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SECRET 5025

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			OFFICE TRAVEL ORDER NO.				
TRAVEL ORDER			HANKIDE OR.				
			ALLOTMENT ACCOUNT SYMBOL				
30 August 1994 CARCHIAGE	101 .						
		OFFICE PHONE	GRADE AND SALARY				
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Agency Regulations.	ver and incur	. necessary ex	rbenses in secondance with				
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PURPOSE							
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COORDINATION, AS REQUIRED (TO BE EFFECTED BY ORIGIN.	ATING OFFICE)						
DD/P OTHER OPERATIONA		THEATER CLEARANCE	E (IF OBTAINABLE)				
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with Agency Regulations. Advance	of funds is	authorized.	<u></u> \$				
TRAVEL TO BEGIN ON OR ABOUT TERMINATING	G APPROXIMATELY	CERTIFICAT	ION (BY PROCESSING BRANCH)				
		Certific	ed a True Copy. Signed				
MODE OF TRAVEL (SPECIFY)			file in Central Process-				
			nch. Reviewed. No change				
ALLOWANCE FOR PRIVATELY OWNED AUTOMOBILE AS FOLLO	OWS IF APPLICABLE		ry. Amended as indicated.				
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The same of the sa	COMMON CARRIER	03/	har 1 x				
(B) SEVEN CENTS PER MILE, AS BEING MORE ADVANTAGEOUS TO							
THE GOVERNMENT.		 	BIGNATURE				
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IN CONNECTION WITH CHANGE OF STATION, YOU ARE AUTHORIZED TO TRANSPORT YOUR IMMEDIATE FAMILY, YOUR HOUSEHOLD GOODS, PERSONAL EFFECTS, SUBJECT TO WEIGHT LIMITS, RESTRICTIONS AND PROVISIONS AS SET FORTH IN AGENCY REGULATIONS.							
TRAVEL TO FIRST POST OF DUTY ABROAD, INCLUDING EXPENSES OF TRANSPORTATION OF IMMEDIATE FAMILY, HOUSEHOLD GOODS, PERSONAL EFFECTS AND AUTOMOBILE, IS AUTHORIZED.							
RETURN FROM POST OF DUTY ABROAD, INCLUDING EFFECTS AND AUTOMOBILE, IS AUTHORIZED.	EXPENSES OF TRANS	PORTATION OF IMMEDIA	ATE FAMILY, HOUSEHOLD GOODS, PERSONAL				
DEPENDENTS TO TRAVEL WITH EMPLOYEE. Hoted by RPD: 13 May 54							
DEPENDENTS TO TRAVEL WITHIN ONE YEAR OF EMPLOYEE.							
TEMPORARY DUTY. PRED H. S.OWELL, CAPT., ACC							
NAME AND TITLE OF AUTHORIZING OFFICIAL (TYPE)							
03		T					
(Frank S. Chaples, St./Alles			• 8 − 2				
	(DATE)	sig?	ATURE OF AUTHORIZING OFFICIAL				

FORM MOT 33-27 (124) (28-48)

PORT 1951 SUPERSEDES PREVIOUS EDITIONS OF FORMS 33-27, 33-28, 34-4, 34-4A, 34-5, 36-207 AND 37-50 WHICH MAY NOT BE USED.

\$\text{U. S. GOVERNMENT PRINTING OFFICE 1952 - 230611}

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yu are hereby authorized to travel and incur necessary expenses in accordance with gency Regulations.					
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PURPOSE	OBLIGAT	ION REFEREN	CE No.		
PURPOSE	CHARGE	TO ALLOTME	NT No.		
SPECIAL PROVISIONS (INCLUDE APPROPRIATE JUST	'IFICATION)		AUTHORIZING OFFICER		
coordination, as required (to be effected by originating office) DD/P					
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ALLOWANCE FOR PRIVATELY OWNED AUTOMOBILE AS	,		necessary. Amended as indicated.		
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RETURN FROM POST OF DUTY ABROAD, INCLUDING EXPENSES OF TRANSPORTATION OF ANY BOLD COODS, PERSONAL EFFECTS AND AUTOMOBILE, IS AUTHORIZED.					
DEPENDENTS TO TRAVEL WITH EMPLOYEE.					
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NAME AND TITLE OF AUTHORIZING OFFICIAL (TYPE)]				
frank E. Chaple, SE ACELS	(DATE)	BIGN	ATURE OF AUTHORIZING OFFICIAL		

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13 April 1954	,			ALLOTMENT ACCOUNT SYMBOL			
NAME		OFFIC	E PHONE	GRADE AND SALARY			
Lucien H. Commili	•		671	lajor - Ca			
Intelligence Offic			hington, I				
You are hereby authorized	to travel and in	ncur nece	ssary exp	enses in accordance with			
Agency Regulations.	•						
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COORDINATION, AS REQUIRED (TO BE EFFEC	TED BY OBIGINATING OFFI						
	RATIONAL AREAS		ER CLEARANCE	(IF ORTAINABLE)			
Maximum per diem allowance				ESTIMATED COST OF TRAVEL			
with Agency Regulations.	Advance of funds	is autho	rized.	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
TRAVEL TO BEGIN ON OR ABOUT	TERMINATING APPROXIMAT	ELY		N (BY PROCESSING BRANCH)			
MODE OF TRANSL SPECIFY)	<u>r. m. 193</u>			d a True Copy. Signed			
MODE OF TRAVEL (SPECIFY)	2- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-	,*		file in Central Process-			
ALLOWANCE PRIVATELY SWINED AND AND AND AND AND AND AND AND AND AN	BILE AS FOLLOWS IF APPL	ICABLE	_	ch. Reviewed. No change y. Amended as indicated.			
l –			necessar	y. Amended as indicated.			
(A) SEVEN CENTS PER MILE, NOT TO	EXCEED COST BY COMMON	CARRIER,		The second			
(B) SEVEN CENTS PER MILE, AS BEI	NG MORE ADVANTAGEOUS T	•		Contractiff			
				SIGNATURE			
THE CHANGE OF OFFICIAL STATION INDICATED IS EFFECTED IN THE INTEREST OF THE GOVERNMENT AND NOT FOR YOUR PERSONAL CONVENIENCE. IN CONNECTION WITH CHANGE OF STATION, YOU ARE AUTHORIZED TO TRANSPORT YOUR IMMEDIATE FAMILY, YOUR HOUSEHOLD GOODS, PERSONAL EFFECTS, SUBJECT TO WEIGHT LIMITS, RESTRICTIONS AND PROVISIONS AS SET FORTH IN AGENCY REGULATIONS.							
TRAVEL TO FIRST POST OF DUTY ABR	OAD, INCLUDING EXPENSES ORIZED.	OF TRANSPORT	ATION OF IMME	DIATE FAMILY, HOUSEHOLD GOODS, PERSONAL			
RETURN FROM POST OF DUTY ABROATED FROM EFFECTS AND AUTOMOBILE, IS AUTHORITIES.	AD, INCLUDING EXPENSES O	F TRANSPORTA	TION OF IMMEDI	ATE FAMILY, HOUSEHOLD GOODS, PERSONAL			
l ¬		_					
DEPENDENTS TO TRAVEL WITH EMPL	three are t	orders :	equired b	y 1670: 15 Apr 54			
DEPENDENTS TO TRAVEL WITHIN ON	E YEAR OF EMPLOYEE.		:- !	San			
NAME AND TITLE OF AUTHORIZING OFFICIAL	(TYPE)	CHIEFFIN IN	CENTRAL P	CAPP. AGC			
O3		ennu b	, eioreki	, UAPP., ASC			
Frenk M. Chapla, SE/AU	XIX						
	(1	DATE)	BIGNA	TURE OF AUTHORIZING OFFICIAL			

SECURITY INFORMATION STANDARD FORM 52 SECRET PROMULGATED BY THE B. S. CHYL SERVICE COMMISSION VOUCHERED REQUEST FOR PERSONNEL ACTION REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse. & DATE OF REQUEST 1 REQUEST NO. 2 DATE OF BIRTH L NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) 20 Oct 199 29 Nov 1919 261-53 Lucien E. CONEIN 7. C.S. OR OTHER LEGAL AUTHOR-ITY & EFFECTIVE DATE 1 NATURE OF ACTION REQUESTED:
A PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment (Key Personnel) RECORDED DE B. POSITION (Specify whether establish, change grade or title, etc.) CONTROL DESK & POSITION TITLE AND Intell. Officer BD-49 FROM- Operations Officer (F) 45-1 Major USA S SERVICE GRADE AND SALARY USA liajor DDP/SE DDP/SE 10. ORGANIZATIONAL DESIGNATIONS albonian Branch (German) Hission Office of the hief Hurnberg Ops. Pase Washington, D. C. Nurnberg, Germany 11. HEADQUARTERS DEPARTMENTAL 12 FIELD OR DEPARTMENTAL DEPARTMENTAL X FIELD A REMARKS (Use reverse if necessary) Pransfer TO Vouchered Funds FROM Unvouchered Funds. Concurrence: EE Division D. REQUEST APPROVED BY B, REQUESTED BY (Name and title) (JOSEPH EURK) SE/ADMIN Signature: S. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) Title: (ROBERT LUNUS) X_3965 14. POSITION CLASSIFICATION ACTION 13. VETERAN PREFERENCE NEW VICE LA. REAL CD - FI NONE WWII OTHER 5-PT. 10-POINT DISAB. OTHER 20. LEGAL RESIDENCE 19. DATE OF APPOINT-MENT AFFIDAVITS (ACCESSIONS ONLY) X 18. SUBJECT TO C. S. RETIREMENT ACT CLAIMED PROVE 17. APPROPRIATION 16. RACE 15. SEX (YES-NO) 3130 - 55 - 017 HO 4 - 3200 - 20 21. STANDARD FORM 50 REMARKS Remain Annious has been granted for INITIAL OR SIGNATURE DATE 22. CLEARANCES B. CEIL. OR POS. CONTROL C. CLASSIFICATION D. PLACEMENT OR EMPL

5/p

F. APPROVED BY

14-00000

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