700	MT. CARMEL	TD
07 MAR	DEP 1400	WACO, TX	GA
07 MAR	ARR 1600	GATESVILLE, TX	MC
	DEP		
	ARR		
	DEP		
	ARR		
	DEP		
	ARR		
	DEP		
	ARR		
	DEP		
	ARR		
2. COST OF LODGING			
3. NUMBER OF MEALS			
4. POC MILES			
5. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS* (See Item 24)			
DATE	NATURE AND EXPLANATION		AMT. CLAIMED
6. Long distance telephone calls are certified as necessary in the interest of the Government.			APPROVING OFFICER (31 USC 640a.)
7. TRS/MTA'S/MT'S (If none, so state)			SUMMARY OF PAYMENT
NUMBER	FROM	TO	Per Diem
			Actual Expense
			Mileage or Transp Allowances
			Reimbursable Expenses
			Total Entitlement
			Less Previous Payments
			Less Voucher Deductions
			Amt. Charged to Acctg. Class
8. LEAVE STATEMENT: _____ days _____ hours taken between _____ and _____			11. PAYMENT DESIRED
9. POC TRAVEL: <input type="checkbox"/> OWNER/OPERATOR (See Item 22d) <input type="checkbox"/> PASSENGER			<input checked="" type="checkbox"/> CHECK <input type="checkbox"/> CASH
PENALTY: The penalty for willfully making a false claim is: A MAXIMUM FINE OF \$10,000 OR MAXIMUM IMPRISONMENT OF 5 YEARS, OR BOTH (U.S. Code, Title 18, Section 287.)			12. <input checked="" type="checkbox"/> PER DIEM REQUESTED
I hereby claim any amount due me. The statements on face, reverse, and attached are true and complete. Payment or credit has not been received.			13. BAS RATE
15. ACCOUNTING CLASSIFICATION			DATE 18 Mar 93
COLLECTION DATA			
17. COMPUTED BY	18. AUDITED BY	19. TVL RCRD POSTED BY	20. RECEIVED (Payee signature and date or check no.)
			21. AMOUNT PAID

STATE OF TEXAS
ADJUTANT GENERAL'S DEPARTMENT
POST OFFICE BOX 5218
AUSTIN, TEXAS 78763-5218

ORDERS 053-140

18 March 1993

HHC 3/112TH AR

(PDZTO-150)

You are ordered to active duty for special work (ADSW) for the period shown plus allowable travel time. Upon completion of the period of ADSW unless sooner released or extended by proper authority, you will return to the place where you entered ADSW and be released from such duty.

Period (TDY) : 16 March 1993 - 21 March 1993

Report to: UNIT ARMORY/FURTHER ATTACHED TO TEXAS JOINT TASK FORCE ONE

Reporting time/date: 0730 16 March 1993

Purpose: SUPPORT AGTX-CD OPERATIONS (PU)

Additional instructions:

- (a) Enlisted personnel are authorized BAS at the RNA rate.
- (b) Individual must comply with standards in AR 600-9.
- (c) TCMJ authority is granted to attached unit. However, during IDT assemblies, parent unit has TCMJ authority.
- (d) Soldier terminates ADSW status 2400 hrs on the day prior to AT and automatically reverts to ADSW status 0001 hrs on the day following the AT period. Performance of AT does not constitute a break in service; accrued leave and all other appropriate entitlements are continued. VHA is not payable during the AT period.
- (e) This training is considered an event and individual's unit will not process payroll.
- (f) Government quarters and mess will be utilized. Travel by privately owned conveyance is authorized.

FOR ARMY USE

Auth: Subsec 502(f) Title 32 USC, AGTX-CD Confirms verbal orders
of the Adjutant General,

HOR

Type duty code: 40E Active Duty Special Work

Acct clas:

Enl pay/alw/tvl/pd:

2132060 18-1041 P2M31.1100-1198/1199/1210/1250/211J/219J S41292 CTD PDZTO

PEBD: 800815

Federal WE: M00

Marital status / Number of dependents: M03

Type of incentive pay: NONE

Type of special pay: NONE

State tax code: TX

Scty cl: NONE

Format: 282

Z 0025185

STATE OF TEXAS
ADJUTANT GENERAL'S DEPARTMENT
POST OFFICE BOX 5218
AUSTIN, TEXAS 78763-5218

ORDERS 053-144

18 March 1993

Following order is amended as indicated.

So much of: Orders 049061 this Hq dtd 12 March 1993

Pertaining to:

ADSW for [REDACTED] CO B (-) 536TH SPT BN
(V54B0-548)

As reads: Period (TDY): 07 March 1993 - 15 March 1993
How changed: Period (TDY): 07 March 1993 - 21 March 1993
Auth: Subsec 502(f) Title 32 USC, AGTX-CD
Type duty code: 40E Active Duty Special Work
Format: 700

FOR THE ADJUTANT GENERAL:

////////////////////////////////////
// HQ, ARNG //
// OFFICIAL //
////////////////////////////////////

DISTRIBUTION:
TX-CD (5)
IX-SCF (2)
PARENT UNIT (5)

[REDACTED]
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