U.S. Department of Justice United States Marshals Service

APPROVED

SPECIAL ASSIGNMENT No. (b)(7)(E) (b)(7)(E) PROJECT CODE TO: Program Manager Operational Division (JSD, ISD, PSD, etc.): JSD (b)(6); (b)(7)(C); (b)(7)(F) FROM: JSD/OPO 1st Cir United States Marshal, Chief Deputy, or designee District: **District of Massachusetts** Circuit:01 1. Detail Name: 11/15/19 to 11/17/19 Protection Detail-Justice Alito (b)(7)(E) MA (For WITSEC use W.C. No.; For Extraditions use Case No.; For Trials, use Case Title, Docket No., and Judge's Name) 2. Location of Detail: (b)(7)(E) MA **District of Massachusetts** Host District: Circuit:01 Overseas Travel?: No

 3. Starting Date:
 11/15/2019 (mm/dd/yyyy)
 Ending Date:
 11/17/2019 (mm/dd/yyyy)
 Number of Days/Weeks:
 3

 REQUEST FOR SPECIAL ASSIGNMENTS RESOURCES

| <ol><li>Descri</li></ol> | ption: |
|--------------------------|--------|
|--------------------------|--------|

Program Type: C Detail Type: F ESU / SOG: Case Type:

Court Security Protection Detail - Supreme Court Justices

Brief Description of Detail: (Based upon the complexity, national importance, or threat level of an assignment, the Operational Division may require the submission of additional supportint documentation)

| 5. No. of Defendants in custody: Total No. of Defendants: No. USMS In-Custody Witnesses: |
|--|
| No. of Defendents is sustaining. Total No. of Defendents:                                |
| 5. No. of Defendants in custody: Total No. of Defendants: No. USMS In-Custody Witnesses: |

7. Has the Operational Plan been submitted? Yes

| 8. Host/Trial District Information:<br>No. of District DUSMs on Special Assignment:<br>No. of In-District DUSMs committed to staff this detail: (b)(7)(E) |  |
|---|--|
| 9. Are you requesting Out-of-District Assistance? (check one) No<br>No. of DUSMs  |  |

SDUSMs

Admin.

10. Will you accept GS-082 (DUSMs) / GS-1802 (DEOs)? (check one)

#### 11. Will the detail incur overtime? (check one)

| Scheduled Detail Ho                          |                                  |   |                      | Scheduled | Days: MonFri.             |   |                |   |               |   |                 |
|--|----------------------------------|---|----------------------|-----------|---------------------------|---|----------------|---|---------------|---|-----------------|
| Overtime Estimate C<br>In-District<br>(1811) | Computation:<br>Hourly Rate<br>0 | x | Detail OT hours<br>0 | =         | Subtotal<br><b>\$0.00</b> | x | No. DUSMS<br>0 | x | No. Days<br>0 | = | TOTAL<br>\$0.00 |
| In-District<br>(082/1802)                    | 0                                | x | 0                    | =         | \$0.00                    | x | 0              | x | 0             | = | \$0.00          |
| Out-of-District<br>(1811)                    | Hourly Rate<br>0                 | x | Detail OT hours<br>0 | =         | Subtotal<br><b>\$0.00</b> | x | No. DUSMs<br>0 | x | No. Days<br>0 | = | TOTAL<br>\$0.00 |
| Out-of-District<br>(082/1802)                | 0                                | x | 0                    | =         | \$0.00                    | x | 0              | x | 0             | = | \$0.00          |

#### 12. Will the detail incur per diem? (check one)

| Per Diem Estim  | ate Computation:<br>Daily Rate<br>0 | x | No. of Days<br>0        | = | Subtotal<br><b>\$0.00</b> | x | No. DUSMS<br>0 | = | TOTAL<br>\$0.00 |
|-----------------|-------------------------------------|---|-------------------------|---|---------------------------|---|----------------|---|-----------------|
| Out-of-District | Daily Rate<br>0                     | x | No. of Days<br><b>0</b> | = | Subtotal<br><b>\$0.00</b> | x | No. DUSMS      | = | TOTAL<br>\$0.00 |

# 13. Will the detail incur guard expense? (check one) Are these guards being used as backfill? (check one)

| 0                               |          |                   |   |                           |   |                 |   |               |   |                 |
|---------------------------------|----------|-------------------|---|---------------------------|---|-----------------|---|---------------|---|-----------------|
| 0                               | x        | 0                 | = | \$0.00                    | x | 0               | x | 0             | = | \$0.00          |
| Out-of-District<br>Hourly Rate  | 27 . 125 | Detail Hours      |   | Subtotal                  |   | No. Guards      |   | No. Days      |   | TOTAL           |
| In-District<br>Hourly Rate<br>0 | x        | Detail Hours<br>0 | = | Subtotal<br><b>\$0.00</b> | x | No. Guards<br>0 | x | No. Days<br>0 | = | TOTAL<br>\$0.00 |

### 14. Will the detail incur other expenses? (check one) Yes

| Expense:     | \$1,242.00   |
|--------------|--|
| Description: | OT only. No Guard funding requested (Weekend Detail) |

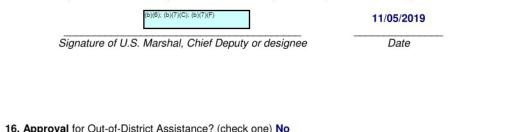
| 15. DEPUTY REPORTING INFORMA<br>City/District Location:<br>Reporting Date/Time: | TION/SPECIAL INSTRUCTIONS:<br>(mm/dd/yyyy) | (b)(7)(E)<br>(hour) | Per Diem Rate:<br>Hotel Name:<br>Hotel Telephone: |
|---|--|---------------------|---|
| Detail Supervisor:<br>Detail Supervisor Phone:                                  | (b)(6); (b)(7)(C); (b)(7)(F)               |                     |   |
| Special Instructions/Other relate   | ed information:                            |                     |   |
| (b)(ð): (b)(ở)(C): (b)(ở)(E)  |  |                     |   |
| OT not worked will not be   | e claimed.                                 |                     |   |
| (b)(7)(E)   |  |                     |   |
| Special Equipment or Personne<br>(b)(6); (b)(7)(C); (b)(7)(E); (b)(7)(F)        | Pl Required:                               |                     |   |

OT (b)(7)(E)

(b)(7)(E)

(b)(7)(E)

# I certify that the above manpower/funds will be expended only on the above-captioned detail.



| Type/Number of Personnel Required: No. of DUSMs SDUSMs | Admin. |
|--|--------|

#### 17. Approval for overtime? (check one) Yes

| Scheduled Deta                           | il Hours (b)(7)(                | E)     |                             | Schedul | ed Days: MonFri.          | <u>n 14. m</u> |                |   |               |   |                 |
|--|---------------------------------|--------|-----------------------------|---------|---------------------------|----------------|----------------|---|---------------|---|-----------------|
| Overtime Estima<br>In-District<br>(1811) | ate Computa<br>Hourly Rate<br>0 |        | Detail OT hours<br><b>0</b> | =       | Subtotal<br><b>\$0.00</b> | x              | No. DUSMS<br>0 | x | No. Days<br>0 | = | TOTAL<br>\$0.00 |
| In-District<br>(082/1802)                | 0                               | x      | 0                           | =       | \$0.00                    | x              | 0              | x | 0             | = | \$0.00          |
| Out-of-District<br>(1811)                | Hourly Rate<br>0                | e<br>x | Detail OT hours<br>0        | =       | Subtotal<br><b>\$0.00</b> | x              | No. DUSMs<br>0 | x | No. Days<br>0 | = | TOTAL<br>\$0.00 |
| Out-of-District<br>(082/1802)            | 0                               | x      | 0                           | =       | \$0.00                    | x              | 0              | x | 0             | = | \$0.00          |

# 18. Approval for per diem? (check one) No

| Per Diem Estimat | e Computation:  |   |                         |   |                           |   |                |   |                 |
|------------------|-----------------|---|-------------------------|---|---------------------------|---|----------------|---|-----------------|
| In-District      | Daily Rate<br>0 | x | No. of Days<br>0        | = | Subtotal<br><b>\$0.00</b> | x | No. DUSMS<br>0 | = | TOTAL<br>\$0.00 |
| Out-of-District  | Daily Rate<br>0 | x | No. of Days<br><b>0</b> | = | Subtotal<br><b>\$0.00</b> | x | No. DUSMS<br>0 | = | TOTAL<br>\$0.00 |

# 19. Approval for guard expense? (check one) No

|              | = \$0.00          | x | 0          | × | 0        | = | \$0.00 |
|--------------|-------------------|---|------------|---|----------|---|--------|
|              |                   |   |            |   |          |   |        |
| Detail Hours | Subtotal          |   | No. Guards |   | No. Days |   | TOTAL  |
| 0            | = \$0.00          | х | 0          | х | 0        | = | \$0.00 |
|              | Detail Hours<br>0 |   |            |   |          |   |        |

# 20. Approval for detail other expenses? (check one) No

| Expense:     | \$1,242.00                             |
|--------------|--|
| Description: | See box 15 for complete cost breakdown |

| TOTAL REQUESTED FUNDS   | \$1,242.00 |
|-------------------------|------------|
| TOTAL APPROVED FUNDS    | \$1,242.00 |
| APPROVAL LEVEL REQUIRED | OST        |

THIS ASSIGNMENT IS: APPROVED/DISAPPROVED BY:



DATE: 11/05/2019

2022-USMS-000356 ALITO 2019 FINAL 07 of 17

#### COMMENTS:

SI (\*)(\*)(\*)(\*)(\*)(\*)(\*) is the P.O.C. for this assignment, USE THE SA# WHEN SENDING QUESTIONS,

(b)(7)(E)

# The supplemental funding request; **``11/15/2019 -11/17/2019 - SCJ Alito Protection Detail**, **`**<sup>(P)(T)(E)</sup> **MA''** has been approved at the level indicated. Any JSD authorized overtime and/or guard funding is valid *only* during the time-frame specified above.

#### 

\$0 guard funding approved

Fiscal Year: 2020 Fund Code: (%7)(E) Special Assignment Number: (%7)(E)

To charge your **Overtime and Guard hours in WebTA**, use the **district's codes:** Org Code 2: Org Code 4: (Include the Project Code: ())(7)(E)

2022-USMS-000356 ALITO 2019 FINAL 08 of 17

| To o      | charge | e your | travel    | in   | E2, | use |
|-----------|--------|--------|-----------|------|-----|-----|
| JSD'      | s coo  | des:   |           |      |     |     |
| Org       | Code   | 2:     | (b)(7)(E) |      |     |     |
| Org       | Code   | 4:     |           |      |     |     |
|           |        | Pr     | oject Co  | ode: |     |     |
| (b)(7)(E) |        |        |           |      |     |     |

Funds control will rest upon the supervisor that approves the final E2 Travel document and/or the webTA document for participating DUSMs. The amount of travel, overtime, and guard funding (if applicable) approved by OSB on the JSD USM-535 should not be exceeded without prior

#### authorization from OSB. To

exceed the amount approved may place the project code in the negative. Please ensure adequate cost accountability controls are in place that provide direct oversight of your special assignment funding burnrate in order to remain within the approved funding authorization. For any supporting personnel traveling, please ensure the Special Assignment Number is recorded on their E2 travel authorization/approval. Reimbursement for GOV fuel for this event is not authorized.

THIS ASSIGNMENT IS: APPROVED/DISAPPROVED BY: COMMENTS:

DATE:

THIS ASSIGNMENT IS: APPROVED/DISAPPROVED BY: COMMENTS:

DATE:

THIS ASSIGNMENT IS: APPROVED/DISAPPROVED BY: COMMENTS:

DATE:

Justice Alito <sup>(b)(7)(E)</sup> MA Nov 2019.doc

| MAD  | HAL        | )              |         | Unite<br>Marsha         | d State<br>Ils Serv |          |                      | South Barrier    |             |
|--|------------|----------------|---------|-------------------------|---------------------|----------|----------------------|------------------|-------------|
| U.S. Departm   | ent of Jus | tice           |         | JSD A                   | pproved             |          | Juc                  | dicial Security  | Event       |
| NSTRUCTIONS:<br>Jse this form to requ<br>Note: All boxes with                        |            |                |         | , travel, and dis       | trict security      | office   | staffing.            |                  |             |
| Submission Number:   |            | are requi      | rea.    | Ente                    | er the Protec       | tive As  | sessment Num         | ber assigned:    |             |
| (k)(7)(E)  |            |                |         |                         | 7)(E)               |          |                      |                  |             |
| (b)(6); (b)(7)(C); (b)(7)  | (F)        |                |         | Title:<br>OPO Inspector | r                   |          |                      |                  |             |
| Circuit:   |            | Dist           | rict/Di | vision:                 |                     |          |                      |                  |             |
| 2  |            |                |         | curity Division         |                     |          |                      |                  |             |
| Mission Name: (ex. U<br>Justice Alito Protect  |            |                | nith As | sistance, USDC          | J Smith Prote       | ective R | esponse, 12th (      | Circuit Judicial | Conference) |
| ocation of Event: (S   |            |                |         |                         | Event City:         |          |                      | Event            | State:      |
| New York   |            |                |         |                         | New York            |          |                      | NY               |             |
| lost District:<br>Southern District of I   | Now Yest   |                |         |                         |                     |          |                      |                  |             |
| outhern District of I<br>Detail Type:  | vew rork   |                |         |                         |                     |          |                      |                  |             |
| Supreme Court Justic   | e Assista  | nce            |         |                         |                     |          |                      |                  |             |
| evel:  | _          |                |         |                         | Active/Ret          | ired:    |                      |                  |             |
| Description of Event   | _          |                |         |                         | Active              |          |                      |                  |             |
| of Protected Perso   | ns: # of # | Attendee       | s:      | # of Defen              | idants:             |          | Defendants<br>stody: | # of Witne       |             |
| BW7M   | 0          | attenuee       | 5.      | 0                       | iuants.             | 0        | stouy.               | 0                |             |
| stimated Local Lodg  | ing Rate:  |                | -       | mated Local Pe          | r Diem Rate:        |          |                      | cal Required     | Misc:       |
| \$0.00   |            |                | \$0.0   | 00                      |                     |          | \$0.00               |                  |             |
| ANTICIPATED TOTAL  | DURATIC    | N OF EV        | ENT     |                         |                     |          |                      |                  |             |
|  |            |                | Deta    | il Start Date:          |                     |          | Detail End D         | ate:             |             |
|  |            |                | 3/2     | 28/2019                 |                     |          | 4/2/2019             |                  |             |
|  |            |                |         |                         |                     |          |                      |                  |             |
| ravel Date:<br>3/27/2019   | eks/Mon    | ths: 7         |         |                         | Specify: Da         | ays      |                      |                  |             |
| ravel Date:<br>3/27/2019<br>Jumber of Days/We<br>DAILY SCHEDULE                      |            |                |         |                         |                     |          |                      |                  |             |
| Travel Date:<br>3/27/2019<br>Number of Days/We<br>DAILY SCHEDULE<br>Sun              |            | ths: 7<br>Mond | day     | Tuesday                 | Specify: Da         |          | Thursday             | Friday           | Saturda     |
| Travel Date:<br>3/27/2019<br>Number of Days/We<br>DAILY SCHEDULE<br>Start Time:      |            |                | day     | Tuesday                 |                     |          | Thursday             | Friday           | Saturday    |
| ravel Date:<br>3/27/2019<br>Number of Days/We<br>DAILY SCHEDULE<br>Sun               |            |                | day     | Tuesday                 |                     |          | Thursday             | Friday           | Saturday    |
| Travel Date:<br>3/27/2019 Vumber of Days/We DAILY SCHEDULE Sun Start Time: End Time: | day        | Mono           |         |                         | Wedne               | sday     | Thursday             | Friday           | Saturda     |
| Travel Date:<br>3/27/2019 Vumber of Days/We DAILY SCHEDULE Sun Start Time: End Time: | day        | Mono           |         |                         | Wedne               | sday     | Thursday             | Friday           | Saturda     |
| Travel Date:<br>3/27/2019<br>Number of Days/We<br>DAILY SCHEDULE<br>Start Time:      | day        | Mono           |         |                         | Wedne               | sday     | Thursday             | Friday           | Saturd      |

| Overtime Ho<br>b)(7)(E)  |   |                                  | # of Day   | <b>j</b> 5.      |         |        | # of 18                            |                   |                | Total     |                      |
|--|---|----------------------------------|--|------------------|---------|--------|------------------------------------|-------------------|----------------|-----------|----------------------|
| Overtime Ho  | ours/Day:   |                                  | # of Day   | /5:              |         |        | # of 08                            | 3.7               |                | Total     |                      |
| 0  |   |                                  | 0  |                  |         |        | 0                                  |                   |                | \$0.0     |                      |
| GUARDS   |   |                                  |  |                  |         |        |                                    |                   |                |           |                      |
| Hours per Da   |   | # of D                           | ays:   |                  |         | Persor | ns:                                |                   | y Rate:        | _         | Total:               |
| 0  |   | 0                                |  |                  | 0       |        |                                    | (b)(7)(E          | ų.             |           | \$0.00               |
| TRAVEL<br>Number of  | Full Day  | Eir                              | st and   | Lodging T        | [otal   |        | Miloago                            | Airfare           | ATM, Lau       | undru     | Subtotal             |
| Full M&IE<br>Days (Do<br>not include<br>first and<br>last days)  | M&IE  | Las<br>(759<br>x 2<br>ti<br>long | t Days<br>6 M&IE<br>days, if<br>rip is<br>ger than<br>day)   | (Inclue<br>taxes | le      |        | otal                               | Total             | Baggage        |           | Subtotai             |
| 0  | \$0.00  | \$0.0                            | 0  | \$0.00           |         | \$0.00 |                                    | \$0.00            | \$0.00         |           | \$0.00               |
| TOTAL OTHE   | R   |                                  |  |                  |         |        |                                    |                   |                |           |                      |
| \$0.00   |   |                                  |  |                  |         |        |                                    |                   |                |           |                      |
| OUT OF DIST  | RICT  |                                  |  |                  |         |        |                                    |                   |                |           |                      |
| Are you requ   | esting out  | of dist                          | rict assis   | stance?          | es      |        |                                    |                   |                |           |                      |
| Number of a  | perational  | perso                            | nnel req   | uested(b)        | (7)(E)  |        | Numbe                              | r of adminis      | trative per    | sonne     | l requested:         |
| Total estima   | ted travel o  | osts:                            | (b)(7)(E)  |                  |         |        |                                    |                   |                |           |                      |
| REPORTING  |   |                                  |  |                  |         |        |                                    |                   |                |           |                      |
| Reporting Da   | 3/27/   | 2019                             |  |                  |         |        | Reporti                            | ng Time: 🔟        | (7)(E)         |           |                      |
| Address:   |   |                                  |  |                  |         | -      | City:                              |                   |                | te:       |                      |
|  |   |                                  |  |                  |         |        |                                    |                   |                |           |                      |
| Special Equi   | pment Requ  | uired f                          | or Repo  | rting Pers       | onnel   | :      |                                    |                   |                |           |                      |
| (b)(7)(E)  |   |                                  |  |                  |         |        |                                    |                   |                |           |                      |
| Special Skills<br>(b)(7)(E)  | Requested   | :                                |  | _                |         |        |                                    |                   |                |           |                      |
|  |   |                                  |  | 4                |         |        |                                    |                   |                |           |                      |
| Special Instr  |   |                                  |  |                  |         |        |                                    |                   |                |           |                      |
|  |   |                                  | ting Per   | sonnel:          |         |        |                                    |                   |                |           |                      |
| will provide   | via individi<br>E/INVESTIG  | ual e-i                          | mail<br>N  |                  | assoc   | iated  | with the                           | e event:          |                |           |                      |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)   | via individi<br>E/INVESTIG  | ual e-rio                        | mail<br>N<br>ribing an   | y threats        |         |        |                                    | e event:          |                |           |                      |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)<br>(b)(7)(E)<br>Has the Offic<br>Explanation:   | via individi<br>E/INVESTIC<br>ef narrative  | ual e-i<br>GATIO<br>e desc       | mail<br>N<br>ribing an   | y threats        |         |        |                                    | e event:          |                |           |                      |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)<br>(b)(7)(E)<br>Has the Offic<br>Explanation:   | via individi<br>E/INVESTIC<br>ef narrative  | ual e-i<br>GATIO<br>e desc       | mail<br>N<br>ribing an   | y threats        |         |        |                                    | e event:          |                |           |                      |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)<br>Has the Offic<br>Explanation:<br>NOTES TO OI   | via individi<br>E/INVESTIG<br>ef narrative<br>e of Protect  | ual e-i<br>ATIO<br>e desc        | mail<br>N<br>ribing an<br>ribing an<br>n<br>telligen   | y threats        | otified | d? Yes |                                    |                   | pr Justice [tb | )(6); (b) | (7)(C) //thout over  |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OI<br>b)(7)(E)<br>to supply stat<br>DETAIL SUPE<br>Name:<br>N(6): (b)(7)(C):   | via individi<br>E/INVESTIG<br>ef narrative<br>e of Protect<br>PERATIONS<br>ffing the de<br>RVISOR, DE<br>(b)(7)(F)                  | tive Ir                          | mail N tibing an | e to effect      | otified | d? Yes | erationa<br>O Inspect              | a) Title:<br>ctor | pr Justice (b  | )(6): (b) | (7)(C) /ithout over  |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OI<br>b)(7)(E)<br>to supply sta<br>DETAIL SUPE<br>Name:<br>N(6); (b)(7)(C);<br>Office Phone | via individi<br>E/INVESTIC<br>ef narrative<br>ef narrative<br>ef of Protect<br>PERATIONS<br>ffing the de<br>RVISOR, DE<br>(b)(7)(F) | tive Ir                          | mail N tibing an | e to effect      | otified | d? Yes | e<br>MARGE<br>erationa<br>O Insper | a) Title:<br>ttor | or Justice [b  | )(6); (b) | (7)(C) ithout over   |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)<br>(b)(7)(E)<br>das the Office<br>sxplanation:<br>NOTES TO OI<br>b)(7)(E)<br>co supply sta<br>DETAIL SUPE<br>Name:<br>N(6); (b)(7)(C);    | via individi<br>E/INVESTIC<br>ef narrative<br>ef narrative<br>ef of Protect<br>PERATIONS<br>ffing the de<br>RVISOR, DE<br>(b)(7)(F) | tive Ir                          | mail N tibing an | e to effect      | otified | d? Yes | erationa<br>O Inspect              | a) Title:<br>ttor | or Justice [b  | )(6); (b) | (7)(C) /ithout over  |
| will provide<br>NTELLIGENC<br>Provide a bri<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OI<br>b)(7)(E)<br>to supply sta<br>DETAIL SUPE<br>Name:<br>N(6); (b)(7)(C);<br>Office Phone | via individi<br>E/INVESTIC<br>ef narrative<br>ef narrative<br>ef of Protect<br>PERATIONS<br>ffing the de<br>RVISOR, DE<br>(b)(7)(F) | tive Ir                          | mail N tibing an | e to effect      | otified | d? Yes | e<br>MARGE<br>erationa<br>O Insper | a) Title:<br>ttor | or Justice [b  | )(6); (b) | (/7)(C) /ithout over |

draft Ops Plan Justice Alito\_03-27\_thru\_04-02.pdf

|   | TOTAL DU   | RATIO   |   |  |   |                    |          |                            |              |
|---|--|---|---|--|---|--------------------|----------|----------------------------|--------------|
| ravel Date:<br>3/27/2019  |  |   |   | ail Start Date:<br>28/2019   |   | Detail E<br>4/2/20 |          | :                          |              |
|   | A 1  |   |   | 20/2019  | Specify: Days   |                    | 19       |                            |              |
| AILY SCHEDU   |  | /Mont   | ths: /  |  | Specity: Days   |                    |          |                            |              |
|   | Sund   | lay   | Monday  | Tuesday  | Wednesda  | y Thursday         | ,        | Friday                     | Saturda      |
| Start Time  | :  |   | (b)(7)(E)   |  |   |                    |          |                            |              |
| End Time  | :  |   |   |  |   |                    |          |                            |              |
|   |  |   |   |  |   |                    |          |                            |              |
|   | include fi   | unding  | g for Saturdays   | , Sundays, and/  | or Holidays?  | es                 |          |                            |              |
| N DISTRICT  |  |   |   | Vor  |   |                    |          |                            |              |
| Dvertime Hou  |  |   | rict resources?<br># of Days:   | 163  | # of 1811:  |                    | Total:   |                            |              |
| )(7)(E)   |  |   | 2   |  | (b)(7)(E)   |                    | (b)(7)(E |                            |              |
| Overtime Hou  | rs/Day:  |   | # of Days:  |  | # of 082:   |                    | Total:   |                            |              |
| 0   |  |   | 0   |  | 0   |                    | \$0.00   |                            |              |
| GUARDS<br>Hours per Day   | <i>r</i> :   | # of D  | avs:  | # of Person  | IS: H   | ourly Rate:        |          | Total:                     |              |
| 0   |  | 0   |   | 0  |   | (b)(7)(E)          |          | \$0.00                     |              |
| TRAVEL  |  |   |   | 1  |   |                    |          |                            |              |
| Number of<br>Full M&IE<br>Days (Do not<br>include first<br>and last days)   |  | M&IE  | Days (75%<br>M&IE x 2<br>days, if trip is<br>longer than 1  |  | POV/Mileage<br>Total  | Airfare Total      | Lau      | TM,<br>indry,<br>age, etc. | Subtotal     |
| 0   | \$0.00   |   | day)<br>\$0.00  | \$0.00   | \$0.00  | \$0.00             | \$0.00   |                            | \$0.00       |
| 64  | La construction of the second  |   |   | 1 Manual Andrews   | Concernant of the second se | I Concerne         | Lincole  |                            | Carrier      |
| TOTAL OTHER   |  |   |   |  |   |                    |          |                            |              |
| \$0.00<br>lotes:<br>UUT OF DISTR<br>lumber of op  | ICT<br>erational p   |   | nnel requested  | (b)(7)(E)  | Number of ad  | iministrative pe   | ersonne  | l request                  | ted:         |
| TOTAL OTHER<br>\$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>rotal estimate<br>Note:  | ICT<br>erational p   |   |   | b)(7)(E)   | Number of ad  | lministrative po   | ersonne  | l request                  | ted:         |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>Total estimate<br>Note:   | ICT<br>erational p<br>d travel co  |   |   | (b)(7)(E)  | Number of ad  | dministrative po   | ersonne  | I request                  | ted:         |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op  | ICT<br>erational p<br>id travel co   | osts:   | (b)(7)(E)   | (b)(7)(E)  | Number of ad  | lministrative pe   | ersonne  | l request                  | ted:         |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL   | ICT<br>erational p<br>ed travel co<br>owing field  | osts:   | (b)(7)(E)<br>required.  |  | Number of ad  | iministrative pe   | ersonne  | l request                  | ted:         |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es   | ICT<br>erational p<br>ed travel co<br>owing field  | osts:<br>ds are<br>\$20,  | (b)(7)(E)<br>required.<br>.932.00   | (b)(7)(E)  | Number of ad  | Iministrative pa   | ersonne  | l request                  | ted:         |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:   | ICT<br>erational p<br>d travel co<br>owing field<br>timate:  | osts:<br>Is are<br>\$20,<br>Appr  | (b)(7)(E)<br>required.  | ]  | Number of ad  | Iministrative po   | ersonne  | il request                 | ted:         |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:   | ICT<br>erational p<br>d travel co<br>owing field<br>timate:  | osts:<br>Is are<br>\$20,<br>Appr  | (b)(7)(E)<br>required.<br>,932.00   | ·  | Number of ad  | Iministrative po   | ersonne  | I request                  | ted:         |
| \$0.00<br>lotes:<br>DUT OF DISTR<br>lumber of op<br>fotal estimate<br>lote:<br>DETAIL TOTAL<br><i>lote: The follo</i><br><i>cotal Detail Es</i><br>Detail Status:   | ICT<br>erational p<br>d travel co<br>owing field<br>timate:  | osts:<br>Is are<br>\$20,<br>Appr  | (b)(7)(E)<br>required.<br>,932.00   | ·  | Number of ad  | Iministrative po   | ersonne  | l request                  | ted:         |
| \$0.00<br>lotes:<br>DUT OF DISTR<br>lumber of op-<br>fotal estimate<br>lote:<br>DETAIL TOTAL<br>lote: The follo<br>fotal Detail Est<br>Detail Status:<br>lame (b)(6): (b  | ICT<br>erational p<br>d travel co<br><i>owing field</i><br><i>timate:</i><br>)(7)(C): (b)(                     | osts:<br>Is are<br>\$20,<br>Appr  | (b)(7)(E)<br>required.<br>,932.00   | ·  | Number of ad  | Iministrative po   | ersonne  | I request                  | ted:         |
| \$0.00<br>Jotes:<br>DUT OF DISTR<br>Jumber of op-<br>fotal estimate<br>Jote:<br>DetAil TOTAL<br>Jote: The follo<br>Total Detail Est<br>Detail Status:<br>Jame (b)(6): (b)   | ICT<br>erational p<br>d travel co<br>owing field<br>timate:<br>)(7)(C): (b)(<br>L                              | szo,<br>Appr<br>77)(F)  | (b)(7)(E)<br>required.<br>,932.00<br>oved   | ·  |   |                    | rsonne   |                            | ted:         |
| \$0.00<br>Jotes:<br>Jumber of op<br>Total estimate<br>Jote:<br>DETAIL TOTAL<br>Jote: The follo<br>Total Detail Es<br>Detail Status:<br>Jame (b)(6): (b<br>SD APPROVA<br>Special Assign  | ICT<br>erational p<br>d travel co<br>owing field<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Num                  | sosts:<br>szo,<br>Appr<br>7)(F)<br>nber:  | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)  | ·  | Number of ad  |                    | ersonne  |                            |              |
| \$0.00<br>Jotes:<br>JUT OF DISTR<br>Jumber of op<br>otal estimate<br>Jote:<br>Jote:<br>DETAIL TOTAL<br>Jote: The follo<br>Total Detail Ess<br>Detail Status:<br>Jame (D)(5); (D<br>SD APPROVA<br>Special Assign<br>Total Approve  | ICT<br>erational p<br>d travel co<br>owing field<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Num                  | ds are           \$20,           Appr           7)(F)           nber:           t:           \$26,                                      | (b)(7)(E)<br>required.<br>.932.00<br>oved<br>(b)(7)(E)<br>332   |  | Project Code:   |                    | ersonne  |                            |              |
| \$0.00<br>Jotes:<br>Jumber of op-<br>fotal estimate<br>lote:<br>Detail status:<br>Jame (D)(G): (D<br>SD APPROVA<br>Special Assign<br>Fotal Approve<br>< or = \$25K  | ICT<br>erational p<br>d travel co<br>owing field<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Nun<br>d Amount      | sts         sts           \$20,         Appr           \$20,         Appr           http://www.com/com/com/com/com/com/com/com/com/com/ | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:   |  | Project Code:   |                    | ersonne  | 201                        | ¢<br>9-03-26 |
| \$0.00<br>Jotes:<br>Jumber of opi<br>fotal estimate<br>Jote:<br>DETAIL TOTAL<br>Jote: The follo<br>Social Detail Est<br>Jote: Social Status:<br>Jame (D)(6); (D<br>SD APPROVA<br>Special Assign<br>Total Approve<br>< or = \$25K<br>>\$25K - \$50K                                      | ICT<br>erational p<br>ed travel co<br>bwing field<br>timate:<br>)(7)(C); (b)(<br>L<br>ment Nun<br>ed Amount    | sts         sts           \$20,         Appr           \$20,         Appr           http://www.com/com/com/com/com/com/com/com/com/com/ | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:<br>sistant Chief:                             | *<br>*<br>*  | Project Code:<br>b)(7)(F)   |                    | ersonne  | 201                        |              |
| \$0.00<br>Jotes:<br>Jumber of op<br>Total estimate<br>Jote: The follo<br>Total Detail Es<br>Detail Status:<br>Jame (b)(6): (b<br>SD APPROVA<br>Special Assign<br>Total Approve<br>< or = \$25K<br>>\$25K - \$50K  | ICT<br>erational p<br>erational field<br>travel co<br>timate:<br>)(7)(C): (b)(C)<br>L<br>ment Nun<br>ed Amount | sosts:<br>sare<br>\$20,<br>Appr<br>7)(F)<br>nber:<br>t: \$26,<br>Sen<br>As  | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:<br>sistant Chief:<br>Chief:                   | )<br>•<br>•<br>(b)(5); (b)(7)(C); (<br>Name will auto              | Project Code:<br>b)(7)(F)<br>populate   |                    | ersonne  | 201                        | ¢<br>9-03-26 |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>rotal estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:<br>Name (b)(6): (b<br>Special Assign<br>Total Approve<br>< or = \$25K<br>>\$25K - \$50K<br>>\$75K - \$100                           | ICT<br>erational p<br>erational field<br>travel co<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Nun<br>ed Amount   | sosts:<br>sare<br>\$20,<br>Appr<br>7)(F)<br>nber:<br>t: \$26,<br>Sen.<br>Assist   | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:<br>sistant Chief:<br>Chief:<br>tant Director: | )<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | Project Code:<br>b)(7)(F)<br>populate<br>populate   |                    | ersonne  | 201                        | ¢<br>9-03-26 |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:<br>Name (b)(6): (b<br>Special Assign<br>Total Approve<br>< or = \$25K<br>>\$25K - \$50K   | ICT<br>erational p<br>erational field<br>travel co<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Nun<br>ed Amount   | sosts:<br>sare<br>\$20,<br>Appr<br>7)(F)<br>nber:<br>t: \$26,<br>Sen.<br>Assist   | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:<br>sistant Chief:<br>Chief:<br>tant Director: | )<br>•<br>•<br>(b)(5); (b)(7)(C); (<br>Name will auto              | Project Code:<br>b)(7)(F)<br>populate<br>populate   |                    | ersonne  | 201                        | ¢<br>9-03-26 |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>rotal estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:<br>Name (b)(6): (b<br>Special Assign<br>Total Approve<br>< or = \$25K<br>>\$25K - \$50K<br>>\$75K - \$100                           | ICT<br>erational p<br>erational field<br>travel co<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Nun<br>ed Amount   | sosts:<br>sare<br>\$20,<br>Appr<br>7)(F)<br>nber:<br>t: \$26,<br>Sen.<br>Assist   | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:<br>sistant Chief:<br>Chief:<br>tant Director: | )<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | Project Code:<br>b)(7)(F)<br>populate<br>populate   |                    |          | 201                        | ¢<br>9-03-26 |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The folic<br>Total Detail Es<br>Detail Status:<br>Name (b)(6): (b<br>SD APPROVA<br>Special Assign<br>Total Approve<br>< or = \$25K<br>>\$25K - \$50K<br>>\$75K - \$1000<br>>\$100K | ICT<br>erational p<br>erational field<br>travel co<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Nun<br>ed Amount   | sosts:<br>sare<br>\$20,<br>Appr<br>7)(F)<br>nber:<br>t: \$26,<br>Sen.<br>Assist   | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:<br>sistant Chief:<br>Chief:<br>tant Director: | )<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | Project Code:<br>b)(7)(F)<br>populate<br>populate   |                    | ersonne  | 201                        | ¢<br>9-03-26 |
| \$0.00<br>Notes:<br>DUT OF DISTR<br>Number of op<br>rotal estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:<br>Name (b)(6): (b<br>Special Assign<br>Total Approve<br>< or = \$25K<br>>\$25K - \$50K<br>>\$75K - \$100                           | ICT<br>erational p<br>erational field<br>travel co<br>timate:<br>)(7)(C): (b)(<br>L<br>ment Nun<br>ed Amount   | sosts:<br>sare<br>\$20,<br>Appr<br>7)(F)<br>nber:<br>t: \$26,<br>Sen.<br>Assist   | (b)(7)(E)<br>required.<br>,932.00<br>oved<br>(b)(7)(E)<br>332<br>ior Inspector:<br>sistant Chief:<br>Chief:<br>tant Director: | )<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | Project Code:<br>b)(7)(F)<br>populate<br>populate   |                    | ersonne  | 201                        | ¢<br>9-03-26 |

| s the AAR attached | ?                  |                     |                     |
|--------------------|--------------------|---------------------|---------------------|
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| 1                  | s the AAR attached | s the AAR attached? | s the AAR attached? |

| Alance  | All.   |                               | Unite<br>Marsha                       | d States<br>Is Servi       | -       |                                | Statu Sec                  |                 |
|---|--|-------------------------------|---------------------------------------|----------------------------|---------|--------------------------------|----------------------------|-----------------|
| U.S. Department   | t of Justice                                 |                               |                                       | pproved                    |         | Ju                             | dicial Security            | Event           |
| NSTRUCTIONS:<br>Ise this form to request  | t funding for                                |                               |                                       |                            | officer |                                | area security              | LUCIA           |
| lote: All boxes with a re<br>ubmission Number:  | ed "*" are re                                | quired.                       | Ento                                  | r the Protecti             | wo Ar   | sessment Num                   | hor accignod               |                 |
| b)(7)(E)  | 1  |                               | (b)/7                                 |                            | VE AS   |                                | bei assigneu.              |                 |
| equested By:  |  |                               | Title:                                |                            |         | -                              |                            |                 |
| b)(6); (b)(7)(C); US  | MS)  |                               | OPO Inspector                         |                            |         |                                |                            |                 |
| ircuit:   |  | District/D                    |                                       |                            |         |                                |                            |                 |
|   |  |                               | ecurity Division                      |                            |         |                                |                            |                 |
| lission Name: (ex. U.S.<br>ustice Alito NYC   | v. Smith, SC.                                | J Smith A                     | ssistance, USDCJ                      | Smith Protec               | tive R  | esponse, 12th (                | Circuit Judicial           | Conference,     |
| ocation of Event: (Stree  | et Address)                                  |                               |                                       | Event City:                |         |                                | Event                      | t State:        |
| 10 Foley Square   | et Autoressy                                 |                               |                                       | New York                   |         |                                | NY                         | Jule.           |
| ost District:   |  |                               |                                       |                            |         |                                |                            |                 |
| outhern District of Nev   | v York                                       |                               |                                       |                            |         |                                |                            |                 |
| etail Type:   |  |                               |                                       |                            |         |                                |                            |                 |
| upreme Court Justice A  | Assistance                                   |                               |                                       | A                          |         |                                |                            |                 |
| evel:   |  |                               |                                       | Active/Retin               | ed:     |                                |                            |                 |
| lescription of Event:<br>Provide a brief narrative<br>extraordinary strain on a<br>Justice (b)(6):<br>September 27, 2019<br>Park at the Thurgoo | district resou<br>ito will be<br>9. The Just | travelin<br>travelin          | )<br>g to New Yor<br>be participati   | k, NY from<br>ng in the Ir | n Sep   | tember 26, 2<br>iture of the H | 019 through<br>Ionorable M | h<br>Iichael H. |
| of Protected Persons:   | # of Attend                                  | dees:                         | # of Defen                            | dants:                     |         | Defendants<br>stody:           | # of Witne<br>in Custody   |                 |
| )(7)(E)   | 50   |                               | 0                                     |                            | 0       |                                | 0                          |                 |
| stimated Local Lodging  | g Rate:                                      | _                             | mated Local Per                       | Diem Rate:                 |         | Estimated Lo                   | ocal Required              |                 |
|   |  |                               |                                       |                            |         |                                |                            | Misc:           |
| b)(7)(E)  |  | (0)(7                         | )(E)                                  |                            |         | (b)(7)(E)                      |                            | Misc:           |
|   | IRATION OF                                   |                               | )(E)                                  |                            |         | (b)(7)(E)                      |                            | Misc:           |
| b)(7)(E)<br>NTICIPATED TOTAL DU<br>ravel Date:  | JRATION OF                                   | EVENT                         | )(E)<br>ail Start Date:               |                            |         | (b)(7)(E)<br>Detail End D      | ate:                       | Misc:           |
| NTICIPATED TOTAL DU   | JRATION OF                                   | EVENT                         |                                       |                            |         |                                | ate:                       | Misc:           |
| NTICIPATED TOTAL DU<br>ravel Date:<br>9/24/2019   |  | EVENT<br>Det                  | ail Start Date:                       | Specify: Day               | 5       | Detail End D                   | ate:                       | Misc:           |
| NTICIPATED TOTAL DU<br>ravel Date:<br>9/24/2019<br>Jumber of Days/Weeks   |  | EVENT<br>Det                  | ail Start Date:                       | Specify: Day               | 'S      | Detail End D                   | ate:                       | Misc:           |
| NTICIPATED TOTAL DU<br>ravel Date:<br>9/24/2019   | s/Months: 5                                  | EVENT<br>Det                  | ail Start Date:                       | Specify: Day<br>Wednesd    |         | Detail End D                   | ate:<br>Friday             | Misc:           |
| NTICIPATED TOTAL DU<br>ravel Date:<br>9/24/2019<br>Iumber of Days/Weeks<br>AILY SCHEDULE  | s/Months: 5                                  | EVENT<br>Deta<br>9/2          | ail Start Date:<br>25/2019            |                            |         | Detail End D<br>9/28/2019      |                            |                 |
| NTICIPATED TOTAL DU<br>ravel Date:<br>9/24/2019<br>Jumber of Days/Weeks<br>AILY SCHEDULE<br>Sunday  | s/Months: 5                                  | EVENT<br>Det:<br>9/:<br>onday | ail Start Date:<br>25/2019<br>Tuesday | Wednesd                    | lay     | Detail End D<br>9/28/2019      |                            |                 |

| Overtime Hours/Day:       # of Day:       # of DB2:       Total:         0       0       \$0.00       \$0.00         Nours per Day:       # of Days:       # of Persons:       Hourly Rate:       Total:         Dip(7)(E)       4       Dip(7)(E)       Dip(7)(E)       Dip(7)(E)       Dip(7)(E)         Dip(7)(E)       4       Dip(7)(E)       Dip(7)(E)       Dip(7)(E)       Dip(7)(E)         TRAVEL       Number of Full Day       First and Lodging Total POV/Mileage (Include Total Baggage, etc. (Include tast))       Dip(7)(E)       Dip(7)(E)         Days (Do not include has basis to any include tast)       Names       Dip(7)(E)       Dip(7)(E)         Days (Do not include has basis to any include tast)       Subtotal tast)       Dip(7)(E)       Dip(7)(E)         Days (Do not include has basis to any include tast)       Subtotal tast)       Dip(7)(E)       Dip(7)(E)         Dup (Do Distruct       Kares)       Subtotal tast)       Dip(7)(E)       Dip(7)(E)         Dup of to portational personnel requested Dip(7)(E)       Number of administrative personnel requested:       Dip(7)(E)         Nameer of operational personnel requested:       Pir(7)(E)       Number of administrative personnel requested:       Dip(7)(E)         NA       Special Equipment Required for Reporting Personnel:       Na  |  |  | # o   |                                     |  |                   | # of 18   |                                     |              |        |                |
|--|--|--|---|-------------------------------------|--|-------------------|---|-------------------------------------|--------------|--------|----------------|
| 0       0       \$0.00         GUARDS       Houry per Day:       # of Days:       # of Persons:       Houry Rate:       Total:         Bury per Day:       # of Days:       # of Days:       \$0/7/E       \$0/7/E       \$0/7/E         Days (Do       State and the persons:       Houry Rate:       \$0/7/E       \$0/7/E       \$0/7/E         Days (Do       M&IE       Last Days       (include       Total       Affare       Affare       \$ubtotal         Days (Do       No       \$0.00 </th <th></th> <th></th> <th>1</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>   |  |  | 1   |                                     |  |                   |   |                                     |              |        |                |
| GUARDS TO THE CONTROL OF THE CONTROL   |  | urs/Day:   |   | f Days:                             |  |                   |   | 32:                                 |              |        |                |
| Hours per Day: # of Days: # of Persons: Hourly Rate: Total:<br>SPC/NE: 0/7/E: 0/7   |  |  | 0   |                                     |  |                   | 0   |                                     |              | \$0.0  | U              |
| by(7)(E)       4       by(7)(E)       (b)(7)(E)       (b)(7)(E)         TRAVEL       TAVEL       ATM, Laundry,       Subtotal         Days (D)       Male       Last Days       (Include       Total       ATM, Laundry,       Subtotal         Days (D)       Namber of       Full Day       First and       (Include       Total       Total       Baggage, etc.       Subtotal         Isst days)       0       \$0.00 <td< td=""><td></td><td></td><td># of Deve</td><td></td><td><b>u</b> - <b>u</b></td><td>Porce</td><td></td><td>Hand</td><td>Pato</td><td></td><td>Total:</td></td<>   |  |  | # of Deve   |                                     | <b>u</b> - <b>u</b>  | Porce             |   | Hand                                | Pato         |        | Total:         |
| Decision       Control       Control       Control       Control         Number of Full Day Erist and Lodging Total POV/Mileage Day (Io Links)       Airfare Total       ATM, Laundry, Baggage, etc.       Subtotal Baggage, etc.         Days (Io control trip is Longer than Longer th   |  | ay:  | 1   | •                                   |  |                   | 15:   |                                     |              | 1      |                |
| Number of<br>Full Mait<br>Days (Do<br>pays (Do<br>not include<br>(T5% Mait<br>Last Days<br>(T5% Mait<br>trip is<br>longer than<br>1 day)       Lodging Total<br>(nclude<br>Total<br>Total<br>Total<br>Total<br>Total<br>Total<br>POV/Mileage<br>Total<br>Total<br>Aggage, etc.       ATM, Laundry,<br>Baggage, etc.       Subtotal<br>Baggage, etc.         0       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00         0       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00         0       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00         0       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00         0       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00         0       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00         0       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00         0       Total estimated<br>requesting out of district assistance? Yes       Number of administrative personnel requested: 0       Total estimate<br>Total estimate<br>address:       City:       State:         Special Suils Requested:       NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       Yes       Special Esting and there   |  |  | 1   |                                     | 10/(   | 74 <sup>-</sup> 7 |   | (D)(7)(E                            | -)           |        | (3)(7)(2)      |
| 0 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   TOTAL OTHER   \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   DUT OF DISTRICT   Are you requesting out of district assistance? Yes   Number of administrative personnel requested: 0   Total estimated travel costs: [0/(7)(E)]   Number of administrative personnel requested: 0   Reporting Date:   Address:   City:   State:   Special Equipment Required for Reporting Personnel: NA Special Istructions for Reporting Personnel: NA Special Instructions for Reporting Personnel: NA Special Instructions for Reporting Personnel: NA Special Instructions for Reporting Personnel: NA    Na Special City: State: Special Equipment Required for Reporting Personnel: NA Special Instructions for Reporting Personnel: NA    Special Equipment Required for Reporting any threats associated with the event: Diff. OF Protective Intelligence been notified?    Notes to OPERATIONS SUPPORT BRANCH DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE  Name: Diff. OPPO Inspector Operational Title: Diff. CP Inspector Office Phone:  | Number of<br>Full M&IE<br>Days (Do<br>not include<br>first and   |  | Last Da<br>(75% M<br>x 2 days<br>trip i<br>longer t | ays<br>I&IE<br>s, if<br>s<br>than   | (Include   |                   |   |                                     |              |        | Subtotal       |
| Cotal OfHER       Interventional personnel requested       Interventional personnel requested         OUT OF DISTRICT       Are you requesting out of district assistance? Yes       Number of administrative personnel requested:         Number of operational personnel requested       Interventional personnel requested       Interventional personnel requested         Total estimated travel costs:       ENTY (F)       Number of administrative personnel requested:         Reporting Date:       Reporting Time:       Address:         City:       State:       State:         Special Equipment Required for Reporting Personnel:       NA         Special Iskills Requested:       NA         Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting any threats associated with the event:         Diff. Special Instructions Support BRANCH       Special Instructions Support BRANCH       Special Instructions Support BRANCH   | 0  | \$0.00   | 1   |                                     | 0.00   | \$0.00            |   | \$0.00                              | \$0.00       |        | \$0.00         |
| S0.00       OUT OF DISTRICT         Are you requesting out of district assistance?        Image: Control of Contrel of Contrel of Contrel of Control of Contrel of Contrel of Cont  | -  | 1.5  | 40100   |                                     |  |                   |   |                                     |              |        |                |
| OUT OF DISTRICT         Are you requesting out of district assistance? Yes         Number of operational personnel requested         Interview of operational personnel requested         Interview of operational personnel requested         Reporting Date:         Address:         City:         State:         Special Equipment Required for Reporting Personnel:         NA         Special Iskulis Requested:         NA         Special Instructions for Reporting Personnel:         NA         NA         Special Instructions for Reporting Personnel:         NA         NA         NOTES TO OPERATIONS SUPPORT BRANCH         DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE         Name:       Operational Title:         Dinspec   |  | iv.  |   |                                     |  | 1                 |   |                                     |              |        |                |
| Are you requesting out of district assistance? Ves<br>Number of operational personnel requested 0(7)(E) Number of administrative personnel requested: 0<br>Total estimated travel costs: (D)(7)(E) Number of administrative personnel requested: 0<br>Reporting Date: Address: City: State:<br>Address: City: State:<br>Special Equipment Required for Reporting Personnel:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>INTELLIGENCE/INVESTIGATION<br>Provide a brief narrative describing any threats associated with the event:<br>D)(7)(E)<br>Has the Office of Protective Intelligence been notified? Ves<br>Explanation:<br>NOTES TO OPERATIONS SUPPORT BRANCH<br>DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE<br>Name: Operational Title:<br>OPERATIONS SUPPORT BRANCH<br>DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE<br>Name: Operational Title:<br>OPERATIONS SUPPORT BRANCH   |  |  |   |                                     |  |                   |   |                                     | 8            |        |                |
| Number of operational personnel requested (0)(7)(E) Number of administrative personnel requested: (0)<br>Total estimated travel costs: (0)(7)(E) Reporting Oate:<br>Reporting Date:<br>Reporting Date:<br>Reporting Time:<br>Address:<br>Special Equipment Required for Reporting Personnel:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>INTELLIGENCE/INVESTIGATION<br>Provide a brief narrative describing any threats associated with the event:<br>(0)(7)(E)<br>Has the Office of Protective Intelligence been notified?<br>Explanation:<br>NOTES TO OPERATIONS SUPPORT BRANCH<br>DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE<br>Name:<br>Operational Title:<br>(OPO Inspector<br>OPERATION CONCERTION CONCERTION<br>Define Phone:<br>Cell Phone:   |  |  |   |                                     | - Fr   |                   | _   |                                     |              |        |                |
| Total estimated travel costs: [0/(7)(E)<br>REPORTING INFORMATION  Reporting Date: Address: City: State: Special Equipment Required for Reporting Personnel: NA Special Skills Requested: NA Special Instructions for Reporting Personnel: NA Special Instructions for Reporting Personnel: NA Special Instructions for Reporting Personnel: NA NProvide a brief narrative describing any threats associated with the event: D(7)(E) Has the Office of Protective Intelligence been notified? Explanation: NOTES TO OPERATIONS SUPPORT BRANCH DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: DOFO Inspector Office Phone: Cell Phone: Cel   |  |  |   |                                     |  |                   |   |                                     |              |        |                |
| REPORTING INFORMATION         Reporting Date:       Reporting Time:         Address:       City:       State:         Special Equipment Required for Reporting Personnel:       NA         Special Skills Requested:       NA         Special Instructions for Reporting Personnel:       NA         Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:         NA       Special Instructions for Reporting Personnel:       Special Instructions Support Branch       Special Instructions Support Branch         DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE       Special Title:       Special Instructional Title:         Name:       Operational Title:       OpOr Inspector       Operational Title   |  |  |   |                                     | ested <sup>(D)(7)(E)</sup>   |                   | Numbe   | r of adminis                        | strative per | sonne  | I requested: 0 |
| REPORTING INFORMATION         Reporting Date:       Reporting Time:         Address:       City:       State:         Special Equipment Required for Reporting Personnel:       NA         Special Skills Requested:       NA         Special Instructions for Reporting Personnel:       NA         Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       NA         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:         NA       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:       Special Instructions for Reporting Personnel:         NA       Special Instructions for Reporting Personnel:       Special Instructions Support Branch       Special Instructions Support Branch         DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE       Special Title:       Special Instructional Title:         Name:       Operational Title:       OpOr Inspector       Operational Title   | Total estimat  | ted travel o   | osts: (b)(7   | )(E)                                |  |                   |   |                                     |              |        |                |
| Address:<br>Address:<br>City: State:<br>Special Equipment Required for Reporting Personnel:<br>NA<br>Special Iskills Requested:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>Special Instructions for Report Branch<br>DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE<br>Name:<br>Operational Title:<br>OPO Inspector<br>OPO Inspector<br>OPO Inspector<br>Cell Phone:<br>Special Special S |  |  |   |                                     |  |                   |   |                                     |              |        |                |
| Address:<br>Address:<br>City: State:<br>Special Equipment Required for Reporting Personnel:<br>NA<br>Special Iskills Requested:<br>NA<br>Special Instructions for Reporting Personnel:<br>NA<br>Special Instructions for Report Branch<br>DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE<br>Name:<br>Operational Title:<br>OPO Inspector<br>OPO Inspector<br>OPO Inspector<br>Cell Phone:<br>Special Special S | Reporting De   | to:  |   |                                     |  |                   | Reporti   | ng Time:                            |              |        |                |
| Special Equipment Required for Reporting Personnel: NA Special Instructions for Reporting Personnel: NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (D)(7)(E) INTELLIGENCE/INVESTIGATION INT   |  | a.e.   |   |                                     |  |                   |   |                                     | S+-          | te:    |                |
| NA Special Skills Requested: NA Special Instructions for Reporting Personnel: NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NA) (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: (NTELLIGENCE/INVESTIGATION Provide a brief narrative describing associated with the event: (NTELLIGENCE/INVESTIGATIONS SUPPORT BRANCH  DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: (NTELLIGENCE/INVESTIGATION (NTELLIGENCE/INVESTIGATION) (NTELLIGENCE/INVESTIGATION) (NTELLIGENCE/INVESTIGATION) (NTELLIGENCE/INVESTIGATION) (NTELLIGENCE/INVESTIGATION) (   |  |  |   |                                     |  |                   | sup.  |                                     | 50           |        |                |
| Special Skills Requested:<br>NA  Special Instructions for Reporting Personnel:<br>NA  INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event:<br>(b)(7)(E)  Has the Office of Protective Intelligence been notified? Yes Explanation:  NOTES TO OPERATIONS SUPPORT BRANCH  DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: (b)(6): (b)(7)(C): (b)(7)(F) (CPO Inspector Office Phone: Cell Phone: Cell Phone:   |  | oment Requ   | uired for F   | Reporti                             | ng Personn   | el:               | 0   |                                     |              |        |                |
| NA         Special Instructions for Reporting Personnel:         NA         INTELLIGENCE/INVESTIGATION         Provide a brief narrative describing any threats associated with the event:         [b](7)(E)         Has the Office of Protective Intelligence been notified?         Yes         Explanation:         NOTES TO OPERATIONS SUPPORT BRANCH         DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE         Name:       Operational Title:         (b)(6): (b)(7)(C): (b)(7)(F)       OPO Inspector         Office Phone:       Cell Phone:   | Ream and the second sec | Requested  | l:  |                                     |  |                   |   |                                     |              |        |                |
| NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: b)(7)(E) Has the Office of Protective Intelligence been notified? Yes Explanation: NOTES TO OPERATIONS SUPPORT BRANCH DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: D(6)(6): (b)(7)(C): (b)(7)(F) D(F) D(F) D(F) D(F) D(F) D(F) D(F)   | performance in the second seco |  |   |                                     |  |                   |   |                                     |              |        |                |
| NA INTELLIGENCE/INVESTIGATION Provide a brief narrative describing any threats associated with the event: b)(7)(E) Has the Office of Protective Intelligence been notified? Yes Explanation: NOTES TO OPERATIONS SUPPORT BRANCH DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: D(6)(6): (b)(7)(C): (b)(7)(F) D(F) D(F) D(F) D(F) D(F) D(F) D(F)   | Search and a second   | uctions for  | Reporting   | g Perso                             | nnel:  |                   |   |                                     |              |        |                |
| Has the Office of Protective Intelligence been notified? Yes Explanation: NOTES TO OPERATIONS SUPPORT BRANCH DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: Operational Title: (b)(b); (b)(7)(C); (b)(7)(F) Office Phone: Cell Phone:  |  |  |   |                                     |  |                   |   |                                     |              |        |                |
| Provide a brief narrative describing any threats associated with the event:<br>(b)(7)(E)  Has the Office of Protective Intelligence been notified? Yes Explanation:  NOTES TO OPERATIONS SUPPORT BRANCH  DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE  Name:  (b)(6): (b)(7)(C): (b)(7)(F)  OPO Inspector  Office Phone:  Cell Phone:  Operational Title:  (b)(6): (b)(7)(C): (b)(7)(F)  OPO Inspector  Office Phone:  Cell Phone:  DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE   |  |  |   | 20                                  |  |                   |   |                                     |              |        |                |
| DETAIL SUPERVISOR, DEPUTY IN-CHARGE, INSPECTOR IN-CHARGE Name: Dy(6); (b)(7)(C); (b)(7)(F) DFD Inspector Office Phone: Cell Phone:   | NA<br>NTELLIGENCI<br>Provide a brid<br>(b)(7)(E)   | ef narrative   | e describir   | ng any                              | threats asso   |                   |   | e event:                            |              |        |                |
| Name:         Operational Title:           (b)(6); (b)(7)(C); (b)(7)(F)         OPO Inspector           Office Phone:         Cell Phone:  | NA<br>INTELLIGENCO<br>Provide a brid<br>(b)(7)(E)<br>Has the Office  | ef narrative   | e describir   | ng any                              | threats asso   |                   |   | e event:                            |              |        |                |
| (b)(6); (b)(7)(C); (b)(7)(F)         OPO Inspector           Office Phone:         Cell Phone:   | NA<br>INTELLIGENC<br>Provide a brie<br>(b)(7)(E)<br>Has the Office<br>Explanation:   | ef narrative   | e describin<br>tive Intell                          | ng any                              | threats asso   |                   |   | e event:                            |              |        |                |
| Office Phone: Cell Phone:  | NA<br>INTELLIGENCI<br>Provide a brie<br>(b)(7)(E)<br>Has the Office<br>Explanation:  | e of Protec  | tive Intell   | ng any<br>igence                    | threats asso   | ed? Yes           | i<br>   | e event:                            |              |        |                |
|  | NA<br>INTELLIGENCI<br>Provide a brie<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OF<br>DETAIL SUPER<br>Name:  | e of Protec<br>PERATIONS<br>RVISOR, DE   | tive Intell   | ng any<br>igence                    | threats asso   | ed? Yes           | HARGE   | al Title:                           |              |        |                |
| 0)(0); (0)(/)(C)<br>(0)(0); (0)(/)(C)  | NA<br>INTELLIGENCI<br>Provide a brie<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OP<br>DETAIL SUPEI<br>Name:<br>(b)(6); (b)(7)(C);  | e of Protec<br>PERATIONS<br>RVISOR, DE   | tive Intell   | ng any<br>igence                    | threats asso   | ed? Yes           | HARGE<br>erationa<br>O Insper                         | I Title:<br>ctor                    |              |        |                |
| ,  | NA<br>INTELLIGENCI<br>Provide a brie<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OF<br>DETAIL SUPER<br>Name:<br>(b)(6); (b)(7)(C);<br>Office Phone  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>: (b)(7)(F)<br>:   | tive Intell   | ng any<br>igence                    | threats asso   | ed? Yes           | HARGE<br>erationa<br>O Inspe-<br>I Phone:             | al Title:<br>ctor                   |              |        |                |
|  | NA<br>INTELLIGENCI<br>Provide a brie<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OP<br>DETAIL SUPEI<br>Name:<br>(b)(6); (b)(7)(C);  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>: (b)(7)(F)<br>:   | tive Intell   | ng any<br>igence                    | threats asso   | ed? Yes           | HARGE<br>erationa<br>O Inspe-<br>I Phone:             | al Title:<br>ctor                   |              |        |                |
|  | NA<br>INTELLIGENCI<br>Provide a brie<br>(b)(7)(E)<br>Has the Office<br>Explanation:<br>NOTES TO OF<br>DETAIL SUPER<br>Name:<br>(b)(6); (b)(7)(C);<br>Office Phone  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>:<br>(b)(7)(F)<br>:<br>ATION<br>htel docum   | e describin<br>tive Intell<br>SUPPORT               | igence                              | threats asso<br>been notifie<br>CH   | ed? Yes           | HARGE<br>erationa<br>O Inspe-<br>I Phone:             | al Title:<br>ctor                   |              |        |                |
| OPO REVIEW   | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPER Name: (b)(6): (b)(7)(C): Office Phone: (b)(6): (b)(7)(C): DOCUMENTA District and In Justice Alito 9  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>: (b)(7)(F)<br>:<br>ATION<br>htel docum  | e describin<br>tive Intell<br>SUPPORT               | igence                              | threats asso<br>been notifie<br>CH   | ed? Yes           | HARGE<br>erationa<br>O Inspe-<br>I Phone:             | al Title:<br>ctor                   |              |        |                |
| OPO REVIEW   | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPER Name: (b)(6): (b)(7)(C): Office Phone: (b)(6): (b)(7)(C): DOCUMENTA District and In Justice Alito 9  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>: (b)(7)(F)<br>:<br>ATION<br>htel docum  | e describin<br>tive Intell<br>SUPPORT               | igence                              | threats asso<br>been notifie<br>CH   | ed? Yes           | HARGE<br>erationa<br>O Inspe-<br>I Phone:             | al Title:<br>ctor                   |              |        |                |
|  | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OP DETAIL SUPEI Name: (b)(6): (b)(7)(C): Office Phone: (b)(6): (b)(7)(C): DOCUMENTA District and In Justice Alito 9 OPO REVIEW   | e of Protec<br>PERATIONS<br>RVISOR, DE<br>: (b)(7)(F)<br>:<br>ATION<br>htel docum  | e describin<br>tive Intell<br>SUPPORT               | ng any<br>igence<br>F BRAN          | threats asso<br>been notifie<br>CH<br>:E, INSPECTO<br>s belong her                                   | ed? Yes           | HARGE<br>erationa<br>O Insper                         | al Title:<br>ctor                   |              |        |                |
| ANTICIPATED TOTAL DURATION OF EVENT  | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPEI Name: (b)(6); (b)(7)(C); Office Phone: (b)(6); (b)(7)(C); DIStrict and II: lustice Alito 9 OPO REVIEW ANTICIPATED  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>: (b)(7)(F)<br>:<br>ATION<br>htel docum  | e describin<br>tive Intell<br>SUPPORT               | ng any<br>igence<br>F BRAN          | threats asso<br>been notifie<br>CH<br>E, INSPECTO<br>5 belong her                                    | ed? Ves           | HARGE<br>erationa<br>O Insper                         | al Title:<br>ctor                   | Detail E     | nd Dat | ie:            |
| ANTICIPATED TOTAL DURATION OF EVENT Travel Date: 9/24/2019 9/25/2019 9/28/2019   | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPEI Name: (b)(6); (b)(7)(C) Office Phone: (b)(6); (b)(7)(C) DOCUMENT/ District and In Justice Alito 9 OPO REVIEW ANTICIPATED Travel Date:  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>: (b)(7)(F)<br>:<br>ATION<br>htel docum  | e describin<br>tive Intell<br>SUPPORT               | ng any<br>igence<br>F BRAN          | threats asso<br>been notific<br>CH<br>E, INSPECTO<br>5 belong her                                    | ed? Ves           | HARGE<br>erationa<br>O Insper                         | al Title:<br>ctor                   | -            |        | ie:            |
| ANTICIPATED TOTAL DURATION OF EVENT<br>Travel Date: Detail Start Date: Detail End Date:<br>9/24/2019 9/28/2019 9/28/2019   | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPEI Name: (b)(6): (b)(7)(C): Office Phone: (b)(6): (b)(7)(C): DOCUMENTA District and In Justice Alito 9 OFO REVIEW ANTICIPATED Travel Date: 9/24/2019  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>(b)(7)(F)<br>(b)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F   | ent attack  | r BRAN                              | threats asso<br>been notific<br>CH<br>E, INSPECTO<br>5 belong her                                    | ed? Ves           | HARGE<br>eration<br>O Inspec                          | al Title:<br>cctor<br>:<br>:<br>(C) | -            |        | ie:            |
| ANTICIPATED TOTAL DURATION OF EVENT Travel Date: 9/24/2019 9/25/2019 9/25/2019 9/28/2019 9/28/2019 DAILY SCHEDULE  | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPER Name: (b)(6): (b)(7)(C) DOCUMENTA District and In Ustice Alito 9 OPO REVIEW ANTICIPATED Travel Date: 9/24/2019 Number of D:  | e of Protec<br>PERATIONS<br>PERATIONS<br>RVISOR, DE<br>(b)(7)(F)<br>:<br>(b)(7)(F)<br>:<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATION<br>ATIO   | ent attack  | ng any<br>igence<br>F BRAN          | threats asso<br>been notific<br>CH<br>E, INSPECTO<br>S belong her<br>NT<br>Detail Start<br>9/25/2011 | ed? Ves           | HARGE<br>erationa<br>O Inspeci<br>Phone<br>6): (b)(7) | al Title:<br>ctor<br>:<br>(C)       | 9/28/2       | 2019   |                |
| ANTICIPATED TOTAL DURATION OF EVENT Travel Date: 9/24/2019 9/25/2019 9/28/2019 9/28/2019  Number of Days/Weeks/Months: 5 Specify: Days DAILY SCHEDULE Sunday Monday Tuesday Wednesday Thursday Friday Satu   | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPEI Name: (b)(6); (b)(7)(C) Office Phone: (b)(6); (b)(7)(C) DOCUMENT/ District and Ir fustice Alito 9 OPO REVIEW ANTICIPATED Travel Date: 9/24/2019 Number of D. DAILY SCHED   | e of Protec<br>PERATIONS<br>RVISOR, DE<br>(b)(7)(F)<br>:<br>(b)(7)(F)<br>:<br>ATION<br>ATION<br>ATION<br>ATION<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>ation<br>a | ent attack  | ng any<br>igence<br>F BRAN<br>CHARG | threats asso<br>been notific<br>CH<br>E, INSPECTO<br>S belong her<br>NT<br>Detail Start<br>9/25/2011 | ed? Ves           | HARGE<br>erationa<br>O Inspeci<br>Phone<br>6): (b)(7) | al Title:<br>ctor<br>:<br>(C)       | 9/28/2       | 2019   |                |
| ANTICIPATED TOTAL DURATION OF EVENT Travel Date: 9/24/2019 9/25/2019 9/25/2019 9/28/2019 9/28/2019 DAILY SCHEDULE  | NA INTELLIGENCI Provide a brie (b)(7)(E) Has the Office Explanation: NOTES TO OF DETAIL SUPEI Name: (b)(6): (b)(7)(C) Office Phone: (b)(6): (b)(7)(C) DOCUMENT/ District and Ir ustice Alito 9 OPO REVIEW ANTICIPATED Travel Date: 9/24/2019 Number of D: DAILY SCHED Start Tim  | e of Protec<br>PERATIONS<br>RVISOR, DE<br>(b)(7)(F)<br>(b)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F)<br>(c)(7)(F   | ent attack  | ng any<br>igence<br>F BRAN<br>CHARG | threats asso<br>been notific<br>CH<br>E, INSPECTO<br>S belong her<br>NT<br>Detail Start<br>9/25/2011 | ed? Ves           | HARGE<br>erationa<br>O Inspeci<br>Phone<br>6): (b)(7) | al Title:<br>ctor<br>:<br>(C)       | 9/28/2       | 2019   |                |

| Requesting Fu   |   |                                      |  |                                     |                     |                  |                                   |         |
|---|---|--------------------------------------|--|-------------------------------------|---------------------|------------------|-----------------------------------|---------|
|   | nding fo  | r in dist                            | rict resources?  | Yes                                 |                     |                  |                                   |         |
| Overtime Hou  |   |                                      | # of Days:   |                                     | # of 1811:          |                  | Total:                            |         |
| b)(7)(E)  |   |                                      | 1  |                                     | (b)(7)(E)           |                  | (b)(7)(E)                         |         |
| Overtime Hou  | rs/Dav:   |                                      | # of Days:   |                                     | # of 082:           |                  | Total:                            |         |
| 0   | ,   |                                      | 0  |                                     | 0                   |                  | \$0.00                            |         |
| GUARDS  |   |                                      |  |                                     |                     |                  |                                   |         |
| Hours per Day   | <b>/</b> :  | # of D                               | avs:   | # of Person                         | s: H                | ourly Rate:      | Total:                            |         |
|   |   | 4                                    |  | (b)(7)(E)                           |                     | (b)(7)(E)        | 1                                 |         |
| (b)(7)(E)   |   |                                      |  |                                     |                     |                  | (b)(7)(E)                         | -       |
| Number of<br>Full M&IE<br>Days (Do not<br>include first<br>and last days)   |   | y M&IE                               | First and Last<br>Days (75%<br>M&IE x 2<br>days, if trip is<br>longer than 1<br>day) | Lodging Total<br>(Include<br>taxes) | POV/Mileag<br>Total | e Airfare Total  | ATM,<br>Laundry,<br>Baggage, etc. | Subtota |
| 0   | \$0.00  | -                                    | \$0.00   | \$0.00                              | \$0.00              | \$0.00           | \$0.00                            | \$0.00  |
| TOTAL OTHER   |   |                                      |  |                                     | 1.                  | -10-             | 1                                 |         |
| \$0.00  |   |                                      |  | 1                                   |                     |                  |                                   |         |
| Votes:  |   |                                      |  |                                     |                     |                  |                                   |         |
| Number of op<br>Total estimate  | erationa  |                                      | nnel requested:<br>)(7)(E)   | 8.1.7VE1                            | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL   | erationa<br>ed travel   | costs                                | i)(7)(E)   |                                     | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL   | erationa<br>ed travel   | costs                                | i)(7)(E)   |                                     | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo  | erationa<br>ed travel   | costs (t                             | i)(7)(E)   |                                     | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| OUT OF DISTR<br>Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The folk<br>Total Detail Est<br>Detail Status: | erationa<br>ed travel   | costs la<br>lds are<br>\$11,         | required.  |                                     | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The folk<br>Total Detail Es                                    | erationa<br>ed travel<br>bowing fie<br>stimate:                 | costs to<br>lds are<br>\$11,<br>Appr | )(7)(E)<br>required.<br>,400.00  |                                     | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:                 | erationa<br>ed travel<br>bowing fie<br>stimate:                 | costs to<br>lds are<br>\$11,<br>Appr | )(7)(E)<br>required.<br>,400.00  | •                                   | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Es<br>Detail Status:                 | erationa<br>ed travel<br>bowing fie<br>stimate:<br>b)(7)(C); (b | costs to<br>lds are<br>\$11,<br>Appr | required.<br>,400.00   | •                                   | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The folk<br>Total Detail Status:<br>Name: (b)(5): (t           | erationa<br>ed travel<br>bowing fie<br>stimate:<br>b)(7)(C); (b | costs to<br>lds are<br>\$11,<br>Appr | required.<br>,400.00   | •                                   | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |
| Number of op<br>Total estimate<br>Note:<br>DETAIL TOTAL<br>Note: The follo<br>Total Detail Status:<br>Name: (D)(6): (1          | erationa<br>ed travel<br>bowing fie<br>stimate:<br>b)(7)(C); (b | costs to<br>lds are<br>\$11,<br>Appr | required.<br>,400.00   | •                                   | Number of a         | dministrative pe | rsonnel reques                    | ted: 0  |