



ADJUTANT GENERAL'S DEPARTMENT

Post Office Box 5218  
Austin, Texas 78763-5218  
512-465-5001

AGTX-CD (600)

02 March 1993

MEMORANDUM FOR

COMMANDER, 49TH ARMORED DIVISION, P.O. BOX 5218, AUSTIN, TEXAS  
78756-5218

COMMANDER, TROOP COMMAND, P.O. BOX 5218, AUSTIN, TEXAS 78758-5218

SUBJECT: Memorandum of Instruction for Submitting DD FORM 1351-2  
for TDY Associated with ACTX-CD Operations Beginning 28 February  
1993.

1. All reimbursement claims for TDY conducted in support of AGTX-CD operations in Waco, Texas, beginning 28 February 1993, must be submitted directly to AGTX-CD. Each individual placed on ANSW orders for the above purpose will follow the attached instructions for submitting DD FORM 1351-2 for TDY reimbursement.

① 2. Point of contact is [REDACTED] at Commercial (512) 465-5517 or DSN 954-5517.

②

#413

Attachment  
as

DL1427 MAR 93

(2)

(U N C L A S S I F I E D)

EXECUTIVE SUMMARY 02 MARCH 1993

(U) Texas ARNG Participation in Waco, Texas (NGB-ARO-OC) (U)

The Texas ARNG has withdrawn the majority of the soldiers who have supported the ongoing hostage situation in Waco, Texas. After training FBI and ATF agents to operate the Bradley Fighting Vehicles, TXARNG has reduced their force to a support group of 15 personnel (4 officers, and 11 enlisted). Personnel are performing the following duties: [6 maintenance, 3 command and control, [4 counter drug,] and 2 bus drivers. All of the personnel were placed on ADSW Title 32 orders. No ARNG soldiers were placed on state active duty (SAD). Equipment retained: 7 BRADLEYs, 4 Tractor Trailer rigs, 1 8-passenger van, and 2 buses. A UH-60 has just landed to further support operations.

At this point the incident is still ongoing but 16 hostages have been released. Control of the operation has been returned back to ATF by the FBI. All TXARNG personnel remain at least 10 miles away from the compound. The Army National Guard Operations Center (NGB-ARO-OC) remains in contact with the Command Center and continues to monitor CNN for additional information.

D

██████████ NGB-ARO-OC/DSN 327-9350

Approved by ██████████

(U N C L A S S I F I E D)

C2

NGB-ARO-OPS/EOC

ID:703-607-7386

MAR 03 '93 15:51 No.011 P.03

4. TEXAS

(Federal Law Enforcement Support)

WACO

**SITUATION:** ATF Agents investigating a religious cult in the vicinity of Waco, TX, became involved in a shootout with well armed cult members. The ATF and FBI are currently at a stand off with the cult and are negotiating a surrender.

**MISSION:** Provide military support in the form of equipment and operational training on such equipment. Commenced 28 FEB 93. No projected end date.

**PERSONNEL:** 6 ARNG/SAD

**EQUIPMENT:**

- 4 each Bradley Fighting vehicles
- 4 each tractor trailers
- 1 each 8 passenger van
- 2 each 45 passenger vans
- 1 each UH60 helicopter

① [REDACTED] (703) 607-9354  
Approved by

② [REDACTED]

C3

D- 988

8 Bradleys to law-enf. agencies  
in Waso

Can we do it?

Coch 10 USC § 371 1

NWS  
Radio

Reimburse fm?  
(Maintenance pt.)

No Crews

D-1493

## PERMISSIBLE ACTIONS

### **YOU MAY --**

- \* *Train* civilian law enforcement officials
- \* *Maintain* equipment
- \* *Drive* equipment to Waco

### **YOU MAY NOT --**

- \* *Operate* the equipment in support of civilian law enforcement operations



DEPARTMENT OF THE ARMY  
HEADQUARTERS, 1ST CAVALRY DIVISION  
FORT HOOD, TEXAS 76545-5101



REPLY TO  
ATTENTION OF

AFVA-JA

2 MAR 1993

MEMORANDUM FOR Chief of Staff

SUBJECT: Loan of Equipment to Civilian Law Enforcement Agencies

1. OVERVIEW. This responds to your request for a legal opinion regarding the loan of equipment (e.g., Bradleys, NVGs, radios) to civilian law enforcement officials in Waco, Texas. Assuming the appropriate level of approval and reimbursement for the associated costs, the loan of equipment is not legally objectionable.

2. DISCUSSION.

a. General Rule. While the Posse Comitatus Act<sup>1</sup> generally prohibits the use of Army personnel to enforce the civil laws, it does not proscribe the loan of Army equipment to civilian law enforcement agencies. Federal statute expressly authorizes the Secretary of Defense to make available any equipment to civilian law enforcement officials for law enforcement purposes.<sup>2</sup>

b. Approval Authority. FORSCOM must forward requests for the Bradleys to HQDA (DALO-SMS).<sup>3</sup> [REDACTED] can approve requests for equipment other than arms, ammunition, and combat and tactical vehicles and aircraft, if the requested duration of the loan is less than 180 days.<sup>4</sup>

c. Reimbursement. Federal statute generally requires the Secretary of Defense to seek reimbursement for equipment furnished to civilian law enforcement agencies.<sup>5</sup> The Economy

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<sup>1</sup>18 U.S.C. § 1365.

<sup>2</sup>10 U.S.C. § 372. See also 10 U.S.C. § 374, which permits military personnel to maintain the equipment and, under limited circumstances, to operate it.

<sup>3</sup>Dep't of Army Reg. No. 700-131, Loan & Lease of Army Materiel, para. 2-5e(1) (Feb. 15, 1985) [hereafter AR 700-131]; Dep't of Army Reg. No. 500-51, Support to Civilian Law Enforcement, para. 2-5b(1) (July 1, 1983) [hereafter AR 500-51].

<sup>4</sup>AR 700-131, para. 2-5e(3).

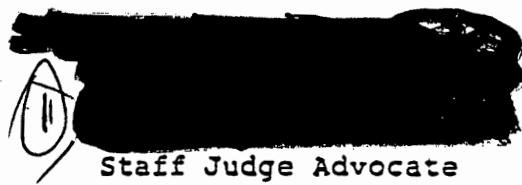
<sup>5</sup>10 U.S.C. § 377(a). Excepted from this requirement is support to agencies that (1) is provided in the normal course of (continued...)

AFVA-JA

SUBJECT: Loan of Equipment to Civilian Law Enforcement Agencies

Act<sup>6</sup> governs reimbursement for equipment loaned to other federal agencies. Generally, costs in addition to normal Army operating expenses must be reimbursed by the borrowing agency. Reimbursable costs include overtime pay of civilian personnel; travel and per diem expenses; transportation costs; packing, crating, handling, and shipment costs; petroleum, oil, and lubricants; the cost of materiel lost, damaged, or destroyed; and repair parts used in maintenance or renovation.<sup>8</sup>

3. CONCLUSION. Assuming the requisite approval and subsequent reimbursement of permissible costs, the 1st Cavalry Division may lawfully loan equipment to federal civilian law enforcement agencies in Waco, Texas.

  
Staff Judge Advocate

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<sup>5</sup>(...continued)

military training or operation, or (2) results in a benefit to the element providing the support that is substantially equivalent to that which would otherwise be obtained from military operations or training. Id. § 377(b).

<sup>6</sup>31 U.S.C. § 1535.

<sup>7</sup>AR 700-131, para. 5-1a(2); AR 500-51, para. 4-4a.

<sup>8</sup>AR 700-131, para. 5-2.

March 2, 1993

Office of the Staff Judge Advocate

Mr. Rick Bradfield  
News Director  
KWTX  
Box 2636  
Waco, TX 76702

Dear Mr. Bradfield:

This letter is in follow on to our telephone conversation earlier today regarding a request for video tape.

Special Forces Command's purpose is to train and validate Special Forces soldiers for world-wide deployment. The Special Forces mission includes counter-terrorism (hostage rescue).

CBS News footage broadcast nationally on February 28 and March 1, 1993 of the approach, assault, and casualty evacuation from the cult house near Waco, by federal agents, is particularly valuable as instructional material in the training of Special Forces soldiers.

Subject to your licensing and copyright restrictions, request a copy of all "raw (unedited) footage" which details the assault element's approach to the house, efforts by the assault element to breach the structure, actions by the assault element when they came under fire, and subsequent efforts to evacuate casualties (both law enforcement and civilian) from the area.

It would be particularly useful for instructional purposes if the tape did not have commentary that was not contemporaneous with the making of the tapes (I believe this is called "voice over").

Again, we will honor limitations you place on dissemination of the tape. The material will be used only for instructional purposes in the hopes of saving soldiers' lives. I can provide blank tapes or replace any tapes you send. If fees are associated with this request please advise me.

Thanking you in advance for your time and consideration, I am,

Respectfully yours,

A large rectangular area of the document has been completely blacked out with a red marker, obscuring a signature.

00021659

UNCLASSIFIED

DJ 02 MAR 93 PP UUUU

HQDA WASHINGTON DC//DAMO-ODS//

CNGB WASHINGTON DC//ARO-0//

INFO OSD WASHINGTON DC

CJCS WASHINGTON DC

CSA WASHINGTON DC

TAG TX AUSTIN TEXAS

FBI WASHINGTON DC

CNGB WASHINGTON DC//ARO-0M//

UNCLAS

FOUO

MSGID/ORDER/ASSISTANT SECRETARY OF THE ARMY (INSTALLATIONS,  
LOGISTICS, AND ENVIRONMENT)

SUBJECT: LOAN OF COMBAT ENGINEER VEHICLES (CEV) M728 TO FBI

A. AR 700-131, LOAN AND LEASE OF ARMY MATERIEL, 4 SEP 87.

B. AR 500-51, SUPPORT TO CIVIL LAW ENFORCEMENT, 1 AUG 83.

1. THIS IS AN EXECUTE ORDER. THE ACTING ASA(IL&E) HAS APPROVED THE  
LOAN OF TWO CEV'S TO THE FBI.

2. IAW REFERENCES A AND B, REQUEST YOU COORDINATE WITH TAG TEXAS TO  
PROVIDE THE FEDERAL BUREAU OF INVESTIGATION IN WACO, TEXAS, WITH TWO  
CEV'S NLT 082000 (CST) MAR 93. THE CEV'S WILL BE LOANED TO FBI

D  
GS

COMEBACK COPY REQUESTED

2  
CHIEF, MILITARY SUPPORT DIVISION

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TR. P

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Z 0023103

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02 02 MAR 93 PP UUUU

WITHOUT OPERABLE WEAPONS SYSTEMS. ALL ARMY MARKINGS WILL BE OBSCURED. FBI DRIVERS WILL OPERATE VEHICLES. APPROPRIATE MAINTENANCE PACKAGE SHOULD ACCOMPANY VEHICLES, BUT ARNG PERSONNEL WILL NOT BE ON BOARD DURING OPERATIONAL MISSIONS AND WILL NOT ASSIST IN ANY ASPECT OF CIVIL LAW ENFORCEMENT.

3. A STANDARD DOD LOAN AGREEMENT WILL BE COMPLETED PRIOR TO RECEIPT OF THE EQUIPMENT TO THE FBI. ALL USE IS REIMBURSABLE UNDER THE PROVISIONS OF THE ECONOMY ACT. THE FBI WILL ALSO PAY MAINTENANCE PERSONNEL PER DIEM AND ALL OTHER IDENTIFIABLE DIRECT AND INDIRECT COSTS. FBI POINT OF CONTACT TO COORDINATE LOAN IS SPECIAL AGENT JIM SHINE AT FBI HQ (202-324-6700). REQUEST FOR REIMBURSEMENT SHOULD BE FORWARDED TO FBI HEADQUARTERS, 10TH AND PENNSYLVANIA AVENUE, NW, ATTN: ASSISTANT DIRECTOR DIVISION 3, SUPPORT OF MC 80. THE DURATION OF THIS OPERATION HAS NOT BEEN DETERMINED.

4. HQDA POC IS [REDACTED] DSN 227-4331, CML 703-697-4331.

*met*

UNCLASSIFIED

TEL:

MAR 02 93 15:34 NO.008 P.02



DEPARTMENTS OF THE ARMY AND THE AIR FORCE

NATIONAL GUARD BUREAU

OFFICE OF THE UNITED STATES PROPERTY AND FISCAL OFFICER, TEXAS

P.O. BOX 5218

AUSTIN, TEXAS 78763-5218

MEMORANDUM OF AGREEMENT (MOA)

BETWEEN

UNITED STATES PROPERTY AND FISCAL  
OFFICER FOR TEXAS

AND THE

FEDERAL BUREAU OF ALCOHOL, TABACCO, AND FIREARMS

SUBJECT: MEMORANDUM OF AGREEMENT FOR THE REIMBURSEMENT OF  
SUPPLIES AND SERVICES

1. Purpose: The purpose of this agreement is to establish reimbursement procedures for supplies and services provided by the Texas Army National Guard to the Bureau of Alcohol, Tabacco, and Firearms in support law enforcement operations vicinity Waco, Texas, March 1993.

2. Description of Services.

a. Subsistence - Meals, Ready to Eat (MRE)

b. Petroleum, Oil and Lubricant to support military vehicles loaned for the operations

c. Other services agreed upon by representatives of both agencies.

3. Funding and Reimbursement. The following BATF fund account code will be used by the Texas Army National Guard to bill reimbursement: 93-531004-624-2116 MISC

Billing will be submitted to: ATF - 15355 VANTAGE PKWY WEST, SUITE 210  
HOUSTON, TEXAS 77032 ATTN: SAC

4. This agreement is effective on the date agreed to and signed by both parties. Questions concerning this agreement should be addressed to [REDACTED], AGTX-SL, (512) 465-5873.

(2) [REDACTED]  
MATES Superintendent

(3) [REDACTED]  
Bur [REDACTED] abacco,

EXHIBIT



DEPARTMENTS OF THE ARMY AND THE AIR FORCE

NATIONAL GUARD BUREAU

OFFICE OF THE UNITED STATES PROPERTY AND FISCAL OFFICER, TEXAS

P.O. BOX 5218

AUSTIN, TEXAS 78763-5218

MEMORANDUM OF AGREEMENT (MOA)  
BETWEEN  
UNITED STATES PROPERTY AND FISCAL  
OFFICER FOR TEXAS  
AND THE  
FEDERAL BUREAU OF INVESTIGATION

SUBJECT: MEMORANDUM OF AGREEMENT FOR THE REIMBURSEMENT OF SUPPLIES AND SERVICES

1. Purpose: The purpose of this agreement is to establish reimbursement procedures for supplies and services provided by the Texas Army National Guard to the Federal Bureau of Investigation in support law enforcement operations vicinity Waco, Texas, March 1993.

2. Description of Services. a. Subsistence - Meals, Ready to Eat (MRE).

b. Petroleum, Oil and Lubricant to support military vehicles loaned for the operations

c. Other services agreed upon by representatives of both agencies.

3. Funding and Reimbursement. The following FBI fund account code will be used by the Texas Army National Guard to bill reimbursement: 1530240. This amount shall not exceed \$19,000 Total without written modification of MOA/MOU. Billings will be submitted to: FBI, JEH Bldg, Rm 6345, 10th Street & Pennsylvania Avenue, NW, Washington, D.C., 20535.

4. This agreement is effective on the date agreed to and signed by both parties. Questions concerning this agreement should be addressed to [redacted], AGTX-SL, (512) 405-5973.

Texas Army National Guard

2 March 1993

DATE

FBI, Contracting Officer

3/3/93

DATE

\*\* TOTAL PAGE.002 \*\*

Z 0007884



DEPARTMENTS OF THE ARMY AND THE AIR FORCE  
NATIONAL GUARD BUREAU  
OFFICE OF THE UNITED STATES PROPERTY AND FISCAL OFFICER, TEXAS  
P.O. BOX 5218  
AUSTIN, TEXAS 78763-5218



MEMORANDUM OF AGREEMENT (MOA)  
BETWEEN  
UNITED STATES PROPERTY AND FISCAL  
OFFICER FOR TEXAS  
AND THE  
FEDERAL BUREAU OF INVESTIGATION

SUBJECT: MEMORANDUM OF AGREEMENT FOR THE REIMBURSEMENT OF SUPPLIES AND SERVICES

1. Purpose: The purpose of this agreement is to establish reimbursement procedures for supplies and services provided by the Texas Army National Guard to the Federal Bureau of Investigation in support law enforcement operations vicinity Waco, Texas, March 1993.

2. Description of Services. a. Subsistence - Meals, Ready to Eat (MRE)

b. Petroleum, Oil and Lubricant to support military vehicles loaned for the operations

c. Other services agreed upon by representatives of both agencies.

3. Funding and Reimbursement. The following FBI fund account code will be used by the Texas Army National Guard to bill reimbursement: 1530200. This amount shall not exceed \$10,000, total without written modification of MOA/MOU. Billings will be submitted to: FBI, JEH Bldg, Rm 6845, 10th Street & Pennsylvania Avenue, NW, Washington, D.C., 20535.

4. This agreement is effective on the date agreed to and signed by both parties. Questions concerning this agreement should be addressed to [REDACTED] (512) 465-5073. 4,5,5,5,4-5,5,5-5,5-

2) [REDACTED]  
Texas Army National Guard

3) [REDACTED]  
FBI, Contracting Officer

DATE

DATE

AIRCRAFT TECHNICAL INSPECTION WORKSHEET											
For use of this form, see DA PAM 738-751. The proponent agency is DCSLOG.											
1 ORGANIZATION AAASF Austin, TX 78723-3097			2 NOMENCLATURE AND MODEL HELICOPTER UH-60A			3 SERIAL NUMBER 9126319		4 TYPE INSPECTION TI TB 43-0002-3			
PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION					
X	STATUS	SYS	DATE 2 Mar 93	NO	TIME	PID	DATE	TIME	HRS		
							ROUNDS	ACTION CODE	WUC		
FAULT REMARKS Technical Inspection Inspected by [REDACTED]						ACTION _____					
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH	
W/O		REQ		OTHER			TIPID		TI MAN-HOURS		
X	STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS		
							ROUNDS	ACTION CODE	WUC		
FAULT REMARKS Bullet entry hole skin damage at STA 503 WL 215						ACTION _____					
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH	
W/O		REQ		OTHER			TIPID		TI MAN-HOURS		
X	STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS		
							ROUNDS	ACTION CODE	WUC		
FAULT REMARKS Bullet hole in frame of tail section at STA 525 WL 225						ACTION _____					
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH	
W/O		REQ		OTHER			TIPID		TI MAN-HOURS		
X	STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS		
							ROUNDS	ACTION CODE	WUC		
FAULT REMARKS Bullet hole in frame of tail section at STA 545 WL 229						ACTION _____					
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH	
W/O		REQ		OTHER			TIPID		TI MAN-HOURS		
FOD REMINDER: Check work area for tools and parts after completion of maintenance and inspection											

DA FORM 2408-13-3, NOV 91

Encl +

Z 0009609

PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION					
X	STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS		
FAULT/REMARKS Bullet hole in left side of Inverter						ACTION CODE WUC					
<i>733.</i>											
A/C HRS	WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH	
W.O.	REQ		OTHER				TIPD	TI MAN-HOURS			
X	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS		
FAULT/REMARKS Bullet hole in left side of aircraft at STA FS 173.0 WL 68						ACTION CODE WUC					
A/C HRS	WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH	
W.O.	REQ		OTHER				TIPD	TI MAN-HOURS			
X	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS		
FAULT/REMARKS Bullet hole in rib left side of A/C at STA FS 192.0 WL 71.0						ACTION CODE WUC					
A/C HRS	WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH	
W.O.	REQ		OTHER				TIPD	TI MAN-HOURS			
X	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS		
FAULT/REMARKS Bullet hole in stringer at left side of aircraft at FS 192.0 WL 71.0						ACTION CODE WUC					
A/C HRS	WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH	
W.O.	REQ		OTHER				TIPD	TI MAN-HOURS			
X	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS		
FAULT/REMARKS Bullet exit hole at FS 186.0 WL 72.18 BL 1.0 aft and below oil tank						ACTION CODE WUC					
A/C HRS	WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH	
W.O.	REQ		OTHER				TIPD	TI MAN-HOURS			

## AIRCRAFT TECHNICAL INSPECTION WORKSHEET

For use of this form, see DA PAM 738-751, the proponent agency is DCSLOG

1. ORGANIZATION		2. NOMENCLATURE AND MODEL			3. SERIAL NUMBER		4. TYPE INSPECTION			
PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION				
<input checked="" type="checkbox"/>	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS	
FAULT/REMARKS Bullet hole in oil tank bracket aft right leg.						ROUNDS	ACTION CODE	WUC		
						ACTION				
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ		OTHER			TIPD		TI MAN-HOURS	
<input checked="" type="checkbox"/>	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS	
FAULT/REMARKS Bullet hole in aft fairing 1½ inch above oil tank drain access door.						ROUNDS	ACTION CODE	WUC		
						ACTION				
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ		OTHER			TIPD		TI MAN-HOURS	
<input checked="" type="checkbox"/>	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS	
FAULT/REMARKS Bullet hole exit at aft fairing right aft of UHF antenna.						ROUNDS	ACTION CODE	WUC		
						ACTION				
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ		OTHER			TIPD		TI MAN-HOURS	
<input checked="" type="checkbox"/>	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	HRS	
FAULT/REMARKS Bullet exit holes at right side lower aft fairing.						ROUNDS	ACTION CODE	WUC		
						ACTION				
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
						PID	HOURS	PID	HOURS	
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ		OTHER			TIPD		TI MAN-HOURS	

FOO REMINDER: Check work area for tools and parts after completion of maintenance and inspection

DA FORM 2408-13-3, NOV 91

PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION					
Status	SYS	DATE	NO.	TIME	PID	DATE		TIME		HRS	
						ROUNDS	ACTION CODE		WUC		
REMARKS Total labor costs 160 X .4814.00 = 76.240.00						ACTION Total Manhours - 160.0					
AIC HRS	WHEN DISC	HOW REC	MAIL EFF	WUC		CMH	OMH	FMH	DMH		
W.O.	REQ	OTHER				TIPID	TI MAN-HOURS				
Status	SYS	DATE	NO.	TIME	PID	DATE		TIME		HRS	
FAULT/REMARKS CM 240MH UN 240MH UN						ROUNDS	ACTION CODE		WUC		
						ACTION					
AIC HRS	WHEN DISC	HOW REC	MAIL EFF	WUC		CMH	OMH	FMH	DMH		
W.O.	REQ	OTHER				TIPID	TI MAN-HOURS				
Status	SYS	DATE	NO.	TIME	PID	DATE		TIME		HRS	
FAULT/REMARKS CM 240MH UN 240MH UN						ROUNDS	ACTION CODE		WUC		
						ACTION					
AIC HRS	WHEN DISC	HOW REC	MAIL EFF	WUC		CMH	OMH	FMH	DMH		
W.O.	REQ	OTHER				TIPID	TI MAN-HOURS				
Status	SYS	DATE	NO.	TIME	PID	DATE		TIME		HRS	
FAULT/REMARKS CM 240MH UN 240MH UN						ROUNDS	ACTION CODE		WUC		
						ACTION					
AIC HRS	WHEN DISC	HOW REC	MAIL EFF	WUC		CMH	OMH	FMH	DMH		
W.O.	REQ	OTHER				TIPID	TI MAN-HOURS				
Status	SYS	DATE	NO.	TIME	PID	DATE		TIME		HRS	
FAULT/REMARKS CM 240MH UN 240MH UN						ROUNDS	ACTION CODE		WUC		
						ACTION					
AIC HRS	WHEN DISC	HOW REC	MAIL EFF	WUC		CMH	OMH	FMH	DMH		
W.O.	REQ	OTHER				TIPID	TI MAN-HOURS				
Status	SYS	DATE	NO.	TIME	PID	DATE		TIME		HRS	
FAULT/REMARKS CM 240MH UN 240MH UN						ROUNDS	ACTION CODE		WUC		
						ACTION					

## AIRCRAFT TECHNICAL INSPECTION WORKSHEET

For use of this form, see DA PAM 738-751, the proponent agency is DCSLOG

1 ORGANIZATION AAASF Austin, TX 78723-3097		2 NOMENCLATURE AND MODEL HELICOPTER, OH-58A			3 SERIAL NUMBER 70-15246		4 TYPE INSPECTION TI TB 43-0002-3		
PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION			
STATUS	SYS	DATE	NO.	TIME	PIO	DATE	TIME	HRS	
FAULT/REMARKS Technical Inspection Inspected by [Redacted] (158)						ROUNDS	ACTION CODE	WUC	
						ACTION			
						PIO	HOURS	PIO	HOURS
						CMH	CMH	FMH	DMH
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	TI MAN-HOURS		
W.O.		REQ		OTHER					
<input checked="" type="checkbox"/>	STATUS	SYS	DATE	NO.	TIME	PIO	DATE	TIME	HRS
FAULT/REMARKS Bullet hole in tail boom lower side at STA BS 173.0						ROUNDS	ACTION CODE	WUC	
						ACTION			
						PIO	HOURS	PIO	HOURS
						CMH	CMH	FMH	DMH
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	TI MAN-HOURS		
W.O.		REQ		OTHER					
<input checked="" type="checkbox"/>	STATUS	SYS	DATE	NO.	TIME	PIO	DATE	TIME	HRS
FAULT/REMARKS TOTAL LABOR COST: 48 X \$14.00 = \$672.00 Parts 9.543.00 P/N 206-961-458-105 1560-01-314-6888						ROUNDS	ACTION CODE	WUC	
						ACTION			
						PIO	HOURS	PIO	HOURS
						CMH	CMH	FMH	DMH
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	TI MAN-HOURS		
W.O.		REQ		OTHER					
<input checked="" type="checkbox"/>	STATUS	SYS	DATE	NO.	TIME	PIO	DATE	TIME	HRS
FAULT/REMARKS						ROUNDS	ACTION CODE	WUC	
						ACTION			
						PIO	HOURS	PIO	HOURS
						CMH	CMH	FMH	DMH
A/C HRS		WHEN DISC		HOW REC	MAL EFF	WUC	TI MAN-HOURS		
W.O.		REQ		OTHER					

FOO REMINDER: Check work area for tools and parts after completion of maintenance and inspection

DA FORM 2408-13-3, NOV 91

## AIRCRAFT TECHNICAL INSPECTION WORKSHEET

For use of this form, see DA PAM 738-751, the proponent agency is DCSLOG

1 ORGANIZATION AAASF Austin, TX 78723-3097			2 NOMENCLATURE AND MODEL Helicopter, OH-58A			3 SERIAL NUMBER 7015303		4.1.1 TYPE INSPECTION TI TB43-0002-3	
PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION			
STATUS	SYS	DATE 2 Mar 93	NO.	TIME	PID	DATE	TIME	MRS	
FAULT REMARKS Technical Inspection Inspected by [Signature] (Initials: 158)						ROUNDS	ACTION CODE	WUC	
						PID	HOURS	PID	HOURS
A/C HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ	OTHER			TIPID	TI MAN-HOURS		
X	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	MRS
FAULT REMARKS Bullet hole in left passenger door 4 inches above door handle FS 117.71 WL 50.04						ROUNDS	ACTION CODE	WUC	
						PID	HOURS	PID	HOURS
A/C HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ	OTHER			TIPID	TI MAN-HOURS		
X	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	MRS
FAULT REMARKS Left passenger seat back bulkhead has bullet hole at FS 117.71 WL 50.04						ROUNDS	ACTION CODE	WUC	
						PID	HOURS	PID	HOURS
A/C HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ	OTHER			TIPID	TI MAN-HOURS		
X	STATUS	SYS	DATE	NO.	TIME	PID	DATE	TIME	MRS
FAULT REMARKS Bullet hole at left side step panel FS 119 . WL 52						ROUNDS	ACTION CODE	WUC	
						PID	HOURS	PID	HOURS
A/C HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O.		REQ	OTHER			TIPID	TI MAN-HOURS		

FOO REMINDER: Check work area for tools and parts after completion of maintenance and inspection

## AIRCRAFT TECHNICAL INSPECTION WORKSHEET

For use of this form, see DA PAM 738-751, the proponent agency is DCSLOG

1 ORGANIZATION AAASF Austin, TX 78723-3097			2 NOMENCLATURE AND MODEL HELICOPTER UH-60A			3 SERIAL NUMBER 9126319		4 TYPE INSPECTION TI TB 43-0002-3				
PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION						
STATUS	SYS	DATE 2 Mar 93	NO	TIME	PID	DATE		TIME		HRS		
						ROUNDS		ACTION CODE		WUC		
FAULT/REMARKS Technical Inspection Inspected by M. Schulz						ACTION						
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMM	OMH	FMM	DMM			
WO		REQ	OTHER			TIPD		TI MAN-HOURS				
X	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS	
							ROUNDS		ACTION CODE		WUC	
FAULT/REMARKS Bullet entry hole skin damage at STA 503 WL 215						ACTION						
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMM	OMH	FMM	DMM			
WO		REQ	OTHER			TIPD		TI MAN-HOURS				
X	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS	
							ROUNDS		ACTION CODE		WUC	
FAULT/REMARKS Bullet hole in frame of tail section at STA 525 WL 225						ACTION						
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMM	OMH	FMM	DMM			
WO		REQ	OTHER			TIPD		TI MAN-HOURS				
X	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS	
							ROUNDS		ACTION CODE		WUC	
FAULT/REMARKS Bullet hole in frame of tail section at STA 545 WL 229						ACTION						
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMM	OMH	FMM	DMM			
WO		REQ	OTHER			TIPD		TI MAN-HOURS				

FOOT REMINDER: Check work area for tools and parts after completion of maintenance and inspection

AIRCRAFT TECHNICAL INSPECTION WORKSHEET									
For use of this form, see DA PAM 738-751. The proponent agency is DCSLOG									
ORGANIZATION AAASF Austin, TX 78723-3097			2 Nomenclature and Model Helicopter, OH-58A			3 Serial Number 7015303		4 Type Inspection TI TB43-0002-3	
PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION			
STATUS	S/S	DATE 2 Mar 93	NO	TIME	PID	DATE	TIME	HRS	
						ROUNDS	ACTION CODE	WUC	
FAULT REMARKS Technical Inspection Inspected by Melvin Schulz.						ACTION			
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	CMH	FMH	DMH
WO		REQ	OTHER			TIPID			TI MAN-HOURS
X	STATUS	S/S	DATE	NO	TIME	PID	DATE	TIME	HRS
							ROUNDS	ACTION CODE	WUC
FAULT REMARKS Bullet hole in left passenger door 4 inches above door handle FS 117.71 WL 50.04						ACTION			
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	CMH	FMH	DMH
WO		REQ	OTHER			TIPID			TI MAN-HOURS
X	STATUS	S/S	DATE	NO	TIME	PID	DATE	TIME	HRS
							ROUNDS	ACTION CODE	WUC
FAULT REMARKS Left passenger seat back bulkhead has bullet hole at FS 117.71 WL 50.04						ACTION			
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	CMH	FMH	DMH
WO		REQ	OTHER			TIPID			TI MAN-HOURS
X	STATUS	S/S	DATE	NO	TIME	PID	DATE	TIME	HRS
							ROUNDS	ACTION CODE	WUC
FAULT REMARKS Bullet hole at left side step panel FS 119 WL 52						ACTION			
AC HRS		WHEN DISC	HOW REC	MAL EFF	WUC	CMH	CMH	FMH	DMH
WO		REQ	OTHER			TIPID			TI MAN-HOURS
FOD REMINDER: Check work area for tools and parts after completion of maintenance and inspection									

DA FORM 2408-13-3, NOV 91

Z 0021457

X STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS			
						ROUNDS	ACTION CODE	WUC			
FAULT:REMARKS Bullet hole in left side of Inverter						ACTION _____					
<i>733.00</i>											
A/C HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMM	CMM	FMM	DMH
WO		REQ		OTHER		TIPID		TI MAN-HOURS			
X STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS			
						ROUNDS	ACTION CODE	WUC			
FAULT:REMARKS Bullet hole in left side of aircraft at STA FS 173.0 WL 68						ACTION _____					
A/C HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMM	CMM	FMM	DMH
WO		REQ		OTHER		TIPID		TI MAN-HOURS			
X STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS			
						ROUNDS	ACTION CODE	WUC			
FAULT:REMARKS Bullet hole in rib left side of A/C at STA FS 192.0 WL 71.0						ACTION _____					
A/C HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMM	CMM	FMM	DMH
WO		REQ		OTHER		TIPID		TI MAN-HOURS			
X STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS			
						ROUNDS	ACTION CODE	WUC			
FAULT:REMARKS Bullet hole in stringer at left side of aircraft at FS 192.0 WL 71.0						ACTION _____					
A/C HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMM	CMM	FMM	DMH
WO		REQ		OTHER		TIPID		TI MAN-HOURS			
X STATUS	SYS	DATE	NO	TIME	PID	DATE	TIME	HRS			
						ROUNDS	ACTION CODE	WUC			
FAULT:REMARKS Bullet exit hole at FS 186.0 WL 72.18 BL 1.0 aft and below oil tank						ACTION _____					
A/C HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMM	CMM	FMM	DMH
WO		REQ		OTHER		TIPID		TI MAN-HOURS			

REVERSE OF DA FORM 2408-13-3

U.S. Government Printing Office: 1992 - 31-300-50167

Z 0021458

## AIRCRAFT TECHNICAL INSPECTION WORKSHEET

For use of this form see DA Form 738-751. The document agency is DCGSCG.

ORGANIZATION AAASF Austin, TX 78703-3097	ITEM Nomenclature and Model HELICOPTER, OH-58A	SERIAL NUMBER 70-15246	TYPE INSPECTION TI TB 43-0030-3							
PART I - FAULT INFORMATION		PART II - CORRECTING INFORMATION								
STATUS <input checked="" type="checkbox"/>	SYS DATE	AC TIME	PIC	DATE	TIME	MRS				
				REOUNDS	ACTION CODE	WUC				
FAULT REMARKS Technical Inspection. Inspected by Melvin Schmitz <i>Melvin Schmitz</i>				ACTION						
AC-HRS W-O	WHEN DISC	HOW REC	VAL EFF	WUC	CMM	CMM	FMM	CMM		
					TPIID	MAN-HOURS				
X STATUS <input checked="" type="checkbox"/>	SYS DATE	AC TIME	PIC	DATE	TIME	MRS				
				REOUNDS	ACTION CODE	WUC				
FAULT REMARKS Bullet hole in tail boom lower side at STA BS 173.0				ACTION						
AC-HRS W-O	WHEN DISC	HOW REC	VAL EFF	WUC	CMM	CMM	FMM	CMM		
					TPIID	MAN-HOURS				
STATUS <input checked="" type="checkbox"/>	SYS DATE	AC TIME	PIC	DATE	TIME	MRS				
				REOUNDS	ACTION CODE	WUC				
FAULT REMARKS TOTAL LABOR COST: 48 X \$14.00 = \$672.00 Part # 0 543 00 PIN 226-941-458-105 1560-01-314-6888				ACTION TOTAL MANHOURS: 48.0						
AC-HRS W-O	WHEN DISC	HOW REC	VAL EFF	WUC	CMM	CMM	FMM	CMM		
					TPIID	MAN-HOURS				
STATUS <input checked="" type="checkbox"/>	SYS DATE	AC TIME	PIC	DATE	TIME	MRS				
				REOUNDS	ACTION CODE	WUC				
FAULT REMARKS				ACTION						
AC-HRS W-O	WHEN DISC	HOW REC	VAL EFF	WUC	PIC	HOURS	PIC	HOURS	PIC	HOURS
					TPIID	MAN-HOURS				

FOOT REMINDER: Check work area for tools and parts after completion of maintenance and inspection

DA FORM 2408-13-3, NOV 91

Z 0022839

PART I - FAULT INFORMATION						PART II - CORRECTING INFORMATION					
X	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS
FAULT/REMARKS Bullet hole in frame of tail section at STA 565 WL 233						ROUNDS		ACTION CODE		WUC	
						ACTION					
AC HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O		REQ		OTHER		TIPID		TI MAN-HOURS			
X	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS
FAULT/REMARKS Bullet hole in frame of tail section at STA 585 WL 237						ROUNDS		ACTION CODE		WUC	
						ACTION					
AC HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O		REQ		OTHER		TIPID		TI MAN-HOURS			
	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS
FAULT/REMARKS Total Labor Cost:						ROUNDS		ACTION CODE		WUC	
40 X \$14.00 = \$560.00						ACTION		TOTAL MANHOURS: 40.0			
AC HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O		REQ		OTHER		TIPID		TI MAN-HOURS			
	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS
FAULT/REMARKS						ROUNDS		ACTION CODE		WUC	
						ACTION					
AC HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O		REQ		OTHER		TIPID		TI MAN-HOURS			
	STATUS	SYS	DATE	NO	TIME	PID	DATE		TIME		HRS
FAULT/REMARKS						ROUNDS		ACTION CODE		WUC	
						ACTION					
AC HRS		WHEN DISC		HOW REC		MAL EFF	WUC	CMH	OMH	FMH	DMH
W.O		REQ		OTHER		TIPID		TI MAN-HOURS			

REVERSE OF DA FORM 2408-12-3

\*U.S. Government Printing Office: 1992 - 311-830-50167

## ROUTING AND TRANSMITTAL SLIP

2 MAR 93

EOC - 5636

TO: (Name, office symbol, room number,  
building, Agency/Post)

Initials \_\_\_\_\_ Date \_\_\_\_\_

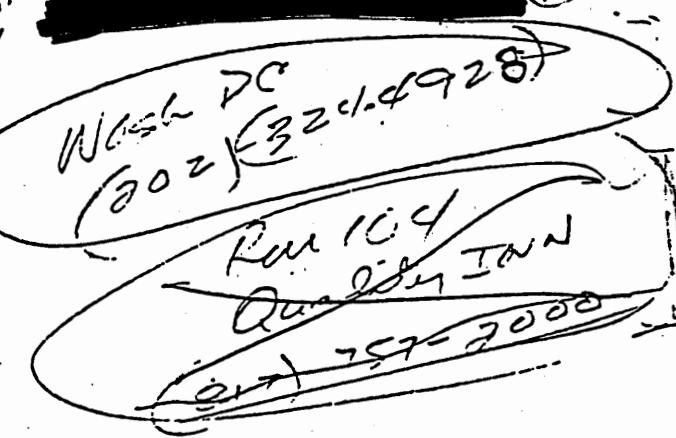
(3) [REDACTED] ASTR-OT

2

FBI	1993	ATZ			
DATE	ISSUE COST	TOTAL	DATE	ISSUE COST	TOTAL
JAN 20X	654.12	654.12	FEB 22 BX	1,199.28	1,199.28
MAR 50 BX	2,725.50	33T9.62	2 MAR	545.10	1744.78
MAR 31A MAR 24UG 169.74	3529.30	3 MAR	42 BX	2,289.02	4033.90
				3964.62	4060.71

III Corps - POC - ad s/t o  
817-289-1182Drops-L  
.69¢MRE - 54.51 (B.V.)  
smo

FHQ - 817-289-2898

REPAIRS  
as 15 Mar549,100. 3 E10-173  
69,000 CECU (Force  
Area)\*FBI Contracting Officer  
[REDACTED]1012 2d mess  
mech-pmt


(202) (32-4928)  
W.C. DC  
53  
Pan 104  
Quinton JAW  
(cont) 757-2000

EOC - 5636

II Corps - POC - ad site  
817) 289-1182

Drops-L  
1674

MRE - 54.51 (BX)  
case

FHW - 817) 289-2698

REMARKS —  
as 15 Mar

\$49,100. 35000  
\$9,000 CEV (Food  
Area)

ROUTING SLIP SUPPLY & SERVICES BUREAU  
USPSO DATE:

2.		
4.		
6.		
Action	File	Note and Return
Approved	For Clearance	Per Conversation
As Requested	For Correction	Prepare Reply
Circulate	For Your Information	See Me
Concurrent	Investigate	Signature
Coordination	Justify	

REMARKS

UNIT PRICE PER  
MRE COSTS CASE MEAL  
\$54.51 \$4.54

FBI

12 BX from Warehouse #657.12

ATF

22 BX from #6124 on 5/1/1973

DO NOT use this form as a RECORD of approvals, concurrences, disapprovals, clearances, and similar actions.

FROM: (Name, org. symbol, Agency/Post)

Room No.—Bldg.

Phone No.

8043-362

\* U.S. GPO: 1980 - 262-080

OPTIONAL FORM 41 (Rev. 7-76)  
Presented by GSA  
GPRR (4) GPO 161-12306

Additional

ATF 10 Cases 183063 2 MAR 73

ATF 42 Cases 100063 3 MAR 73

FBI 50

3 MAR 73

ROOM  
NO.  
NO. OF  
GUESTS

# Everyday Inn

55817

• 1008 E. CREST  
Waco, Texas 76705

Date 2 MAR 19 73

REGISTRATION RECORD - PLEASE PRINT (LAST NAME FIRST)

① NAME \_\_\_\_\_

Payable by  
cash in advance

② ADDRESS \_\_\_\_\_

CAR - YEAR  
MAKE

LICENSE  
NUMBER

GUEST  
SIGNATURE \_\_\_\_\_

REPRESENTATIVE  
OF

ROOM RATE	CLERK	ARRIVAL		AM PM	DEPARTURE	AM PM	C ✓	PREVIOUS BALANCE C ✓			
		DATE	ROOM NO.	NO. GUESTS	ROOM CHARGE NO. CARTS AMOUNT	TAX	OTHER L.D. LOCAL	TOTAL CHARGES	PAID ON ACCOUNT	BALANCE DUE	
1-2	20	1	1	1	10.08			10.08	10.08	—	—
-3	>0	1	1	1	10.08			10.08	10.08		
-4	>0	1	1	1	10.08			10.08	10.08	>0.16	>0.08
-5	>0	1	1	1	10.08			10.08	10.08	30.24	>0.16

EXPLAN.

OTHER CHARGES  
A. C.  
B. D.

Guest's  
Last name \_\_\_\_\_

Z 0017753

21  
1  
DO GUESTS

# Everyday Inn

1008 E. CREST  
Waco, Texas 76705

IN 55816

Date 7/18/65 1965

(1) REGISTRATION RECORD - PLEASE PRINT (LAST NAME FIRST)

NAME [REDACTED]

Payable by  
cash in advance

(2) ADDRESS [REDACTED]

CAR. YEAR  
MAKE

LICENSE  
NUMBER

Car. vehicle

REPRESENTATIVE  
OF

GUEST  
SIGNATURE

ROOM RATE	CLERK	ARRIVAL	AM PM	DEPARTURE	AM PM	BALANCE DUE		CASH ✓	PREVIOUS BALANCE ✓						
						DATE	ROOM NO.	NO. GUESTS	ROOM CHARGE NO CHARS AMOUNT	TAX	OTHER L.O. LOCAL	TOTAL CHARGES	PAID ON ACCOUNT		
3.2	20	1 1 10 68				10 67		10 68				10 67	10 68	0	0
	20	1 1 10 68				08						08		10 68	
	20	1 1 10 68				10 68						10 68		>10 68	10 68
	20	1 1 10 68				10 68						10 68		>10 68	10 68

EXPLANATION OF OTHER CHARGES  
A. B. C. D.

Guest's (3)  
Last name [REDACTED]

REG#  
NO OF  
GUESTS

# Everyday Inn

1008 E. CREST  
Waco, Texas 76705

IN 55867

Date 3-5 1973

RE: [REDACTED] PLEASE PRINT LAST NAME FIRST

NAME

ACCOM.

CITY

STATE

GUEST  
SIGNATURE

(1)

(2)

payable by  
cash in advance

CAR - YEAR  
MAKE

LICENSE  
NUMBER

REPRESENTATIVE  
OF TX NATIONAL GUARD

ROOM RATE	CLEAN	ARRIVAL	AM PM	DEPARTURE	AM PM	OTHER		TOTAL CHARGES	PAID ON ACCOUNT	BALANCE DUE	C/P	PREVIOUS BALANCE	C/P	
						DATE	BOOK AC	NO GUESTS	NO DAYS	AMOUNT	TAX	L.D.	LOCAL	
21	1	1	10:08											
3-5		1	1	10:08										
3-6		1	10:08							30.24	30.24			

EXPLANATION OF OTHER CHARGES

- A-
- B-
- C-
- D-

Guest's  
Last name [REDACTED]

(4)

(1)

EXPIRATION	DATE	SERVER
<input checked="" type="checkbox"/>	AUTHORIZATION	CASHIER
CHECKED	CHECK NO./FOLIO NO.	

5389718

7056	PURCHASES
1	TAX
	SERVER
	OTHER
7056	TOTAL

(2) SIGN HERE

SALES SLIP

FORM TO BE USED WITH



CUSTOMER COPY

IMPORTANT:  
RETAIN THIS COPY FOR YOUR RECORDS

ST USA

(3) DO NOT CIRCLE EXPIRATION DATE

USE BOX BELOW

DATE	3-2-93	SERVER	D8
AUTHORIZATION	CASHIER		
CHECK NO./FOLIO NO.			

5389718

10 08	PURCHASES
1	TAX
	SERVER
	OTHER
10 08	TOTAL

CUSTOMER COPY

IMPORTANT:  
RETAIN THIS COPY FOR YOUR RECORDS

FIRST USA

ROOM NO.	19
NO. OF GUESTS	1

Everyday Inn

55818

1008 E. CREST  
Waco, Texas 76705

Date 3-2-1993

REGISTRATION RECORD - PLEASE PRINT LAST NAME FIRST

NAME

Payable by  
cash in advance

ADDRESS

CITY & STATE

LICENSE  
NUMBER

GOUYRUMPIJT

GUEST  
SIGNATURE

REPRESENTATIVE  
OF

ROOM RATE

CLERK

ARRIVAL

AM.  
PM.

DEPARTURE

AM.  
PM.

DATE	ROOM NO.	NO. GUESTS	NON CHARGE NO. DRAFT AMOUNT	TAX	1:00 P.M. L.O.	1:00 A.M. FOCAL	TOTAL CHARGES	PAID ON ACCOUNT	BALANCE DUE	CH #	PREVIOUS BALANCE	EX.
3-2	19	1	10 08				10 08	10 08	0			
3-3			10 08									
3-4			10 08									
3-5			10 08									
3-6			10 08									
3-7			10 08									
3-8			10 08									

EXPLANATION OF OTHER CHARGES

C. 3-4. 10 08 Guest's  
B. D. Last name

10 08 Guest's  
Last name

70 56 70 56

Z 0017766

## UNCLASSIFIED

PAGE:0001

INQUIRE=DOC21D

ITEM NO=00098002

ENVELOPE

CDSN = LGX013 MCN = 93060/10972 TOR = 930601236

OTTUZYUW RUEKJCS7183 0601234-UUUU--RUEALGX.

ZNR UUUUU

HEADER

O 011234Z MAR 93

FM SECDEF WASHINGTON DC

INFO RUEALGX/SAFE

O 011155Z MAR 93

FM JOINT STAFF WASHINGTON DC//J4:LRC//

TO RHCUAAA/USTRANSCOM SCOTT AFB IL//CAT/TCJ3/4/8-B//

INFO RHCUAAA/HQ AMC SCOTT AFB IL//TACC/DOOMS/SAAM//

RUEKJCS/SECDEF WASHINGTON DC//ES/P&amp;L//

RHDJAAA/459AW ANDREWS AFB MD//CP//

BT

CONTROLS

UNCLAS

BODYSUBJ: REQUEST FOR MARCH SAAM 5117, SUPPORT FOR FBI TO WACO, TEXAS

REF: TELECON 28 FEB 93 BETWEEN [REDACTED] J4-LRC AND [REDACTED]

[REDACTED] AMC SENIOR CONTROLLER, SAME SUBJ

1. OASD(P&L) HAS APPROVED DOD AIRLIFT SUPPORT FOR THE FEDERAL BUREAU OF INVESTIGATION TO MOVE A CRISIS RESPONSE TEAM FROM ANDREWS AFB, MD TO WACO, TEXAS. THIS IS A REQUEST FOR MARCH SAAM 5117. THE FOLLOWING DETAILS APPLY:

- A. VALIDATOR: [REDACTED] USAF
- B. PRIORITY: 1B1
- C. TYPE AIRCRAFT: C141
- D. ONLOAD LOCATION: ANDREWS AFB, MD
- E. OFFLOAD LOCATION: TEXAS STATE TECHNICAL COLLEGE, WACO, TEXAS. ICAO CODE IS (KCNW).
- F. PAX: 50-60 WITH WEAPONS AND CLASS C AMMUNITION
- G. CARGO: FOUR VEHICLES (GMC SUBURBANS)
- G. CARGO: FOUR VEHICLES (GMC SUBURBANS)
- H. RDD: 1 MAR 93

## 2. REMARKS:

- A. 459AW AT ANDREWS HAS AGREED TO TAKE MISSION IN LIEU OF TRAINING MISSION SCHEDULED FOR LATER THIS WEEK.
- B. EXTENSION FOR RETURN OF TEAM TO ANDREWS WILL BE TASKED SEPARATELY AS -02 MISSION OF THIS SAAM WHEN SITUATION IS RESOLVED IN TEXAS.

## 3. FUNDING: SUPPORT IS REIMBURSABLE AT THE US GOVERNMENT, NON-DOD RATE. SEND BILLS TO:

FEDERAL BUREAU OF INVESTIGATION

10TH AND PENNSYLVANIA AVE

WASHINGTON DC 20353

ATTN: ASSISTANT DIRECTOR [REDACTED]

## 4. POINTS OF CONTACT:

- A. FBI OPS CENTER: SPECIAL AGENT [REDACTED] COM'L (202)

UNCLASSIFIED

Z 0036941

**UNCLASSIFIED**

**PAGE:0002**

324-6750.  
B. ANDREWS: [REDACTED] DSN 858-2600/2800, COM'L (301)  
981-2600/2800.  
C. J4-LRC: [REDACTED] OR [REDACTED], DSN 227-0744 DURING DUTY  
HOURS. AFTER HOURS, CONTACT THE J4-LRC DUTY OFFICER VIA THE NMCC  
OPERATOR, DSN 227-6340.

**ADMIN**  
**BT**

**#7183**

**NNNN**

**UNCLASSIFIED**

**Z 0036942**

01 02

MAR 93 PP UUUU

082000

HQDA WASHINGTON DC//DAMO-ODS//

CNCB WASHINGTON DC//ARO-0//

INFO OSD WASHINGTON DC

CJCS WASHINGTON DC

CSA WASHINGTON DC

TAG TX AUSTIN TEXAS

FBI WASHINGTON DC

CNGB WASHINGTON DC//ARO-0M//

UNCLAS

FOUO

MSGID/ORDER/ASSISTANT SECRETARY OF THE ARMY (INSTALLATIONS,  
LOGISTICS, AND ENVIRONMENT)

SUBJECT: LOAN OF COMBAT ENGINEER VEHICLES (CEV) M728 TO FBI

A. AR 700-131, LOAN AND LEASE OF ARMY MATERIEL, 4 SEP 87.

B. AR 500-51, SUPPORT TO CIVIL LAW ENFORCEMENT, 1 AUG 83.

1. THIS IS AN EXECUTE ORDER. THE ACTING ASA(IL&E) HAS APPROVED THE  
LOAN OF TWO CEV'S TO THE FBI.

2. IAW REFERENCES A AND B, REQUEST YOU COORDINATE WITH TAG TEXAS TO  
PROVIDE THE FEDERAL BUREAU OF INVESTIGATION IN WACO, TEXAS, WITH TWO  
CEV'S NLT 082000 (CST) MAR 93. THE CEV'S WILL BE LOANED TO FBI

[REDACTED]  
DAMO-ODS, DSN 227-4331

GS

COMEBACK COPY REQUESTED

D

[REDACTED], GS, CHIEF, MILITARY SUPPORT DIVISION

UNCLASSIFIED

S:\USCS\DBF-- ID# 5

Z 0034204

02 02

MAR 93 PP

UUUU

WITHOUT OPERABLE WEAPONS SYSTEMS. ALL ARMY MARKINGS WILL BE OBSCURED. FBI DRIVERS WILL OPERATE VEHICLES. APPROPRIATE MAINTENANCE PACKAGE SHOULD ACCOMPANY VEHICLES, BUT ARNG PERSONNEL WILL NOT BE ON BOARD DURING OPERATIONAL MISSIONS AND WILL NOT ASSIST IN ANY ASPECT OF CIVIL LAW ENFORCEMENT.

3. A STANDARD DOD LOAN AGREEMENT WILL BE COMPLETED PRIOR TO RECEIPT OF THE EQUIPMENT TO THE FBI. ALL USE IS REIMBURSABLE UNDER THE PROVISIONS OF THE ECONOMY ACT. THE FBI WILL ALSO PAY MAINTENANCE PERSONNEL PER DIEM AND ALL OTHER IDENTIFIABLE DIRECT AND INDIRECT COSTS. FBI POINT OF CONTACT TO COORDINATE LOAN IS SPECIAL AGENT [REDACTED] AT FBI HQ (202-324-6700). REQUEST FOR REIMBURSEMENT SHOULD BE FORWARDED TO FBI HEADQUARTERS, 10TH AND PENNSYLVANIA AVENUE, NW, ATTN: ASSISTANT DIRECTOR DIVISION 3, SUPPORT OF MC BU. THE DURATION OF THIS OPERATION HAS NOT BEEN DETERMINED.

4. HQDA POC IS [REDACTED] DSN 227-4331, CML 703-697-4331.

8  
M  
[REDACTED]  
UNCLASSIFIED

S:\USCS.DBF-- ID# 5

Z 0034205

\*\*\*\*\*  
\*\*\* ACTIVITY REPORT \*\*\*  
\*\*\*\*\*

D2518

TRANSMISSION OK

PPR

TI/RN NO. 7180  
CONNECTION TEL 1664228p8177990698  
CONNECTION ID  
START TIME 03/02 11:38  
USAGE TIME 01'21  
PAGES 2  
RESULT OK

ROOM NO.	45
NO. OF GUESTS	1

# Everyday Inn

1008 E. CREST  
Waco, Texas 76705

No. 55823

Date 3-2 1983

REGISTRATION RECORD - PLEASE PRINT (LAST NAME FIRST)

NAME

Payable by  
cash in advance

ADDRESS

CITY & STATE

GUEST SIGNATURE

YEAR  
MAKE

LICENSE  
NUMBER

REPRESENTATIVE  
OF

ROOM RATE

CLERK

ARRIVAL

AM

PM

DEPARTURE

AM

PM

DATE	ROOM NO.	NO. GUESTS	ROOM CHARGE NO. DAYS / AMOUNT	TAX	OTHER L.O. LOCAL	TOTAL CHARGES	PAID OR ACCOUNT	BALANCE DUE	CR <input checked="" type="checkbox"/>	PREVIOUS BALANCE	CR <input checked="" type="checkbox"/>
3-2	45	1	1 1850	-		1850	1850	0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

EXPLANATION OF OTHER CHARGES

- A.      C.
- B.      D.

Guest's  
Last name \_\_\_\_\_

D2440

000045

Page 1 of 1

0005639

Z

1 DATE 2 MARS 93	2 SERIAL NUMBER 3 13221	3 MODEL 4 UH-60L	4 ORGANIZATION 5 STATION 6-1 1-1-1									
6 FLIGHT / DATA FROM 1705	TO 10	TO PNU										
TIME FROM 11:00 TO : 10 11:50	FLT HRS .9	LOG STD / AUTO Ø	STARTS #1 02									
MISSION ID STD AC CONFIG LOADS INTERNAL EXTERNAL	PASSENGERS		CYC HSF									
ROUNDS 7 62 20MM 30MM 40MM	ROCKET TOW		HELLFIRE									
STATUS 7 62 20MM 30MM 40MM	ROCKET TOW		HELLFIRE									
HIT CHECK NO 1 ENGINE NO 2 ENGINE APU STATUS 3 HOURS .3	HOUR METER HRS											
D PERSONNEL DATA FR FC SEC NF DUTY SYMBOL/FLIGHT SYMBOL/HOURS/SEAT												
NAME RANK PISSAN DS FS HR S DS FS HR S DS FS HR S DS FS HR S												
(1) Cpl J DS D .9												
(1) SGT P1 D .7												
(1) SGT P6 D .9												
EQUIPMENT												
SERVICING DATA												
FUEL ADDED (GALLONS)	GRADE	IN TANKS	OIL 1	GRADE	OIL 2	GRADE	APU	GRADE	OXY-GEN	ANTI-ICING	SERVICED BY	LOCATION
.7	56	7	236	7	236	7	F	110	110	110	110	110
124	JN4	362										
124												TOTALS

DA FORM 2408-12, JAN 92  
EDITION OF JAN 64 IS OBSOLETEARMY AVIATOR'S FLIGHT RECORD  
For use of this form, DA PAM 738-781, the procurement agency is DCSLOG

ROOM NO.	43	Everyday Inn			No. 55824	
NO. OF GUESTS	1				Date MARCH 2 1993	
REGISTRATION RECORD - PLEASE PRINT LAST NAME (1993)			43 Payable by cash in advance			
NAME	<b>(1)</b> [REDACTED]			CAR. YEAR MADE		
ADDRESS	<b>(2)</b> [REDACTED]			LICENSE NUMBER		
CITY & STATE	<b>(3)</b> [REDACTED]			REPRESENTATIVE OF		
GUEST'S NAME	<b>(4)</b> [REDACTED]			AM. IN.	DEPARTURE	AM. OUT.
RATE	DATE	ROOM NO.	NO. GUESTS	ROOM CHARGE	TAX	OTHER
	3-21	43	1	1850	-	LOCAL
						TOTAL CHARGES
						Paid on account
						BALANCE DUE
						ON /
						PREVIOUS BALANCE
						DR. /
EXPLANATION OF OTHER CHARGES						
A.	C.			Guest's Last name _____		
B.	D.					

44  
1

# Everyday Inn

1008 E. CREST  
Waco, Texas 76705

55822

Date 2/22/73

STATION RECORD - PLEASE PRINT (LAST NAME FIRST)

Payable by  
cash in advance

TE	RATE	CLERK	ROOM NO.	NO GUESTS	NO DAYS	ROOM CHARGE	TAX	OTHER		TOTAL CHARGES	PAID ON ACCOUNT	BALANCE DUE	CR	PR	EX
								L.D.	LOCAL						
2	44	1	1	1	1	1850	—	1	1	1850	1850	—	—	—	—

EXPLANATION OF OTHER CHARGES

A.      C.  
B.      D.

Guest's  
Last name \_\_\_\_\_

Z 0012787

ROOM NO.  
NO. OF GUESTS  
1

# Everyday Inn

1008 E. CREST  
Waco, Texas 76705

IN 55816

Date 7/11/75 19<sup>75</sup>

(2) REGISTRATION RECORD - PLEASE PRINT (LAST NAME FIRST)

NAME [REDACTED]

Payable by  
cash in advance

ADDRESS [REDACTED]

CITY & STATE [REDACTED] CAR. YEAR  
MAKE LICENSE NUMBER Govt. Vehicle

GUEST SIGNATURE [REDACTED] REPRESENTATIVE  
OF [REDACTED]

ROOM RATE			CLERK	ARRIVAL	AM PM	DEPARTURE	AM PM						
DATE	ROOM NO.	NO. GUESTS	ROOM CHARGE		TAX	OTHER L.D.	LOCAL	TOTAL CHARGES	PAID ON ACCOUNT	BALANCE DUE	CR ✓	PREVIOUS BALANCE	CR ✓
3-2	20	1	1	10.00				10.00	10.00	0			
7-0	1	1		10.08				10.08		10.08			
7-0	1	1		10.08				10.08		>7.10			
7-0	1	1		10.08				10.08		>0.71			

E. A. B. C. D.

Guest's  
Last name [REDACTED]

(3)

REGIS  
No.  
No. of  
GUESTS

1
1

# Everyday Inn

1008 E. CREST  
Waco, Texas 76705

No. 55819

Date 3-2 1953

REGIS RECORD - PLEASE PRINT (LAST NAME FIRST)

NAME [REDACTED] Payable by  
ADDRESS [REDACTED] cash in advance  
#4 [REDACTED]

CITY & STATE [REDACTED]  
CAR - YEAR  
MAKE govr. vch. LICENSE NUMBER

GUEST SIGN [REDACTED]

REPRESENTATIVE OF [REDACTED]

ROOM RATE	CLERK	ARRIVAL	AM	DEPARTURE	AM								
			PM	PM	PM								
DATE	ROOM NO.	NO. GUESTS	NO. DAYS	ROOM CHARGE AMOUNT	TAX	OTHER	L.D.	LOCAL	TOTAL CHARGES	PAID ON ACCOUNT	BALANCE DUE	CR/V	PREVIOUS BALANCE
3-2	19	1	1	10.08					10.08	10.08			
3-3			1	10.08									
3-4				10.08									
3-5				10.08									
3-6				10.08									
3-7				10.08									
3-8				10.08									

EXPLANATION OF OTHER CHARGES  
C. 10.08 Guest's  
B. D. Last name \_\_\_\_\_  
70.56 70.56

ROOM NO.  
10  
NO. OF GUESTS  
1

# Everyday Inn

1008 E. CREST  
Waco, Texas 76705

No. 55817

Date 2 MAR 11973

REGISTRATION RECORD - PLEASE PRINT (LAST NAME FIRST)

NAME [REDACTED] (1)  
ADDRESS [REDACTED] (2)  
Payable by  
cash in advance  
CITY & STATE [REDACTED]  
CAR - YEAR  
GOU. UZL  
LICENSE NUMBER  
GUEST SIGNATURE  
REPRESENTATIVE OF

ROOM RATE	CLERK	ARRIVAL	AM		PM		BALANCE DUE	CREDIT	PREVIOUS BALANCE
			PM	DEPARTURE	AM	PM			
DATE	ROOM NO.	NO. OF GUESTS	ROOM CHARGE NO CHGS AMOUNT	TAX	OTHER L.D.	LOCAL	TOTAL CHARGES	PAID ON ACCOUNT	
3-2	20	1	10.08				10.08	10.08	10.08
3-3	20	1	10.08				10.08		10.08
3-4	20	1	10.08				10.08		10.08
3-5	20	1	10.08				10.08		10.08

EXPLANATION OF OTHER CHARGES

A. C.  
B. D.

Guest's  
Last name \_\_\_\_\_

TRAVEL VOUCHER OR SUBVOUCHER			Complete by typewriter, ink, or ball point pen (PRESS HARD! do not use pencil)			
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM.						
ST NAME - FIRST NAME - MIDDLE INITIAL (Print Type)	GRADE/RANK	SSN	10. FOR DO USE ONLY			
21	3		DO VOUCHER NO.			
CHECK MAILING ADDRESS (Include Zip Code) [REDACTED]			SUBVOUCHER NO.			
DUTY PHONE NO. (512) 465-5552			PAID BY			
ORGANIZATION AND STATION COF(-) 149AVN 49AD Austin, TX						
TRAVEL ORDERS (Paragraph, S.O. No., Issuing HQ, Date/Include amending orders) AGTX 040-070 01 March 1993 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 25 for Symbols)			2. 3. NUMBER OF MEALS			
DATE 1993	LOCAL TIME (24 Hour Clock)	PLACE (Home, Office, Basic Activity, City and State; City and Country, etc.)	MODE OF TRAVEL	REASON FOR STOP	COST OF LODGING	POC MILES
27/02/93	DEP 1100	Austin, TX	GP			
27/02/93	ARR 1500		TD			
27/02/93	DEP 1700	Waco, TX	GP	76.00	NONE	
27/02/93	ARR 1815		MC			
27/02/93	DEP	Austin, TX				
27/02/93	ARR					
27/02/93	DEP					
27/02/93	ARR					
27/02/93	DEP					
27/02/93	ARR					
27/02/93	DEP					
27/02/93	ARR					
27/02/93	DEP					
27/02/93	ARR					
5. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS (See Item 24)						
DATE	NATURE AND EXPLANATION		AMT. CLAIMED	ALLOWED		
NONE						
SUMMARY OF PAYMENT						
Per Diem						
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: N/A days N/A hours taken between N/A and N/A						
9. POC TRAVELED <input type="checkbox"/> OWNER/OPERATOR (See Item 22d) <input type="checkbox"/> PASSENGER						
10. 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, affirm and amount due me. The statements on face, reverse, and back are true and complete. Payment or credit has not been received.						
15. ACCOUNTING CLASSIFICATION						
16. COLLECTION DATA						
17. COMPUTED BY	18. AUDITED BY	19. TDL REC'D POSTED BY	20. RECEIVED (Payee signature and date or check no.)			21. AMOUNT PAID

ADSW  
02 Mar 93

TRAVEL VOUCHER OR SUBVOUCHER			(Complete by typewriter, ink, or ball point pen (PRESS HARD) do not use pencil)					
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM.								
LAST NAME - FIRST NAME - MIDDLE INITIAL (Print/Type)			GRADE/RANK		SSN			
CHECKING ADDRESS (Include Zip Code)			DUTY PHONE NO.					
(512) 465-5552								
ATION AND STATION								
COF(-) 149AVN 49AD Austin, TX								
TRAVEL ORDERS (Paragraph, S.O. No., Issuing HQ, Date)(Include amending orders)								
AGTX 040-070 01 March 1993								
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 25 for Symbols)								
DATE	LOCAL TIME (24 Hour Clock)	PLACE (Home, Office, Base, Activity, City and State; City and Country, etc.)	MODE OF TRAVEL	REASON FOR STOP	COST OF LODGING	3. NUMBER OF MEALS	GOVT DED*	POC MILES
19 93	DEP 1100	Austin, TX	GP					
27 93	ARR 1500			TD				
27 93	DEP 1700	Waco, TX	GP		76.00	NONE		
28 93	ARR 1815			MC				
28 93	DEP 1900	Austin, TX	GP					
29 93	ARR							
29 93	DEP							
30 93	ARR							
30 93	DEP							
31 93	ARR							
31 93	DEP							
31 93	ARR							
31 93	DEP							
31 93	ARR							
2. COMPUTATIONS								
2 NIGHTS @ 38.00								
5. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS * (See Item 24)								
DATE	NATURE AND EXPLANATION		AMT. CLAIMED	ALLOWED				
NONE								
SUMMARY OF PAYMENT								
Per Diem								
Actual Expense								
Mileage or Trans. 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: N/A days N/A hours taken between N/A and N/A								
9. POC TRAVEL <input type="checkbox"/> OWNER/OPERATOR (See Item 22d) <input type="checkbox"/> PASSENGER								
10. 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 swear and declare that the amount due me. The statements on face, reverse, and signature are true and complete. Payment or credit has not been received.								
SIGNATURE OF CLAIMANT DATE								
2 MARCH 1993								
12. PER DIEM REQUESTED								
13. BAS RATE								
14. COUNTING CLASSIFICATION								
RECEIVED BY UTANT GENR 2 MAR 93 OTII-D-T								
15. COLLECTION DATA								

REVIEWED BY

TRAVEL VOUCHER OR SUBVOUCHER			(Complete by typewriter, ink, or ball point pen (PRESS HARD) do not use pencil)					
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM								
LAST NAME-FIRST NAME-MIDDLE INITIAL (Print/L-type)			GRADE/RANK		SSN			
[REDACTED]			[REDACTED]		[REDACTED]			
CHIEF AND AGENT'S GRADE/TYPE			DUTY PHONE NO.					
[REDACTED]			512/465-5113					
ORGANIZATION AND STATION								
CO D, 249TH MSB, PO BOX 5218, (CAMP MABRY), AUSTIN TX								
TRAVEL ORDERS (Paragraph, S.O. No, Leaving Hq., Date) (Include amending orders)								
AGTX ORDERS, 042-213, DTD 3 MARCH 1993								
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 25 for Symbols)								
DATE 19 93	LOCAL TIME (24 Hour Clock)	PLACE Home, Office, Base, Activity, City and State, City and Country, etc.)	S- AVE TIME	Z- ONE TIME	COST OF LODGING	3. NUMBER OF MEALS		POC MILES
						GOVT	OPEN MESS	
2/28	DEP	1600 Camp Mabry, Austin GA			0	0	0	
2/28	ARR	2400 Waco, Texas			TD			
3/2	DEP	1000			GA			
3/2	ARR	1300 Camp Mabry, Austin			MC	0	0	
	DEP							
	ARR							
	DEP							
	ARR							
	DEP							
	ARR							
	DEP							
	ARR							
	DEP							
	ARR							
	DEP							
	ARR							
	DEP							
	ARR							
6. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS* (See Item 24)								
DATE	NATURE AND EXPLANATION		AMT. CLAIMED	ALLOWED	SUMMARY OF PAYMENT			
					Per Diem			
					Actual Expense			
					Mileage or Transp Allowances			
					Reimbursable Expenses			
6. Long distance telephone calls are certified as necessary in the interest of the Government.								
APPROVING OFFICER (31 USC 680a)								
7. TR-3/MTA-3/MTT-3 (If none, so state)								
NUMBER	FROM	TO	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								
12. <input checked="" type="checkbox"/> PER DIEM REQUESTED								
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.)								
by claim any amount due me. The statements on face, reverse, and id are true and complete. Payment or credit has not been received.								
14. PAYMENT CLASSIFICATION								
15. COLLECTION DATA								
16. DATE								

Z 0012495

REVIEWED BY: [REDACTED]

I HAVE VOUCHER OR SUBVOUCHER			(Complete by typewriter, ink, or ball point pen (PRESS HARD) do not use pencil)			
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM						
LAST NAME-FIRST NAME-MIDDLE INITIAL (Print/Type)			GRADE/RANK		SSN	
[REDACTED]			[REDACTED]		[REDACTED]	
CHECK MAILING ADDRESS (Include ZIP Code)			DUTY PHONE NO.			
[REDACTED]			465-5113			
ORGANIZATION AND STATION HHC, 49th DISCOM, PO Box 5218 (Camp Mabry) Austin, Tx 78763-5218						
TRAVEL ORDERS (Paragraph, J.O. No, Leading HQ., Date) (Include amending orders)						
AGTX Orders 042-222, dtd 3 Mar 93						
PRIORITY 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 (24 Hour Clock)	PLACE Home, Office, Base, Activity, City and State, City and Country, etc.)	MODE OF TRAVEL GA	2. REASON FOR TRAVEL TD	3. COST OF LODGING 0	4. NUMBER OF MEALS GOVT DED*
2/28	DEP 1600	Camp Mabry, Austin	GA	TD	0	0
2/28	ARR 2400	Waco, Texas	GA	TD	0	0
3/2	DEP 1000		GA	TD	0	0
3/2	ARR 1300	Camp Mabry, Austin	MC	TD	0	0
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
6. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS* (See Item 24)						
DATE	NATURE AND EXPLANATION		AMT. CLAIMED	ALLOWED		
6. Long distance telephone calls are certified as necessary in the interest of the Government.						
APPROVING OFFICER (J1 USC 660a)						
7. TRS/MTA/MT3 (If none, so state)						
NUMBER	FROM	TO				
	NONE					
8. LEAVE STATEMENT: _____ days _____ hours taken between _____ and _____						
9. POC TRAVEL: <input type="checkbox"/> OWNER/OPERATOR (See Item 23d) <input type="checkbox"/> PASSENGER						
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.						
10. RATING CLASSIFICATION						
11. PAYMENT DESIRED <input checked="" type="checkbox"/> CHECK <input type="checkbox"/> CASH						
12. <input checked="" type="checkbox"/> PER DIEM REQUESTED						
13. BAS RATE						
14. SIGNATURE OF CLAIMANT [REDACTED] DATE 2 MAR 93						
15. COLLECTION DATA						

Z 0017760

02 Mar 93

ADSOW

TRAVEL VOUCHER OR SUBVOUCHER		(Complete by typewriter, ink, or ball point pen (PRESS HARD) do not use pencil.) READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM.					
1. DO - FIRST NAME - MIDDLE INITIAL (Print Type)		GRADE/RANK	SSN		10. FOR DO USE ONLY		
2. CHECK MAILING ADDRESS (Include ZIP Code)		DUTY PHONE NO.		DO VOUCHER NO.			
3. ORGANIZATION AND STATION <i>Det 1 CCE 149th AB Austin, Texas</i>		SSN		SUBVOUCHER NO.			
TRAVEL ORDERS (Paragraph, S.O. No., Issuing HQ, Date)(Include amending orders) <i>040-071 AGTX-CO 1 Mar 93</i>		11. END AGTX-OTM-D					
PRIORITY TRAVEL PAYMENTS OR ADVANCES UNDER THESE ORDERS (Amount, DO Voucher No., Date received, Place paid, or DO Station No. if none, so state) <i>NONE</i>							
12. ITINERARY (See Item 25 for Symbols)							
DATE	LOCAL TIME (24 Hour Clock)	PLACE (Home, Office, Base, Activity, City and State; City and Country, etc.)	DE MOBIL TRAVEL	REG EXC TRAVEL	COST OF LODGING	3. NUMBER OF MEALS	4. POC OPEN MESS MILES
1893	DEP 1100	AUSTIN, TEXAS	GP				
1893	ARR 1500	LACO, TEXAS	GP	ID	76.50	10	0
1893	DEP 1700	AUSTIN, TEXAS	GP				
1893	ARR 1815	AUSTIN, TEXAS	GP				
1893	DEP	AUSTIN, TEXAS	GP				
1893	ARR	AUSTIN, TEXAS	GP				
1893	DEP	AUSTIN, TEXAS	GP				
1893	ARR	AUSTIN, TEXAS	GP				
1893	DEP	AUSTIN, TEXAS	GP				
1893	ARR	AUSTIN, TEXAS	GP				
1893	DEP	AUSTIN, TEXAS	GP				
1893	ARR	AUSTIN, TEXAS	GP				
5. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS * (See Item 24)							
DATE	NATURE AND EXPLANATION		AMT. CLAIMED	ALLOWED	SUMMARY OF PAYMENT		
	<i>NONE</i>				Per Diem		
					Actual Expense		
					Mileage or Transp. Allowances		
					Reimbursable Expenses		
6. Long distance telephone calls are certified as necessary in the interest of the Government APPROVING OFFICER /31 USC 680a/							
7. TR'S/MTA'S/MTS (If none, so state)							
NUMBER	FROM	TO	10. PAYMENT DESIRED				
	<i>NONE</i>		<input checked="" type="checkbox"/> CHECK <input type="checkbox"/> CASH				
8. LEAVE STATEMENT: <i>None</i> days <i>n/a</i> hours taken between <i>n/a</i> and <i>n/a</i>							
9. PO/DR TRAVEL <input type="checkbox"/> OWNER/OPERATOR (See Item 22d) <input type="checkbox"/> PASSENGER							
11. SIGNATURE OF PAYEE <i>[Signature]</i> (4)							
12. <input type="checkbox"/> PER DIEM REQUESTED.							
13. BAS RATE							
14. SIGNATURE OF PAYEE <i>[Signature]</i> (4)							
15. PAYMENT CLASSIFICATION <i>CEG</i>							
16. COLLECTION DATA							
17. COMPUTED BY		18. AUDITED BY		19. TFL RCRD POSTED BY		20. RECEIVED (Payee signature and date or check no.)	
21. AMOUNT PAID <i>[Signature]</i>							
DD FORM 1351-2 EDITION OF 1 JUL 65 WILL BE USED UNTIL EXHAUSTED.							
Exception to SF 1012 and 1012a approved by NARS, GSA April 1978.							

AO SW  
Page 2

TRAVEL VOUCHER OR SUBVOUCHER				(Complete by typewriter, ink, or ball point pen (PRESS HARD) do not use pencil)							
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM.											
NAME - FIRST NAME - MIDDLE INITIAL (Printed Type)				GRADE/RANK	SSN	10. FOR DO USE ONLY					
CHECK MAILING ADDRESS (Include ZIP Code)				DUTY PHONE NO.							
				512 495-9233							
ORGANIZATION AND STATION				SUBVOUCHER NO.							
11HC, AVN BDE 2001/CS 1 <sup>ST</sup> AETW, TX 78723				PAID BY							
TRAVEL ORDERS (Paragraph, S.O. No., Issuing Hq., Date)(Include amending orders)				AGTX-OTM-D							
042-162-050-AQD 93				3 MAR 1993 RECEIVED							
PRIORITY TRAVEL PAYMENTS OR ADVANCES UNDER THESE ORDERS (Amount, DO Voucher No., Date received, Place paid, or DO Station No. If none, so state)				4 MAR 1993 DATE OUT							
22 FEB 93 NONE				COMPUTATIONS							
11. ITINERARY (See Item 25 for Symbols)											
DATE	LOCAL TIME (24 Hour Clock)	PLACE (Home, Office, Base, Activity-City and State; City and Country, etc.)	MODE OF TRAVEL	REASON FOR STOP	COST OF LODGING	3. NUMBER OF MEALS	POC	MILES			
27 FEB	0900	AUSTIN, TX	GP								
27 FEB	1230	WACO, TX	TD		38.00						
28 FEB	1630	AUSTIN, TX	GP								
28 FEB	1730	AUSTIN, TX	MC								
	DEP										
	ARR										
	DEP										
	ARR										
	DEP										
	ARR										
	DEP										
	ARR										
	DEP										
	ARR										
	DEP										
5. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS (See Item 24)											
DATE	NATURE AND EXPLANATION		AMT. CLAIMED	ALLOWED	SUMMARY OF PAYMENT						
	None				Per Diem						
					Actual Expense						
6. Long distance telephone calls are certified as necessary in the interest of the Government.				APPROVING OFFICER (37 USC 680a)							
7. TR/S/MTA/S/MTS (If none, so state)				Total Entitlement							
NUMBER	FROM	TO									
8. LEAVE STATEMENT				Less Previous Payments							
days hours taken between and				Less Voucher Deductions							
9. POC TRAVEL: <input type="checkbox"/> OWNER/OPERATOR (See Item 22d) <input type="checkbox"/> PASSENGER				Amt. Charged to Acctg. Class.							
10. PENALTY: The penalty for willfully making a false claim is: A MAXIMUM FINE											
11. PAYMENT DESIRED <input checked="" type="checkbox"/> CHECK <input type="checkbox"/> CASH											
12. <input checked="" type="checkbox"/> PER DIEM REQUESTED											
13. BAR RATE											
14. SIGNATURE OF APPROVING OFFICER (U.S. Code, Title 18, Section 287)											
15. ACCOUNTING CLASSIFICATION											
16. COLLECTION DATA											
17. COMPUTED BY		18. AUDITED BY		19. TVL RCRO POSTED BY		20. RECEIVED (Payee signature and date or check no.)		21. AMOUNT PAID			
DD FORM 1351-2 EDITION OF 1 JUL 65 WILL BE USED UNTIL EXHAUSTED.								Exception to SF 1012 and 1012a approved by NARS, GSA April 1978.			

DD FORM 1351-2 EDITION OF 1 JUL 65 WILL BE USED UNTIL EXHAUSTED.

Exception to SF 1012 and 1012a approved by NARS, GSA April 1978.

28A0000

AGTX-SL (710-2e)

SUBJECT: Authority to Loan Federal Property for the USPFO for Texas

4. POC at this activity is [REDACTED] DSN: 954-5073, Commercial  
(512) 465-5073.

[REDACTED]  
2) COL, NGB  
USPFO For Texas

DISTRIBUTION:

AGTX-A

AGTC-M

AGTX-OTM

3) [REDACTED]

CF:  
Trp Cmd  
AGTX-L

**HAND RECEIPT/ANNEX NUMBER**  
**FRONT**  
*U S P F O 100-7-2 X AS*

**BACK**  
*1985 CO WMC CO*

**APT NUM**  
*100*

**For use of this form, see DA Pam 710-21.  
 The proponent agency is ODCSLOG.**

**Annex/Item**

**END ITEM STOCK NUMBER**

**END ITEM DESCRIPTION**

**PUBLICATION NUMBER**

**QUANTITY**

**STOCK NUMBER**

**ITEM DESCRIPTION**

**\* SEC SEC U AUTN**

**QTY**

**QUANTITY**

**87110-00-149-1094**

*immed ready to Eat MRE*

*per OT (M)*

*(244)*

*10*

*323*

*10*

<b>ITEM DESCRIPTION</b>	<b>* SEC SEC U AUTN</b>	<b>QTY</b>	<b>QUANTITY</b>	<b>PUBLICATION DATE</b>	
				<b>A</b>	<b>B</b>
<i>Draw 3 Mar 93</i>					
<i>2 Mar 93</i>					
<i>01110238</i>					

**# WHEN USED AS A:**

HAND RECEIPT, enter Hand Receipt Annex Number

HAND RECEIPT FOR QUARTERS FURNITURE, enter Condition Codes

HAND RECEIPT ANNEX/COMPONENTS RECEIPT, enter Accounting Requirements Code (ANCI)

**HAND RECEIPT/ANNEX NUMBER**  
For use of this form, see DA PAM 710-2-1.  
The proponent agency is ODCSLOG.

PROT  
ACFTY - C.D.

TO:  
FBI

ITEM  
NUMBER

HAND RECEIPT  
NUMBER

Z 0008178

ITEM ONLY	END ITEM STOCK NUMBER	END ITEM DESCRIPTION	PUBLICATION NUMBER	PUBLICATION DATE	QUANTITY	STOCK NUMBER							
						a.	b.	c.	d.	e.	f.	g.	h.
		SAND BAG, DESERT WODER SHIRT, BROWN				5404	4	4	4	4	4	4	4

\* WHEN USED AS A:

HAND RECEIPT, enter Hand Receipt Annex Number

HAND RECEIPT FOR QUARTERS FURNITURE, enter Condition Codes

HAND RECEIPT ANNEX/COMPONENTS RECEIPT, enter Accounting Requirements Code (ARC).