



**DEPARTMENT OF HOMELAND SECURITY**  
UNITED STATES SECRET SERVICE  
WASHINGTON, D.C. 20223

Freedom of Information Act & Privacy Act Program  
Communications Center  
245 Murray Lane, S.W., Building T-5  
Washington, D.C. 20223

Date: **OCT 23 2018**

Judicial Watch  
425 Third Street, SW, Suite 800  
Washington, DC 20024  
Attn: Justin McCarthy

File Number: 20180710

Dear Requester:

This is the final response to your Freedom of Information Act (FOIA) request, originally received by the United States Secret Service (Secret Service) on March 7, 2018, for information pertaining to use of U.S. Government funds to provide security and/or other services to President Trump and any companions on their February 17-19, 2018 visit to Palm Beach, Florida (Date Range for Record Search: From 2/6/2018 To 3/7/2018).

Enclosed are documents responsive to your request. In an effort to provide you with the greatest degree of access authorized by law, we have considered this material under the FOIA statute, Title 5 U.S.C. § 552. Pursuant to this Act, exemptions have been applied where deemed appropriate. The exemptions cited are marked below.

In addition, approximately 157 page(s) were released, and approximately 9 page(s) were withheld in their entirety. An enclosure to this letter explains the exemptions in more detail.

☒ If this box is checked, deletions were made pursuant to the exemptions indicated below.

***Section 552 (FOIA)***

<input type="checkbox"/> (b) (1)	<input type="checkbox"/> (b) (2)	<input type="checkbox"/> (b) (3) Statute:		
<input checked="" type="checkbox"/> (b) (4)	<input type="checkbox"/> (b) (5)	<input checked="" type="checkbox"/> (b) (6)	<input type="checkbox"/> (b) (7) (A)	<input type="checkbox"/> (b) (7) (B)
<input checked="" type="checkbox"/> (b) (7) (C)	<input type="checkbox"/> (b) (7) (D)	<input checked="" type="checkbox"/> (b) (7) (E)	<input type="checkbox"/> (b) (7) (F)	<input type="checkbox"/> (b) (8)


The following checked item(s) also apply to your request:

☒ Fees: In the processing of this FOIA request, no fees are being assessed.

☐ Other:

As you have already filed suit in the United States District Court for the District Columbia (Case 18-CV-01851-RJL) regarding the above referenced request, there is no further right to administratively appeal this decision outside your pending civil action.

Sincerely,



Kim E. Campbell  
Special Agent In Charge  
Freedom of Information Act & Privacy Act Officer

Enclosure:

☒ FOIA and Privacy Act Exemption List

**LRC Car Detail Report by Project Code**  
**Report Period: 2/6/2018 thru 2/21/2018**

<u>Personnel Name</u>	<u>IR</u>	<u>P.Code</u>	<u>Pick up City</u>	<u>State</u>	<u>Country</u>	<u>Inv Date</u>	<u>Conf #</u>	<u>Rental Company</u>	<u>Car Type</u>	<u>Car Type Desc</u>	<u>Pick up Date</u>	<u>Return Date</u>	<u># of Cars</u>	<u>Rate</u>	<u># Days</u>	<u>Total Value</u>
<b>011.035</b>																
(b)(6);(b)(7)(C);(b)(7)(E)	SOD	011.035	WEST PALM BEACH PALM BEACH INTL APT	FL	US	02/16/2018	H5783355332-	HERTZ	FFAR	FULL SIZE OTHER	02/16/2018	02/19/2018	1	\$79.00	3	\$237.00
	SOD	011.035	WEST PALM BEACH PALM BEACH INTL APT	FL	US	02/16/2018	H5783251098-	HERTZ	FFAR	FULL SIZE OTHER	02/16/2018	02/19/2018	1	\$79.00	3	\$237.00
	UDW	011.035	WEST PALM BEACH PALM BEACH INTL APT	FL	US	02/16/2018	H5783829088-	HERTZ	MVAR	MINI VAN	02/16/2018	02/19/2018	1	\$109.00	3	\$327.00
	SOD	011.035	WEST PALM BEACH PALM BEACH INTL APT	FL	US	02/16/2018	1400405402COUNT-	ENTERPRISE	SFAR	STANDARD OTHER	02/16/2018	02/19/2018	1	\$55.00	3	\$165.00
								<b>011.035 Total:</b>					4		12	\$966.00
<b>013.036</b>																
(b)(6);(b)(7)(C);(b)(7)(E)	MIA	013.036	WEST PALM BEACH PALM BEACH INTL APT	FL	US	02/14/2018	1257722210COUNT-	ENTERPRISE	SFAR	STANDARD OTHER	02/14/2018	02/19/2018	1	\$66.40	5	\$332.00
	MIA	013.036	WEST PALM BEACH PALM BEACH INTL APT	FL	US	02/14/2018	H57108605E6-	DOLLAR RENT A CAR	SFAR	STANDARD OTHER	02/14/2018	02/19/2018	1	\$60.80	5	\$304.00
								<b>013.036 Total:</b>					2		10	\$636.00
								<b>Grand Total:</b>					6		22	\$1,602.00

# LRC Air/Rail Detail Report by Project Code

Report Period: 2/6/2018 thru 2/21/2018

Passenger Name

RQ

P.Code

Invoice #

Inv Date

Trip Begin Date

A/L Ticket

FOP INV Amt

Ticket Routing

Trip End Date

011.035

(b)(6);(b)(7)(C);(b)(7)(E)

011.035 Total:

(b)(7)(C)  
E

\$5,780.06

012.035

(b)(6);(b)(7)(C);(b)(7)(E)

012.035 Total:

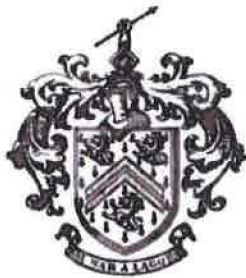
(b)(7)(C)  
E

\$632.60

Grand Total:

\$6,412.66





# The Mar-a-Lago Club, L.L.C.

1100 South Ocean Boulevard  
Palm Beach, Florida, 33480  
Office: (561) 832-2600 • Fax: (561) 832-2669

## Statement

US Secret Service  
Dept. of Homeland Security  
10350 NW 112th Avenue  
Medley, FL 33178-1054

(b)(6);(b)(7)(C) (b)(6);(b)(7)(F)	Feb 21/18
MEMBER	DATE

Honorary Member

AMOUNT DUE \$

Nonresponsive To The  
FOIA Request

☐ Please check box and fill out reverse side if your address has changed.  
Remove this stub at perforation and return with your remittance.

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

DATE	REF. NO	DESCRIPTION	AMOUNT	SVC CHARGE	TAX	TOTAL
<b>Nonresponsive To The FOIA Request</b>						
Feb 19/18	013820	Feb 18 Hotel Charges	1,584.60	0.00	0.00	1,584.60
Feb 19/18	013821	Feb 18 Hotel Charges	1,584.60	0.00	0.00	1,584.60
Feb 19/18	013822	Feb 18 Hotel Charges	1,584.60	0.00	0.00	1,584.60
Feb 19/18	013823	Feb 18 Hotel Charges	1,584.60	0.00	0.00	1,584.60
Feb 19/18	014128	Feb 18 Hotel Charges	1,584.60	0.00	0.00	1,584.60
<p>Please contact Beverly with any questions on your billing at 561-822-5065 or email for ease at (b)(6);(b)(7)(C)@maralagoclub.com</p>						
<b>Nonresponsive To The FOIA Request</b>						
(b)(6);(b)(7)(C) (b)(6);(b)(7)(F)	CURRENT BAL.	30 DAYS BAL.	60 DAYS BAL.	90 DAYS BAL.	AMOUNT DUE	

(Payments to the club are not deductible as charitable contributions for income tax purposes)  
The Mar-a-Lago Club

US Secret Service  
Dept. of Homeland Security  
10350 NW 112th Avenue  
Medley, FL  
33178-1054

Res. # 013820  
Checked in Thu Feb 15/18 - 3:16 pm  
Checked out Mon Feb 19/18 - 5:13 pm  
Room Rate (b)(7)(E)  
Room

Date	Description	Member # Reference	Charges	Credits
	(b)(7)(E)	(b)(6);(b)(7)		
				1584.60
	Total Outstanding	0.00	1584.60	1584.60

Signature: \_\_\_\_\_

Our Tax # is (b)(4)

US Secret Service  
Dept. of Homeland Security  
10350 NW 112th Avenue  
Medley, FL  
33178-1054

Res. # 013821  
Checked in Thu Feb 15/18 - 3:12 pm  
Checked out Mon Feb 19/18 - 5:08 pm  
Room Rate (b)(7)(E)  
Room

Date	Description	Member # Reference	Charges	Credits
		(b)(6);(b)(7)(E)		
		(b)(7)(E)		1584.60
		Total Outstanding	0.00 1584.60	1584.60

Signature: \_\_\_\_\_

Our Tax # is (b)(4)

US Secret Service  
Dept. of Homeland Security  
10350 NW 112th Avenue  
Medley, FL  
33178-1054

Res. # 013822  
Checked in Thu Feb 15/18 - 3:16 pm  
Checked out Mon Feb 19/18 - 5:08 pm  
Room Rate (b)(7)(E)  
Room

Date	Description	Member # Reference	(b)(6);(b)(7)	Charges	Credits
		(b)(7)(E)			1584.60
		Total Outstanding	0.00	1584.60	1584.60

Signature: \_\_\_\_\_

Our Tax # is (b)(4)

US Secret Service  
Dept. of Homeland Security  
10350 NW 112th Avenue  
Medley, FL  
33178-1054

Res. # 013823  
Checked in Thu Feb 15/18 - 3:16 pm  
Checked out Mon Feb 19/18 - 5:09 pm  
Room Rate (b)(7)(E)  
Room

Date	Description	Member # Reference	Charges	Credits
	(b)(7)(E)	(b)(6);(b)(7)		1584.60
	Total Outstanding	0.00	1584.60	1584.60

Signature: \_\_\_\_\_

Our Tax # is (b)(4)

US Secret Service  
Dept. of Homeland Security  
10350 NW 112th Avenue  
Medley, FL  
33178-1054

Res. # 014128  
Checked in Mon Feb 19/18 - 5:15 pm  
Checked out Mon Feb 19/18 - 5:15 pm  
Room Rate (b)(7)(E)  
Room (b)(7)(E)

Date	Description	Member # Reference	Charges	Credits
	(b)(7)(E)	(b)(6);(b)(7)		
				1584.60
	Total Outstanding	0.00	1584.60	1584.60

Signature: \_\_\_\_\_

Our Tax # is (b)(4)

1611 WORTHINGTON RD  
WEST PALM BEACH, FL 33409  
TELEPHONE 561-472-5956 • FAX 561-472-5957

(b)(7)(E) USSS 4

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EC3

(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

250279 A

THANK YOU FOR CHOOSING THE HILTON GARDEN INN FOR YOUR  
STAY.

1811 WORTHINGTON RD  
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(b)(7)(E) JSSS 4

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THANK YOU FOR CHOOSING THE HILTON GARDEN INN FOR YOUR  
STAY.

1611 WORTHINGTON RD  
WEST PALM BEACH, FL 33409  
TELEPHONE 561-472-5956 • FAX 561-472-5957

(b)(7)(E) USSS 4

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EC3

(b)(7)(E) 2.00.00 AM  
2.00.00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

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\*\*BALANCE\*\*

\$87,987.00

250279 A

THANK YOU FOR CHOOSING THE HILTON GARDEN INN FOR YOUR  
STAY.



**US SECRET SERVICE \*\*\*CONF  
the West Palm Beach Marriott**

**PAYMENT: \*\*\*\*DRAFT\*\*\*\***

**39,883.35 USD**

**INVOICE TOTAL:**

**39,883.35 USD**

The summary of charges is as follows:

**Charges:**

Room and Tax:

**39,883.35**

Subtotal:

**39,883.35 USD**

**Total Amount Due:**

**39,883.35 USD**

As a courtesy, we are providing a draft copy of charges for your recent event at the West Palm Beach Marriott. This is not a bill and is intended for your review to ensure accuracy. The final invoice will follow and will reference your actual invoice number, final balance and the remittance information to be used when submitting payment. If you have any questions or wish to discuss these charges, please call (561) 833-1234. Thank you for your patronage.

02/23/18

**RIF**

***the West Palm Beach Marriott***  
**GROUP MASTER SUMMARY OF GUEST CHARGES**

**US DEPARTMENT OF HOMELAND  
 US SECRET SERVICE \*\*\*CONF  
 Event Dates 02/15/2018 to 02/19/2018  
 Invoice Number \*\*\*\*DRAFT\*\*\*\***

**ANCILLARY CHARGES**

<b>GUEST NAME</b>	<b>ROOM/ACCT#</b>	<b>DATE</b>	<b>ROOM</b>	<b>TAX</b>	<b>RESORT FEE</b>	<b>CATERING</b>	<b>RESTAURANT/ LOUNGE</b>	<b>TELECOM/ INTERNET</b>	<b>RECREATION / GIFT SHOP</b>	<b>PARKING</b>	<b>OTHER</b>	<b>DAILY TOTAL</b>
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(b)(6):(b)(7)(C):(b)(7)(E)

Obtained via FOIA by Judicial Watch, Inc.

**the West Palm Beach Marriott**  
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US DEPARTMENT OF HOMELAND  
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 Event Dates 02/15/2018 to 02/19/2018  
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(b)(6);(b)(7)(C);(b)(7)(E)												
<b>TOTAL GUEST CHARGES:</b>												(b)(7)(E)

39,883.35 USD

**TOTAL MISCELLANEOUS CREDITS:** 0.00 USD  
**SUBTOTAL:** 39,883.35 USD  
**SUBTOTAL PAYMENTS:** 0.00 USD  
**TOTAL AMOUNT DUE:** 39,883.35 USD  
**TOTAL ROOM NIGHTS:** (b)(7)(E)

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**Hyatt Place West Palm  
Beach/Downtown**  
295 Lakeview Avenue  
West Palm Beach, FL 33401  
Tel: 561-655-1454  
Fax: 561-835-4122  
westpalmbeach.place.hyatt.com

**INVOICE**

(b)(6);(b)(7)(C);(b)(7) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			



**HYATT  
PLACE™**

**Hyatt Place West Palm  
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295 Lakeview Avenue  
West Palm Beach, FL 33401  
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Fax: 561-835-4122  
westpalmbeach.place.hyatt.com

**INVOICE**

(b)(6);(b)(7)(C);(b)(7)(D) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(D) Group RML

Date	Description	Charges	Credits
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(b)(6);(b)(7)(C);(b)(7)(E)



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Tel: 561-855-1454  
Fax: 561-835-4122  
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**INVOICE**

(b)(6);(b)(7)(C);(b)(7)(D) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(D) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			



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**INVOICE**

(b)(6);(b)(7)(C);(b)(7)(D) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(D) Group RML

Date	Description	Charges	Credits
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Room #9051

(b)(6);(b)(7)(C);(b)(7)(E)



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**INVOICE**

(b)(6);(b)(7)(C);(b)(7)(E) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(E) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			



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**INVOICE**

(b)(6);(b)(7)(C);(b)(7)(D) Group RML  
United States

Room No. 9051  
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Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(D) Group RML

Date	Description	Charges	Credits
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Room #9051

(b)(6);(b)(7)(C);(b)(7)(E)



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(b)(6);(b)(7)(C);(b)(7)(D) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(D) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			





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**INVOICE**

(b)(6);(b)(7)(C);(b)(7)(E) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(E) Group RML

Date	Description	Charges	Credits
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Room #0221

(b)(6);(b)(7)(C);(b)(7)(E)



**Hyatt Place West Palm  
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(b)(6);(b)(7)(C);(b)(7)(E) Group RML  
United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(E) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			



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United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(F) Group RML

Date	Description	Charges	Credits
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Room #9051

(b)(6);(b)(7)(C);(b)(7)(E)



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United States

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Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(E) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			



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Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7) Group RML

Date	Description	Charges	Credits
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(b)(6);(b)(7)(C);(b)(7)(E)			
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Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(E) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			



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United States

Room No. 9051  
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Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(E) Group RML

Date	Description	Charges	Credits
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(b)(6);(b)(7)(C);(b)(7)(E)			
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Beach/Downtown**  
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United States

Room No. 9051  
Arrival 02-09-18  
Departure 03-05-18  
Folio Window 1  
Folio No.

Confirmation No.

Group Name (b)(6);(b)(7)(C);(b)(7)(D) Group RML

Date	Description	Charges	Credits
(b)(6);(b)(7)(C);(b)(7)(E)			
03-05-18	Visa XXXXXXXXXXXX (b)(6);(b)(7)(C)		17,940.00
<b>Total</b>		17,940.00	17,940.00

Guest Signature

**Balance**

0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

Thank you for choosing Hyatt Place West Palm Beach/Downtown. Our goal is to provide every guest with an exceptional stay and we are interested in any comments regarding your visit.

**World of Hyatt Summary****No Membership to be credited**

Join World of Hyatt today and start earning points for stays, dining and more. Visit [www.worldofhyatt.com](http://www.worldofhyatt.com)

Please remit payment to:  
Hyatt Place West Palm Beach/Downtown  
295 Lakeview Avenue  
West Palm Beach, FL 33401





**Holiday Inn**

03-06-18

**United States Secret Service  
United States**

Folio No. : (b)(7)(E)  
A/R Number :  
Group Code : (b)(7)(E)  
Company :  
Membership No. :  
Invoice No. :

Cashier No. : (b)(7)

Room No. : 9026  
Arrival : 02-12-18  
Departure : 02-23-18  
Conf. No. :  
Rate Code :  
Page No. : 1 of 2

Date	Description	Charges	Credits
(b)(7)(E)			

02-23-18 Visa

1 X 49,140.00

49,140.00

Holiday Inn Airport West Palm Beach  
1301 Belvedere Road  
West Palm Beach, FL 33405  
Telephone: (561) 659-3880 Fax: (561) 655-8886


**Holiday Inn**

03-06-18

**United States Secret Service  
United States**
**Folio No. :** (b)(7)(E)  
**A/R Number :**  
**Group Code :** (b)(7)  
**Company :**  
**Membership No. :**  
**Invoice No. :**
**Cashier No. :** (b)(7)

**Room No. :** 9026  
**Arrival :** 02-12-18  
**Departure :** 02-23-18  
**Conf. No. :**  
**Rate Code :**  
**Page No. :** 2 of 2

Date	Description	Charges	Credits
		<b>Total</b>	<b>49,140.00</b>
		<b>Balance</b>	<b>0.00</b>

**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Airport West Palm Beach  
 1301 Belvedere Road  
 West Palm Beach, FL 33405  
 Telephone: (561) 659-3880 Fax: (561) 655-8886

150 Australian Ave  
WEST PALM BEACH, FL 33406  
TELEPHONE 561-684-9400 • FAX 561-689-9421

USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB

(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

Vs (b)(6);(

2/22/2018

856083 A

USSS FEB BLOCK 1

033042

-46,589.17

150 Australian Ave  
WEST PALM BEACH, FL 33406  
TELEPHONE 561-884-9400 • FAX 561-889-9421

USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB  
(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);(b)(7)(C);(b)(7)(E)

2/22/2018

856063 A

USSS FEB BLOCK 1

033042

-45,589.17

150 Australian Ave  
WEST PALM BEACH, FL 33406  
TELEPHONE 561-684-9400 • FAX 561-689-9421

USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB  
(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

vs (b)(6);(b)(7)(E)

USSS FEB BLOCK 1

2/22/2018

858063 A

033042

160 Australian Ave  
WEST PALM BEACH, FL 33406  
TELEPHONE 561-684-9400 • FAX 561-689-9421

USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB

(b)(7)(E)

12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

(b)(6);(b)(7)(C);(b)(7)(E)

USSS FEB BLOCK 1

2/22/2018

856083 A

033042

-45,589.17

150 Australian Ave  
WEST PALM BEACH, FL 33406  
TELEPHONE 561-884-9400 • FAX 561-889-9421

USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB

(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);(b)(7)(C)

USSS FEB BLOCK 1

2/22/2018

856083 A

033042

-45,569.17

150 Australian Ave  
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WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB

(b)(7)(E)

12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car.

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);(b)(7)(E)

2/22/2018

856083 A

USSS FEB BLOCK 1

033042

-45,589.17



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USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB

(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);(b)(7)(C)

USSS FEB BLOCK 1

2/22/2018

856083 A

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-45,589.17

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UNITED STATES OF AMERICA

USSFEB

(b)(7)(E)

12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);

2/22/2018

856083 A

USSS FEB BLOCK 1

033042

-46,589.17

150 Australian Ave  
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TELEPHONE 561-684-9400 • FAX 561-689-8421

USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB

(b)(7)(E) 12.00.00 AM  
(b)(7)(E) 12.00.00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);(b)(7)(E)

2/22/2018

856083 A

USSS FEB BLOCK 1

033042

-45,589.17

150 Australian Ave  
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USSS FEB BLOCK 1

WEST PALM BEACH FL 33406  
UNITED STATES OF AMERICA

USSFEB  
(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);

2/22/2018

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UNITED STATES OF AMERICA

USSFEB

(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

VS (b)(6);

2/22/2018

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-45,589.17

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USSFEB

(b)(7)(E) 12:00:00 AM  
(b)(7)(E) 12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

3/5/2018

(b)(6);(b)(7)(C);(b)(7)(E)

2/22/2018

3322895

(b)(6);(b)(7)(C)  
\*\*BALANCE\*\*

(\$45,589.17)  
\$0.00

VS (b)(6);(b)(7)(C)

2/22/2018

856083 A

USSS FEB BLOCK 1

033042

-45,589.17

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(b)(7)(E) USSS 4

GET

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3

(b)(7)(E) 12:00:00 AM  
(b)(7)(E) 12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

308345 A

1601 WORTHINGTON ROAD  
WEST PALM BEACH, FL 33409  
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(b)(7)(E) USSS 4

GET

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3

(b)(7)(E) 12:00:00 AM  
(b)(7)(E) 12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

308345 A



1801 WORTHINGTON ROAD  
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(b)(7)(E) USSS 4

GET

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3

(b)(7)(E)

12:00.00 AM  
12:00.00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

308345 A

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WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3  
(b)(7)(E) 12.00.00 AM  
(b)(7)(E) 12.00.00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

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(b)(7)(E)USSS 4

GET

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EU3

(b)(7)(E)

12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

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EU3

(b)(7)(E) 12:00:00 AM  
12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

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(b)(7)(E) USSS 4

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(b)(7)(E)

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12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

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(b)(7)(E)USSS 4

GET

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3

(b)(7)(E)

12:00.00 AM  
12:00.00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

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(b)(7)(C) USSS 4

GET

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3

(b)(7)(E)

12:00:00 AM  
12 00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

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(b)(7)(E)USSS 4

GET

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3

(b)(7)(E) 12:00 00 AM  
(b)(7)(E) 12:00.00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

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WEST PALM BEACH, FL 33409  
TELEPHONE 561-472-7333 • FAX 561-472-7511

(b)(7)(E) USSS 4

GET

WEST PALM BEACH FL 33409  
UNITED STATES OF AMERICA

EU3

(b)(7)(E)

12:00.00 AM  
12:00.00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

308345 A

1601 WORTHINGTON ROAD  
WEST PALM BEACH, FL 33409  
TELEPHONE 561-472-7333 • FAX 561-472-7511

(b)(7)(E) JSSS 4

GET

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Rate Plan:  
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Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

308345 A

1801 WORTHINGTON ROAD  
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HH #  
AL:  
Car:

2/21/2018

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308345 A

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Car:

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12:00:00 AM

Rate Plan:  
HH #  
AL:  
Car:

2/21/2018

(b)(6);(b)(7)(C);(b)(7)(E)

\*\*BALANCE\*\*

\$50,429.00

308345 A



**EMBASSY  
SUITES**

by HILTON

West Palm Beach Central

USSS FEB 14-20

ORIGINAL DATE: 2/21/2018

ATTN: (b)(6);(b)(7)(C);(b)(7)(D)

WEST PALM BEACH, FL 33406

INVOICE NUMBER:

CUSTOMER ID:

(b)(6)

SERVICES RENDERED IN CONNECTION WITH YOUR MEETING HELD AT THE EMBASSY SUITES  
WEST PALM.

GUEST ROOM CHARGES	27,007.00
FOOD AND BEVERAGE CHARGES	0.00
MISCELLANEOUS	0.00
SUBTOTAL	27,007.00
PAYMENTS, DEPOSITS & ADJUSTMENTS	-27,007.00

**TOTAL: 0.00**

IT HAS BEEN OUR PLEASURE SERVING YOU. WE LOOK FORWARD TO YOUR NEXT VISIT TO  
EMBASSY SUITES WEST PALM.  
"PLEASE REMIT TO": 1601 BELVEDERE ROAD WEST PALM BEACH FL 33406 TEL 561-689-6400

ORIGINAL

ORIGINAL DATE: 2/21/2018

EMBASSY SUITES WEST PALM  
STATEMENT OF GUEST FOLIO CHARGES  
USSS FEB 14-20

GUEST NAME	ROOM NUMBER	DEPARTURE DATE	ROOM & TAX	FOOD AND BEVERAGE CHARGES	TELEPHONE	MISCELLANE OUS	SHOPS	OTHER	PAYMENTS DEPOSITS	TOTAL
------------	----------------	-------------------	------------	---------------------------------	-----------	-------------------	-------	-------	----------------------	-------

(b)(6);(b)(7)(C);(b)(7)(E)

			TOTAL	27,007.00	0.00	0.00	0.00	0.00	0.00	27,007.00
--	--	--	-------	-----------	------	------	------	------	------	-----------

HILTON



ORIGINAL DATE: 2/21/2018

**EMBASSY SUITES WEST PALM  
STATEMENT OF DEPOSITS, PAYMENTS & ADJUSTMENTS  
USSS FEB 14-20**

DATE	REFERENCE	DESCRIPTION	AMOUNT
2/21/2018	1098512	CREDIT CARD	-27,007.00

<b>TOTAL</b>			<b>(27,007.00)</b>
--------------	--	--	--------------------

**HILTON**

**RIF**



WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6):(b)(7)
NAME	US DEPARTMENT OF HOM	FARE	DEPART	TIME	ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-5923	VSXXXXXXXXXX	(b)(6):(b)(7)		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

(b)(7)(E)



WEST PALM BEACH MARRIOTT  
1001 OKEECHOBEE BLVD  
WEST PALM BEACH, FL 33401  
561-833-1234

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Signature X



WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6);(b)(7)(E)
NAME	US DEPARTMENT OF HOM	RATE	DEPART	TIME	ACCT#
TYPE	805 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-6823	VSXXXXXXXXX	(b)(6);(b)(7)(E)		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

(b)(7)(E)



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WEST PALM BEACH, FL 33401  
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Signature X



WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	TIME	DUPLICATE 9:18	(b)(6);(
NAME	US DEPARTMENT OF HOM	RATE	DEPART			ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18	ARRIVE		
	WEST PALM BE FL					
ROOM	33401-5823	VSXXXXXXXXXX	(b)(6);(			MR#
CLERK	ADDRESS	PAYMENT				
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE		

(b)(7)(E)



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Signature X



WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	TIME	DUPLICATE 8:18	(b)(6);(b)
	NAME	RATE	DEPART			ACCT#
TYPE	US DEPARTMENT OF HOM		02/15/18	TIME		
	806 S FLAGLER DRIVE		ARRIVE			
ROOM	WEST PALM BE FL					
CLERK	33401-8823	VSXXXXXXXXXX	(b)(6);(b)			MR#:
	ADDRESS	PAYMENT				
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE		

(b)(7)(E)



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Signature \_\_\_\_\_



WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6):(b)(7)(E)
NAME	US DEPARTMENT OF HOM	RATE	DEPART	TIME	ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-5923	VSXXXXXXXXXX	(b)(6):(b)(7)(E)		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

(b)(7)(E)



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WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6);(
NAME	US DEPARTMENT OF HOM	RATE	DEPART	TIME	ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-8923	VSXXXXXXXXXX	(b)(6);(		
CLERK	ADDRESS	PAYMENT		MR#:	
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

(b)(7)(E)



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ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6);(b)(7)(E)
NAME	US DEPARTMENT OF HOM	RATE	DEPART	TIME	ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-8823	VSXXXXXXXXXX	(b)(6);(b)(7)(E)		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

(b)(7)(E)



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GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6):f
NAME		RATE	DEPART	TIME	ACCT#
TYPE	US DEPARTMENT OF HOM		02/15/18		
	505 S FLAGLER DRIVE		ARRIVE	TIME	
	WEST PALM BE FL				
ROOM	33401-5923	VSXXXXXXXXX	(b)(6):(b)		MR#:
CLERK	ADDRESS	PAYMENT			

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
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(b)(7)(E)



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ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9-18	(b)(6);(b)(7)(E)
NAME	US DEPARTMENT OF HOM	RATE	DEPART	TIME	ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-5823	VSXXXXXXXXX	(b)(6);(b)(7)(E)		MR#:
CLECK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

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ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6);(b)(7)(E)
NAME	US DEPARTMENT OF HOM	RATE	DEPART	TIME	ACCT#
TYPE	506 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-6823	VSXXXXXXXXXX	(b)(6);(b)(7)(E)		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

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Signature 21

**WEST PALM BEACH MARRIOTT**

## GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6);(b)(7)(C)
	NAME	RATE	DEPART	TIME	ACCT#
TYPE	US DEPARTMENT OF HOM		02/15/18		
	505 S FLAGLER DRIVE		ARRIVE	TIME	
	WEST PALM BE FL				
ROOM	33401-5823	VSXXXXXXXXXX	(b)(6);(b)(7)(C)		MR#:
CLERK	ADDRESS	PAYMENT			

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
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(b)(7)(E)



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ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6);(b)
NAME		RATE	DEPART		ACCT#
TYPE	US DEPARTMENT OF HOM		02/15/18		
	505 S FLAGLER DRIVE		ARRIVE		
	WEST PALM BE FL				
ROOM	33401-5923	VSXXXXXXXXX	(b)(6);(b)		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

(b)(7)(E)



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ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE	9:18	(b)(6):(
NAME		RATE	DEPART			ACCT#
TYPE	US DEPARTMENT OF HOM		02/15/18			
	505 S FLAGLER DRIVE		ARRIVE			
	WEST PALM BE FL					
ROOM	33401-5923	VSXXXXXXXXX	(b)(6)-(			MR#:
CLERK	ADDRESS	PAYMENT				
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE		

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WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6):d
NAME		RATE	DEPART	TIME	ACCT#
TYPE	US DEPARTMENT OF HOM		02/15/18		
	505 S FLAGLER DRIVE		ARRIVE	TIME	
ROOM	WEST PALM BE FL				
CLERK	33401-5823	VSXXXXXXXXXX	(b)(6):d		MR#:
	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

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WEST PALM BEACH MARRIOTT

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ROOM	US SECRET SERVICE **	.00	02/15/18	DUPLICATE 9:18	(b)(6);(b)(7)(E)
NAME	US DEPARTMENT OF HOM	DATE	DEPART	TIME	ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-6923	VSXXXXXXXXXX	(b)(6);(b)(7)(E)		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	

(b)(7)(E)



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WEST PALM BEACH MARRIOTT

GUEST FOLIO

ROOM	US SECRET SERVICE "	.00	02/15/18	DUPLICATE 9:18	(b)(6);(b)
NAME	US DEPARTMENT OF HOM	DATE	DEPART	TIME	ACCT#
TYPE	505 S FLAGLER DRIVE		02/15/18		
	WEST PALM BE FL		ARRIVE	TIME	
ROOM	33401-5923	VSXXXXXXXXXX	(b)(6);(		MR#:
CLERK	ADDRESS	PAYMENT			
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE	
(b)(7)(E)					
				35295 00	.00



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WEST PALM BEACH, FL 33401  
561-833-1234

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amounts shown in the credit column approximate any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after check-out, you will owe us interest from the check-out date on any unpaid amount at the rate of 1 5% per month (ANNUAL RATE 18%) or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X

PPD Expenses for Trip to Palm Beach, FL on May 23,				
Date	City	Site	Vendor	Reason
02/16/18	Palm Beach, FL	Mar-a-Lago Resort	Grimes Events & Party Tents	Tents
02/16/18	Palm Beach, FL	Mar-a-Lago Resort	United Rentals	Generators and Lights
02/16/18	Palm Beach, FL	Mar-a-Lago Resort	National Construction Rentals	Barricades
02/16/18	Palm Beach, FL	Mar-a-Lago Resort	In & Out Portables	Portable Toilets

**RIF**

<b>2018</b>
<b>Amount</b>
<b>\$4,562.74</b>
<b>\$3,337.65</b>
<b>\$1,391.64</b>
<b>\$630.00</b>



Auth# \_\_\_\_\_



## PRESIDENTIAL PROTECTIVE DIVISION PROTECTIVE ADVANCE EXPENSE REQUEST

ADVANCE or SITE AGENT: (b)(6);(b)(7)(C);(b)(7)(E)		Trip # 332-601-035-0108-18-11	
DATE OF VISIT: 2/16/18 – 2/19/18		CITY & STATE: Palm Beach, FL	
SITE(s)/LOCATION: Mar-a-Lago Resort, 1100 South Ocean Boulevard, Palm Beach, FL 33480			
SITE(s)/LOCATION cont'd: N/A		COUNTRY: USA	
VENDOR NAME: In & Out Portables			
VENDOR TAX ID #:		(b)(4)	
VENDOR ADDRESS: 1060 Skees Rd West Palm Beach, FL 33411			
CONTACT PERSON: (b)(6);(b)(7)(C)		TELEPHONE #: 561-340-3107	
AUTHORIZED AMOUNT: (Not to Exceed) \$630.00			
(THIS AMOUNT MUST NOT BE EXCEEDED WITHOUT OBTAINING ADDITIONAL AUTHORIZATION IN ADVANCE OF PLACING THE ORDER / RESERVATION WITH THE VENDOR.)			
ITEM OR SERVICE REQUESTED:			
(b)(7)(E)			
PURPOSE OF EXPENDITURE: For restrooms for teams working at the Mar a Lago property			
ADDRESS WHERE EQUIPMENT SHALL BE DELIVERED OR SERVICES PROVIDED: 1100 South Ocean Boulevard, Palm Beach, FL 33480			
<input type="checkbox"/> CHECK THIS BOX IF AN EMERGENCY PURCHASE ORDER IS REQUIRED			
PPD REQUISITION NUMBER:		DATE SUBMITTED:	
EMERGENCY PURCHASE ORDER NUMBER:		DATE APPROVED:	
PROCUREMENT CONTACT PERSON:			
PLEASE FORWARD INVOICE TO THE FOLLOWING ADDRESS:			
(b)(6);(b)(7)(C);(b)(7)(E)		-OR- COMMUNICATIONS CENTER (PPD) ATTN: Budget Coordinator P. O. Box 6500 Springfield, VA 22150	
Please note that payment shall be made within 30 days of our receipt of a valid invoice and all required vendor information. For fastest service, please email invoice to (b)(6);(b)(7)(C);(b)(7)(E)			
OPERATIONS SUPERVISORY APPROVAL OF EXPENDITURE REQUEST:		DATE OF APPROVAL:	
ATSAI (b)(6);(b)(7)(C);(b)(7)(E)		3/20/18	
APPROVING OFFICIAL AUTHORIZATION FOR EXPENDITURES FOR ITEMS / RENTALS OF \$3,500 OR LESS or SERVICES OF \$2,500 OR LESS:		AUTHORIZATION DATE:	
Liaison & Administrative Manager (b)(6);(b)(7)(C)			

**LAW ENFORCEMENT SENSITIVE**

PPD PAER (05/2017)





6356 Narcoossee Rd  
Orlando, FL 32822  
407-381-2727

Sales Representative Info:

Prepared By: (b)(6);(b)(7)(C)

E-mail Address: (b)(6);(b)(7)(C)@rentnational.com

Fax Signed Quote To: 407-381-3529

**QUOTATION FOR SERVICES****NOTE: Installation CANNOT be confirmed until signed quote is returned and received.**

Date: 02/06/2018

<b>Company Name:</b> PRESIDENTIAL PROTECTIVE				<b>E-mail:</b>	
<b>Bid Requested By:</b> (b)(6);(b)(7)(C)				<b>Other Phone:</b>	
<b>Company Phone:</b> (b)(6);(b)(7)(C)				<b>Fax Number:</b>	
<b>Job/Event Name:</b>				<b>Site Contact Name:</b>	
<b>Job Address:</b>				<b>Site Contact Phone:</b>	
<b>Cross Street:</b>				<b>Other Info:</b>	
<b>Job City/State/Zip:</b> WEST PALM BEACH FL				<b>Existing Account #:</b>	
<b>Contract Length</b>		<b>Delivery/Install Date</b>		<b>Removal Date</b>	
<b>SPECIAL EVENT</b>		Thu. Feb 15, 2018		Mon. Feb 19, 2018	
				N30	
				<b>** Prevailing Wage?</b>	

#	Quantity	UOM	Description	Taxable	Unit Price	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13			IT IS NOT RECOMMENDED TO PUT WINDSCREEN ON PANELS THEY CAN FALL OVER			
14						
15						

<b>Notes:</b> Extra Charges May Include: Core Drill, Hand Carry, Hard Ground, Hillside or Stand Roll. Permits are the responsibility of the customer.			<b>Subtotal</b>	\$1,391.64
			<b>Sales Tax ( 0 )</b>	\$0.00
			<b>Total</b>	\$1,391.64

Please provide billing information.	Address: _____ City: _____ State: _____ Zip: _____	<b>This bid expires in 7 days.</b>
--	---	------------------------------------

**All Prices include a one-time Delivery/Installation and a one-time Pick-up/Removal.****Minimum for Order \$450.00**

Bids are based on quantity; if the quantity changes, the bid changes. Please note, deliveries/installs are scheduled Mon.-Fri. 7:00 a.m. - 3:00 p.m. Additional fees will be assessed for Hillside Installations, Hand Carry, Core Drilling and Inaccessibility. Additional charges will also apply for weekends and after hours work. COD orders are to be paid either in advance or upon delivery prior to installation. Orders with driven post(s) will require 3-5 business days to complete the underground markings. Remove and Relocate charges are billed at the same rate as the installation price.

\*\* In the event that the above services are subject to prevailing wage laws, any penalties or increased wages not included in this estimate will be paid by the Lessee.  
Certified payroll is available upon request.

Customer's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Customer Name: \_\_\_\_\_

PO#: \_\_\_\_\_

Auth# \_\_\_\_\_



## PRESIDENTIAL PROTECTIVE DIVISION PROTECTIVE ADVANCE EXPENSE REQUEST

ADVANCE or SITE AGENT: (b)(6);(b)(7)(C);(b)(7)(E)		Trip # 332-601-035-0108-18-11	
DATE OF VISIT: 2/16/18 – 2/19/18		CITY & STATE: Palm Beach, FL	
SITE(s)/LOCATION: Mar-a-Lago Resort, 1100 South Ocean Boulevard, Palm Beach, FL 33480			
SITE(s)/LOCATION cont'd: N/A		COUNTRY: USA	
VENDOR NAME: In & Out Portables			
VENDOR TAX ID #: (b)(4)			
VENDOR ADDRESS: 1060 Skees Rd West Palm Beach, FL 33411			
CONTACT PERSON: (b)(6);(b)(7)(C);(b)(7)(E)		TELEPHONE #: 561-340-3107	
AUTHORIZED AMOUNT: <b>(Not to Exceed) \$630.00</b>			
(THIS AMOUNT <b>MUST NOT BE EXCEEDED WITHOUT OBTAINING ADDITIONAL AUTHORIZATION IN ADVANCE OF PLACING THE ORDER / RESERVATION WITH THE VENDOR.</b> )			
ITEM OR SERVICE REQUESTED:			
(b)(7)(E)			
PURPOSE OF EXPENDITURE: For restrooms for teams working at the Mar a Lago property			
ADDRESS WHERE EQUIPMENT SHALL BE DELIVERED OR SERVICES PROVIDED: 1100 South Ocean Boulevard, Palm Beach, FL 33480			
<input type="checkbox"/> CHECK THIS BOX IF AN EMERGENCY PURCHASE ORDER IS REQUIRED			
PPD REQUISITION NUMBER:		DATE SUBMITTED:	
EMERGENCY PURCHASE ORDER NUMBER:		DATE APPROVED:	
PROCUREMENT CONTACT PERSON:			
PLEASE FORWARD INVOICE TO THE FOLLOWING ADDRESS:			
(b)(6);(b)(7)(C);(b)(7)(E)		-OR- COMMUNICATIONS CENTER (PPD) ATTN: Budget Coordinator P. O. Box 6500 Springfield, VA 22150	
Please note that payment shall be made within 30 days of our receipt of a <u>valid invoice</u> and all required vendor information. For fastest service, please email invoice to (b)(6);(b)(7)(C);(b)(7)(E)			
OPERATIONS SUPERVISORY APPROVAL OF EXPENDITURE REQUEST:		DATE OF APPROVAL:	
ATSAIC (b)(6);(b)(7)(C)			
APPROVING OFFICIAL AUTHORIZATION FOR EXPENDITURES FOR ITEMS / RENTALS OF \$3,500 OR LESS or SERVICES OF \$2,500 OR LESS:		AUTHORIZATION DATE:	
Liaison & Administrative Manager (b)(6);(b)(7)(C)			



Auth# \_\_\_\_\_



## PRESIDENTIAL PROTECTIVE DIVISION PROTECTIVE ADVANCE EXPENSE REQUEST

ADVANCE or SITE AGENT: (b)(6);(b)(7)(C);(b)(7)(E)		Trip# <b>332-601-035-0108-18-11</b>
DATE OF VISIT: 2/16/18 – 2/19/18		CITY & STATE: Palm Beach, FL
SITE(s)/LOCATION: Mar-a-Lago Resort, 1100 South Ocean Boulevard, Palm Beach, FL 33480		
SITE(s)/LOCATION cont'd: N/A		COUNTRY: USA
VENDOR NAME: Grimes Events & Party Tents		
VENDOR TAX ID #: (b)(4)		
VENDOR ADDRESS: 614 SE 4 <sup>th</sup> Avenue, Delray Beach, FL 33483		
CONTACT PERSON: (b)(6);(b)(7)(C);(b)(7)(E)		TELEPHONE #: 561-853-8368
AUTHORIZED AMOUNT: <b>(Not to Exceed) \$4562.74</b>		
(THIS AMOUNT MUST NOT BE EXCEEDED WITHOUT OBTAINING ADDITIONAL AUTHORIZATION IN ADVANCE OF PLACING THE ORDER / RESERVATION WITH THE VENDOR.)		
ITEM OR SERVICE REQUESTED: (b)(7)(E)		
PURPOSE OF EXPENDITURE: To provide operational security		
ADDRESS WHERE EQUIPMENT SHALL BE DELIVERED OR SERVICES PROVIDED: 1100 South Ocean Boulevard, Palm Beach, FL 33480		
<input type="checkbox"/> CHECK THIS BOX IF AN EMERGENCY PURCHASE ORDER IS REQUIRED		
PPD REQUISITION NUMBER:		DATE SUBMITTED:
EMERGENCY PURCHASE ORDER NUMBER:		DATE APPROVED:
PROCUREMENT CONTACT PERSON:		
<b>PLEASE FORWARD INVOICE TO THE FOLLOWING ADDRESS:</b>		
(b)(6);(b)(7)(C);(b)(7)(E)		-OR- COMMUNICATIONS CENTER (PPD) ATTN: Budget Coordinator P. O. Box 6500 Springfield, VA 22150
Please note that payment shall be made within 30 days of our receipt of a <u>valid invoice</u> and all required vendor information. For fastest service, please email invoice to (b)(6);(b)(7)(C);(b)(7)(E)		
OPERATIONS SUPERVISORY APPROVAL OF EXPENDITURE REQUEST:		DATE OF APPROVAL:
ATSAIC (b)(6);(b)(7)(C);(b)(7)(E)		
APPROVING OFFICIAL AUTHORIZATION FOR EXPENDITURES FOR ITEMS / RENTALS OF \$3,500 OR LESS or SERVICES OF \$2,500 OR LESS:		AUTHORIZATION DATE:
Liaison & Administrative Manager (b)(6);(b)(7)(C);(b)(7)(E)		

Auth# \_\_\_\_\_



## PRESIDENTIAL PROTECTIVE DIVISION PROTECTIVE ADVANCE EXPENSE REQUEST

ADVANCE or SITE AGENT: (b)(6);(b)(7)(C);(b)(7)(E)		Trip# <b>332-601-035-0108-18-11</b>	
DATE OF VISIT: 2/16/18 – 2/19/18		CITY & STATE: Palm Beach, FL	
SITE(s)/LOCATION: Mar-a-Lago Resort, 1100 South Ocean Boulevard, Palm Beach, FL 33480			
SITE(s)/LOCATION cont'd: N/A		COUNTRY: USA	
VENDOR NAME: National Construction Rentals			
VENDOR TAX ID #:		(b)(4)	
VENDOR ADDRESS: 6356 Narcoossee Rd. Orlando, FL 32822			
CONTACT PERSON: (b)(6);(b)(7)(C);(b)(7)(E)		TELEPHONE #: 407-381-2727	
AUTHORIZED AMOUNT: <b>(Not to Exceed) \$1,391.64</b>			
(THIS AMOUNT <b>MUST NOT BE EXCEEDED WITHOUT OBTAINING ADDITIONAL AUTHORIZATION IN ADVANCE OF PLACING THE ORDER / RESERVATION WITH THE VENDOR.</b> )			
ITEM OR SERVICE REQUESTED:		(b)(7)(E)	
(b)(7)(E)		Delivery: 2/15/18, Pick up: 2/20/18 (morning)	
PURPOSE OF EXPENDITURE: To provide operational security			
ADDRESS WHERE EQUIPMENT SHALL BE DELIVERED OR SERVICES PROVIDED: 1100 South Ocean Boulevard, Palm Beach, FL 33480			
<input type="checkbox"/> CHECK THIS BOX IF AN EMERGENCY PURCHASE ORDER IS REQUIRED			
PPD REQUISITION NUMBER:		DATE SUBMITTED:	
EMERGENCY PURCHASE ORDER NUMBER:		DATE APPROVED:	
PROCUREMENT CONTACT PERSON:			
<b>PLEASE FORWARD INVOICE TO THE FOLLOWING ADDRESS:</b>			
(b)(6);(b)(7)(C);(b)(7)(E)		-OR- COMMUNICATIONS CENTER (PPD) ATTN: Budget Coordinator P. O. Box 6500 Springfield, VA 22150	
Please note that payment shall be made within 30 days of our receipt of a <u>valid invoice</u> and all required vendor information. For fastest service, please email invoice to (b)(6);(b)(7)(C);(b)(7)(E)			
OPERATIONS SUPERVISORY APPROVAL OF EXPENDITURE REQUEST:		DATE OF APPROVAL:	
ATSAIC (b)(6);(b)(7)(C);(b)(7)(E)			
APPROVING OFFICIAL AUTHORIZATION FOR EXPENDITURES FOR ITEMS / RENTALS OF \$3,500 OR LESS or SERVICES OF \$2,500 OR LESS:		AUTHORIZATION DATE:	
Liaison & Administrative Manager (b)(6);(b)(7)(C);(b)(7)(E)			



Auth# \_\_\_\_\_



## PRESIDENTIAL PROTECTIVE DIVISION PROTECTIVE ADVANCE EXPENSE REQUEST

ADVANCE or SITE AGENT: (b)(6);(b)(7)(C);(b)(7)(E)		Trip# 332-601-035-0108-18-11	
DATE OF VISIT: 2/16/18 – 2/19/18		CITY & STATE: Palm Beach, FL	
SITE(s)/LOCATION: Mar-a-Lago Resort, 1100 South Ocean Boulevard, Palm Beach, FL 33480			
SITE(s)/LOCATION cont'd: N/A		COUNTRY: USA	
VENDOR NAME: United Rentals			
VENDOR TAX ID #:		(b)(4)	
VENDOR ADDRESS: Branch 698 3250 West 45 <sup>th</sup> Street West Palm Beach, FL 33407			
CONTACT PERSON: (b)(6);(b)(7)(C)		TELEPHONE #: 240-624-3011	
AUTHORIZED AMOUNT: <b>(Not to Exceed)</b> \$3,337.65			
(THIS AMOUNT MUST NOT BE EXCEEDED WITHOUT OBTAINING ADDITIONAL AUTHORIZATION IN ADVANCE OF PLACING THE ORDER / RESERVATION WITH THE VENDOR.)			
ITEM OR SERVICE REQUESTED:		(b)(7)(E)	
Delivery: 2/15/18 Pickup: 2/19/18 (after 10pm)			
PURPOSE OF EXPENDITURE: To provide operational security			
ADDRESS WHERE EQUIPMENT SHALL BE DELIVERED OR SERVICES PROVIDED: 1100 South Ocean Boulevard, Palm Beach, FL 33480			
<input type="checkbox"/> CHECK THIS BOX IF AN EMERGENCY PURCHASE ORDER IS REQUIRED			
PPD REQUISITION NUMBER:		DATE SUBMITTED:	
EMERGENCY PURCHASE ORDER NUMBER:		DATE APPROVED:	
PROCUREMENT CONTACT PERSON:			
PLEASE FORWARD INVOICE TO THE FOLLOWING ADDRESS:			
(b)(6);(b)(7)(C);(b)(7)(E)		-OR- COMMUNICATIONS CENTER (PPD) ATTN: Budget Coordinator P. O. Box 6500 Springfield, VA 22150	
Please note that payment shall be made within 30 days of our receipt of a valid invoice and all required vendor information. For fastest service, please email invoice to (b)(6);(b)(7)(C);(b)(7)(E)			
OPERATIONS SUPERVISORY APPROVAL OF EXPENDITURE REQUEST:		DATE OF APPROVAL:	
ATSAIC (b)(6);(b)(7)(C);(b)(7)(E)			
APPROVING OFFICIAL AUTHORIZATION FOR EXPENDITURES FOR ITEMS / RENTALS OF \$3,500 OR LESS or SERVICES OF \$2,500 OR LESS:		AUTHORIZATION DATE:	
Liaison & Administrative Manager (b)(6);(b)(7)(C)			

# Grimes Events & Party Tents

614 SE 4th Ave, Delray Beach, FL 33483  
 (561) 853-TENT (8368) Fax (561) 431-0948  
 www.GrimesPartyTents.com

Est. #

5736

Quote

Name / Address

Location

United States Secret Service SER-PPD  
 245 Murray Lane S.W.  
 Building T-5  
 Washington D.C.  
 202-805-3722

(b)(6);(b)(7)(C);(b)(7)(E)  
 (1100 South Ocean Blvd, Palm Beach, FL 33  
 +  
 (b)(6);(b)(7)(C) West Palm Beach, FL)

Build Date/ ...	Event Date		Breakdown	Rep	Create Date	Terms	Down Payment	
Thurs Feb 15	2/17/2018		Mon Feb 19	MG	2/5/2018	Due on receipt	100%	
Item	Qty	Description					Rate	Total

(b)(7)(E)

A minimum reservation of \$500 or less requires a 100% nonrefundable deposit. All other reservations require a 50% nonrefundable deposit.  
 All accounts are due 24 hours before delivery.

Subtotal

Fees &amp; Taxes (0.0%)

Date &amp; Sign To Book \_\_\_\_\_

Total

<h1 style="margin: 0;">Grimes Events &amp; Party Tents</h1>						
<b>614 SE 4th Ave, Delray Beach, FL 33483</b> <b>(561) 853-TENT (8368) Fax (561) 431-0948</b> <b>www.GrimesPartyTents.com</b>					Est. #	5736
					<b>Quote</b>	
<b>Name / Address</b>			<b>Location</b>			
United States Secret Service SER-PPD 245 Murray Lane S.W. Building T-5 Washington D.C. 202-805-3722			(b)(6);(b)(7)(C);(b)(7)(E) (1100 South Ocean Blvd, Palm Beach, FL 33 + (b)(6);(b)(7)(C) West Palm Beach, FL)			
<b>Build Date/ ...</b>	<b>Event Date</b>	<b>Breakdown</b>	<b>Rep</b>	<b>Create Date</b>	<b>Terms</b>	<b>Down Payment</b>
Thurs Feb 15	2/17/2018	Mon Feb 19	MG	2/5/2018	Due on receipt	100%
<b>Item</b>	<b>Qty</b>	<b>Description</b>				<b>Rate</b>
(b)(7)(E)						
<b>A minimum reservation of \$500 or less requires a 100% nonrefundable deposit. All other reservations require a 50% nonrefundable deposit.</b> <b>All accounts are due 24 hours before delivery.</b>					<b>Subtotal</b>	
					<b>Fees &amp; Taxes (0.0%)</b>	
<b>Date &amp; Sign To Book</b> _____					<b>Total</b>	

# Grimes Events & Party Tents

614 SE 4th Ave, Delray Beach, FL 33483  
(561) 853-TENT (8368) Fax (561) 431-0948  
www.GrimesPartyTents.com

Est. #

5736

Quote

Name / Address

Location

United States Secret Service SER-PPD  
245 Murray Lane S.W.  
Building T-5  
Washington D.C.  
202-805-3722

(b)(6);(b)(7)(C);(b)(7)(E)  
(1100 South Ocean Blvd, Palm Beach, FL 33  
+  
(b)(6);(b)(7)(C) West Palm Beach, FL)

Buld Date/ ...	Event Date	Breakdown	Rep	Create Date	Terms	Down Payment
Thurs Feb 15	2/17/2018	Mon Feb 19	MG	2/5/2018	Due on receipt	100%

Item	Qty	Description	Rate	Total
------	-----	-------------	------	-------

(b)(7)(E)

A minimum reservation of \$500 or less requires a 100% nonrefundable deposit. All other reservations require a 50% nonrefundable deposit.  
All accounts are due 24 hours before delivery.

**Subtotal** \$3,572.84

**Fees & Taxes (0.0%)** \$0.00

**Date & Sign To Book** \_\_\_\_\_

**Total** \$3,572.84

BRANCH 698  
3250 WEST 45TH STREET  
WEST PALM BEACH FL 33407-019  
561-616-5000  
561-616-8140 FAX

Job Site  
Address

MAR A LAGO  
1100 S OCEAN BLVD  
PALM BEACH FL 33480-5004

Office: (b)(6);(b)(7)(C) Cell: (b)(6);(b)(7)(C)

US SECRET SERVICE  
9200 POWDER MILL RD  
LAUREL MD 20708-9765

# 154468565

Customer # : (b)(6);(b)(7)  
Quote Date : 02/12/18  
Estimated Out : 02/15/18 04:00 PM  
Estimated In : 02/19/18 04:00 PM  
UR Job Loc : 1100 S OCEAN BLVD, P  
UR Job # : 17  
Customer Job ID :  
P.O. # : TBD  
Ordered By :  
Written By : (b)(6);(b)(7)(C)  
Salesperson :

**This is not an invoice  
Please do not pay from this document**

RENTAL ITEMS:								
Qty	Equipment	Description	Minimum	Day	Week	4 Week	Estimated Amt.	

(b)(7)(E)

Estimated Total: 3,337.65

### COMMENTS/NOTES:

CONTACT: (b)(6);(b)(7)(C)  
CELL#: (b)(6);(b)(7)(C)

Customer acknowledges one or more items listed may not be TAA compliant or on the GSA schedules.

TO SCHEDULE EQUIPMENT FOR PICKUP, CALL 800-UR-RENTS (800-877-3687)  
WE ARE AVAILABLE 24/7 TO SUPPLY YOU WITH A CONFIRMATION #  
IN ORDER TO CLOSE THIS CONTRACT

This proposal may be withdrawn if not accepted within 30 days. The above referenced Rental Protection Plan, environmental, and tax charges are estimates and are subject to change.

THIS IS NOT A RENTAL AGREEMENT. THE RENTAL OF EQUIPMENT AND ANY OTHER ITEMS LISTED ABOVE IS SUBJECT TO AVAILABILITY AND ACCEPTANCE OF THE TERMS AND CONDITIONS OF UNITED'S RENTAL AGREEMENT, WHICH MUST BE SIGNED PRIOR TO OR UPON DELIVERY OF THE EQUIPMENT AND OTHER ITEMS.

# Grimes Events & Party Tents

614 SE 4th Ave, Delray Beach, FL 33483  
 (561) 853-TENT (8368) Fax (561) 431-0948  
[www.GrimesPartyTents.com](http://www.GrimesPartyTents.com)

Est. #

5727

Quote

## Name / Address

United States Secret Service SER-PPD  
 245 Murray Lane S.W.  
 Building T-5  
 Washington D.C.  
 202-805-3722

## Location

(b)(6);(b)(7)(C);(b)(7)(E)  
 (1100 South Ocean Blvd, Palm Beach, FL 33  
 +  
 (b)(6);(b)(7)(C) West Palm Beach, FL)

Build Date/ ...	Event Date		Breakdown	Rep	Create Date	Terms	Down Payment	
Fri Feb 16	2/17/2018		Mon Feb 20	MG	1/18/2018	Due on receipt	100%	
Item	Qty	Description					Rate	Total

(b)(7)(E)

A minimum reservation of \$500 or less requires a 100% nonrefundable deposit. All other reservations require a 50% nonrefundable deposit.  
 All accounts are due 24 hours before delivery.

**Subtotal** \$989.90

**Fees & Taxes (0.0%)** \$0.00

**Date & Sign To Book** \_\_\_\_\_

**Total** \$989.90



Auth# \_\_\_\_\_



## PRESIDENTIAL PROTECTIVE DIVISION PROTECTIVE ADVANCE EXPENSE REQUEST

ADVANCE or SITE AGENT: (b)(6);(b)(7)(C);(b)(7)(E)		Trip# 332-601-035-0108-18-11
DATE OF VISIT: 2/16/18 – 2/19/18		CITY & STATE: Palm Beach, FL
SITE(s)/LOCATION: Mar-a-Lago Resort, 1100 South Ocean Boulevard, Palm Beach, FL 33480		
SITE(s)/LOCATION cont'd: N/A		COUNTRY: USA
VENDOR NAME: Grimes Events & Party Tents		
VENDOR TAX ID #: (b)(4)		
VENDOR ADDRESS: 614 SE 4 <sup>th</sup> Avenue, Delray Beach, FL 33483		
CONTACT PERSON: (b)(6);(b)(7)(C);(b)(7)(E)		TELEPHONE #: 561-853-8368
AUTHORIZED AMOUNT: <b>(Not to Exceed) \$4562.74</b>		
(THIS AMOUNT <b>MUST NOT BE EXCEEDED WITHOUT OBTAINING ADDITIONAL AUTHORIZATION IN ADVANCE OF PLACING THE ORDER / RESERVATION WITH THE VENDOR.</b> )		
ITEM OR SERVICE REQUESTED: (b)(7)(E)		
PURPOSE OF EXPENDITURE: To provide operational security		
ADDRESS WHERE EQUIPMENT SHALL BE DELIVERED OR SERVICES PROVIDED: 1100 South Ocean Boulevard, Palm Beach, FL 33480		
<input type="checkbox"/> CHECK THIS BOX IF AN EMERGENCY PURCHASE ORDER IS REQUIRED		
PPD REQUISITION NUMBER:		DATE SUBMITTED:
EMERGENCY PURCHASE ORDER NUMBER:		DATE APPROVED:
PROCUREMENT CONTACT PERSON:		
<b>PLEASE FORWARD INVOICE TO THE FOLLOWING ADDRESS:</b>		
<div style="border: 1px solid black; padding: 5px; display: inline-block;">(b)(6);(b)(7)(C);(b)(7)(E)</div> -OR-		COMMUNICATIONS CENTER (PPD) ATTN: Budget Coordinator P. O. Box 6500 Springfield, VA 22150
Please note that payment shall be made within 30 days of our receipt of a valid invoice and all required vendor information. For fastest service, please email invoice to (b)(6);(b)(7)(C);(b)(7)(E)		
OPERATIONS SUPERVISORY APPROVAL OF EXPENDITURE REQUEST:		DATE OF APPROVAL:
ATSAIC (b)(6);(b)(7)(C);(b)(7)(E)		
APPROVING OFFICIAL AUTHORIZATION FOR EXPENDITURES FOR ITEMS / RENTALS OF \$3,500 OR LESS or SERVICES OF \$2,500 OR LESS:		AUTHORIZATION DATE:
Liaison & Administrative Manager (b)(6);(b)(7)(C);(b)(7)(E)		

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		CONTRACT ID CODE		PAGE OF PAGES	
7 AMENDMENT/MODIFICATION NO P00001		3 EFFECTIVE DATE See Block 10C		4 REQUISITION/PURCHASE REQ NO 492565	
6 ISSUED BY PRO-PROCUREMENT DIV COMMUNICATIONS CENTER (PRO) 245 MURRAY LANE SW BLDG T-5 WASHINGTON DC 20223		5 CODE PRO-PROCUREMENT DIV		8 PROJECT NO (if applicable)	
8 NAME AND ADDRESS OF CONTRACTOR (In street county State and ZIP Code) GRIMES EVENTS & PARTY TENTS, INC 614 SE 4TH AVE DELRAY BEACH FL 33483		7 ADMINISTERED BY (if other than item 5) PRO-PROCUREMENT DIV COMMUNICATIONS CENTER (PRO) 245 MURRAY LANE SW BLDG T-5 WASHINGTON DC 20223		9 CODE PRO-PROCUREMENT DIV	
9A AMENDMENT OF SOLICITATION NO		9B DATED (SEE ITEM 11)			
X 10A MODIFICATION OF CONTRACT ORDER NO 7005041EP70050050		10B DATED (SEE ITEM 12) 01/22/2018			
CODE		FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<p>The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended. By one of the following methods: (a) (i), completing items 8 and 11, and returning _____ copies of the amendment; (b) by acknowledging receipt of this amendment on each copy of the offer submitted or (c) by separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. By virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter includes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.</p>					
12 ACCOUNTING AND APPROPRIATION DATA (if required) See Schedule		Net Increase:		\$12,000.00	
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE					
A THIS CHANGE ORDER IS ISSUED PURSUANT TO (Specify authority: THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO IN ITEM 10A)					
B THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in appropriation date, etc.) SET FORTH IN ITEM 14 PURSUANT TO THE AUTHORITY OF FAR 43.103(c)					
C THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF					
D OTHER (Specify type of modification and authority): X FAR 43.103(b) Extend POP					
E. IMPORTANT: Contractor <input type="checkbox"/> is not <input checked="" type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14 DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible)					
18-PPD-EPO-016-S1.E					
<p>The purpose of this modification is to extend the period of performance. Therefore, the period of performance is extended for the rental of tents, lights and miscellaneous items for a protective visit for the period (b)(7)(E) 02/15/2018-02/16/2018.</p>					
<p>The total value of this contract is increased from \$12,000.00 to not to exceed \$24,000.00.</p>					
<p>The POC for Grimes Events &amp; Party Tents is Marc Grimes at telephone number (61-853-4368 or (b)(6)grimespartytents.com</p>					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in item 9A or 10A as heretofore changed remain unchanged and in full force and effect.					
15A NAME AND TITLE OF SIGNER (Type or print)		15A NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
(b)(6);(b)(7)(C)		(b)(6);(b)(7)(C)			
15B CONTRACTING OFFICER		15C DATE SIGNED		15D DATE SIGNED	
(b)(6);(b)(7)(C)		1/25/18		(b)(6);(b)(7)(C) 1/25/2018	
NSN 7540-01-152-8070 Previous edition unusable		STANDARD FORM 10 (REV 10-83) Prescribed by GSA FAR 48 CFR, 1.243			



IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 01/18/2018		2. CONTRACT NO. (If any)		8. SHIP TO:				
3. ORDER NO. 70US0918P70090053		4. REQUISITION/REFERENCE NO. 493563		a. NAME OF CONSIGNEE 17TH&PENN AVE NW PPD RM10 WASH20502				
5. ISSUING OFFICE (Address correspondence to) PRO-PROCUREMENT DIV COMMUNICATIONS CENTER (PRO) 245 MURRAY LANE SW BLDG T-5 WASHINGTON DC 20223				b. STREET ADDRESS 17TH AND PENN AVE NW PRESIDENTIAL PD ROOM 4104NEOB				
				c. CITY WASHINGTON		d. STATE DC	e. ZIP CODE 20502	
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR NATIONAL CONSTRUCTION RENTALS				8. TYPE OF ORDER				
b. COMPANY NAME				<input checked="" type="checkbox"/> a. PURCHASE				
c. STREET ADDRESS 52 SOUTH 3RD STREET				REFERENCE YOUR:				
				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.				
d. CITY FERNWOOD				e. STATE PA		f. ZIP CODE 19050		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE PRO-PROCUREMENT DIV				
11. BUSINESS CLASSIFICATION (Check appropriate box(es))							12. F.O.B. POINT Destination	
<input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB								
13. PLACE OF			14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) Multiple		16. DISCOUNT TERMS	
a. INSPECTION Destination		b. ACCEPTANCE Destination						
17. SCHEDULE (See reverse for Rejections)								
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	(b)(7)(E)							
	The POC for National Construction Rentals Continued ...							
18. SHIPPING POINT			19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont pages)	
21. MAIL INVOICE TO:								
a. NAME IPP_USSS								
b. STREET ADDRESS (or P.O. Box) 950 H STREET NW								
c. CITY WASHINGTON			d. STATE DC	e. ZIP CODE 20223				17(i) GRAND TOTAL
22. UNITED STATES OF AMERICA BY (Signature)			(b)(6);(b)(7)(C)		23. NAME (Typed) (b)(6);(b)(7)(C)		TITLE: CONTRACTING/ORDERING OFFICER	

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# ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

Obtained via FOIA by Judicial Watch, Inc.

2

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

ORDER NO.

01/18/2018

70US0918P70090053

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>is (b)(6);(b)(7)(C) at telephone number (b)(6);(b)(7)(C) or (b)(6);(b)(7)(C)entnational.com</p> <p>The onsite POC is SA (b)(6);(b)(7)(C) at telephone number (b)(6);(b)(7)(C) or (b)(6);(b)(7)(C)</p> <p>The Contracting Officer is (b)(6);(b)(7)(C) at telephone number (b)(6);(b)(7)(C) or (b)(6);(b)(7)(C)</p>					

0001

Nonresponsive To The  
FOIA Request

0002

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

\$3,153.49

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Prescribed by GSA FAR (48 CFR) 53.213(g)