

From: (b) (6), (b) (7) (PPD)
To: (b) (6), (b) (7)(C) (PPD)
Cc: (b) (6), (b) (7)(C) (PPD)
Subject: 05/12/2021
Date: Thursday, September 14, 2023 5:31:12 PM
Attachments: [2021-05-27 18-40 suit2.pdf](#)
[2021-06-05 09-02.pdf](#)
[3361 \(b\) \(6\), \(b\) \(7\)\(C\) 5-20-21.pdf](#)
[Robert Talbott Indigo Classic Fit Carmel Suit S645CRSF-01 - Spring 2016 Collection Suits and Sport Coats - Custom and Ready-Made.pdf](#)
[Southwick Suit - Super 120"s Tropical Worsted Wool - Tic Weave Navy - Men"s Clothing, Traditional Natural shouldered clothing_p.pdf](#)
[1.jpg](#)
[2.jpg](#)
[3.jpg](#)
[7-26-18.pdf](#)
[2021-05-25 10-42 suit.pdf](#)

Sir,

Please see attached (from 2021). This should be everything needed.

Thanks,

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

SPECIAL AGENT | UNITED STATES SECRET SERVICE
PRESIDENTIAL PROTECTIVE DIVISION – SHIFT (b) (7)(E)
(b) (6), (b) (7)(C) | (b) (6), (b) (7)(C) [USSS.DHS.GOV](https://www.usss.dhs.gov)

**CIVILIAN EMPLOYEE CLAIM FOR LOSS OR
DAMAGE TO PERSONAL PROPERTY**

INSTRUCTIONS AND A CHECKLIST ARE AVAILABLE ON THE BACK OF THIS FORM. THE MAXIMUM AMOUNT ALLOWABLE ON ANY CLAIM IS \$40,000. REFERENCE CAN BE MADE TO TD P 32-13 FOR OTHER REQUIREMENTS FOR SUBMISSION OF CLAIM. PRIVACY ACT NOTICE SOLICITATION OF THE INFORMATION ON THIS FORM IS AUTHORIZED BY 31 U.S.C. 241 AND ITS DISCLOSURE IS MANDATORY IN ORDER TO INVESTIGATE AND ADJUDICATE YOUR CLAIM. ROUTINE USE (DISCLOSURE) OF THE INFORMATION PROVIDED MAY BE MADE TO FEDERAL, STATE OR LOCAL GOVERNMENTS, OR AGENCIES WHEN RELEVANT TO CIVIL, CRIMINAL OR REGULATORY INVESTIGATIONS OR PROSECUTIONS AND FOR STATISTICAL PURPOSES.

1. NAME, GRADE, AND TITLE OF CLAIMANT (b) (6), (b) (7)(C)	2. CURRENT POST OF DUTY AND TELEPHONE NUMBER (area code) PPD
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3. ADDRESS OF CLAIMANT (street, city, state, zip code) (b) (6), (b) (7)(C)	4. AMOUNT OF CLAIM \$943.60	5. DATE OF LOSS/DAMAGE 5/12/21
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6. LOCATION WHERE LOSS/DAMAGE OCCURRED The White House
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7. DESCRIPTION OF PROPERTY
Robert Talbott Suit (Blue)

a. ITEMIZED LIST	b. ORIGINAL COST/DATE OF PURCHASE	c. REPLACEMENT COST (need 2 estimates/receipts if over \$100)	d. REPAIR COST (need 2 estimates if over \$100)
Robert Talbott Suit (Blue)	7/26/18	\$943.60	N/A

TWO ESTIMATES/RECEIPTS ARE REQUIRED FOR CLAIMS OVER \$100. A PURCHASE RECEIPT FOR THE CURRENT COST CAN BE SUBSTITUTED FOR ONE ESTIMATE. ONLY ONE ESTIMATE/RECEIPT IS REQUIRED FOR CLAIMS UNDER \$100.00. ALL ESTIMATES/RECEIPTS/STATEMENTS MUST BE RECEIVED FROM A DISINTERESTED PARTY.

8. WAS PROPERTY PRIVATELY INSURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	11. NAME AND ADDRESS OF PRIVATE INSURER
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9. WAS INSURER NOTIFIED OF LOSS? <input type="checkbox"/> YES <input type="checkbox"/> NO
--

10. WAS REIMBURSEMENT RECEIVED? <input type="checkbox"/> YES <input type="checkbox"/> NO (If YES, how much \$ _____)
--

12. WERE POLICE NOTIFIED? <input type="checkbox"/> YES <input type="checkbox"/> NO	13. WAS THERE A POLICE INVESTIGATION? <input type="checkbox"/> YES <input type="checkbox"/> NO (If YES, attach a copy of the report)
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14. WAS CLAIM MADE AGAINST SHIPPER? <input type="checkbox"/> YES <input type="checkbox"/> NO	15. WAS REIMBURSEMENT RECEIVED FROM SHIPPER? <input type="checkbox"/> YES <input type="checkbox"/> NO (if YES, how much \$ _____)
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16. BRIEF DESCRIPTION OF CIRCUMSTANCES CAUSING LOSS OR DAMAGE

The damage to the personal coat occurred while on official duty. Through no fault or negligence of my own, the coat was torn by a dog bite. I could not avoid this unusual circumstance due to the nature and requirements of my position.

CRIMINAL PENALTY FOR PRESENTING A FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS: FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (SEE 18 U.S.C. 286,287,1001)

CIVIL PENALTY FOR PRESENTING A FRAUDULENT CLAIM: THE CLAIMANT SHALL FORFEIT AND PAY TO THE UNITED STATES THE SUM OF \$2,000 PLUS DOUBLE THE AMOUNT OF DAMAGES SUSTAINED BY THE UNITED STATES. (SEE 31 U.S.C. 3729-3733)

I MAKE THIS CLAIM WITH FULL KNOWLEDGE OF THE PENALTIES FOR WILLFULLY MAKING A FALSE CLAIM, AND CERTIFY THAT I AM ENTITLED TO ANY PAYMENT.

I HEREBY ASSIGN TO THE UNITED STATES TO THE EXTENT ON THIS CLAIM ACCEPTED BY ME, ALL MY RIGHTS, TITLE, AND INTEREST IN AND TO ANY CLAIM I MAY HAVE AGAINST ANY CARRIER, INSURER OR OTHER PARTY, ARISING OUT OF THE ABOVE-DESCRIBED INCIDENT.

17. IF CLAIMANT IS NOT OWNER, STATE RELATIONSHIP	18. SIGNATURE OF CLAIMANT (b) (6), (b) (7)(C)	19. DATE 05/20/2021
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IT WAS REASONABLE FOR THE CLAIMANT TO HAVE IN HIS/HER POSSESSION THE PROPERTY BEING CLAIMED AT THE TIME THAT LOSS OR DAMAGE OCCURRED, AND THE LOSS OR DAMAGE WAS NOT CAUSED IN WHOLE, OR IN PART, BY ANY NEGLIGENT OR WRONGFUL ACT ON THE PART OF THE CLAIMANT.

20. SIGNATURE OF APPROVING OFFICIAL	21. TITLE	22. DATE
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INSTRUCTIONS

1. Enter your name, grade and title.
2. Enter your current post of duty and telephone number.
3. Enter your address.
4. Enter the amount of the claim.
5. Enter the date the loss or damage occurred.
6. Enter the location where the loss or damage occurred.
7. Description of property (this block has 4 parts).
 - A. Enter the description of the item that was lost or damaged.
 - B. Enter the original cost of the item.
 - C. Enter the amount it will cost to replace or repair the item. You must attach two receipts or estimates from a disinterested party if the cost of the item exceeds \$100.00. A purchase receipt for the current cost can be substituted for one estimate. Only one receipt or estimate is required for claims under \$100.00.
 - D. Enter the amount it will cost to repair the item. You must attach two estimates/receipts/statements from a disinterested party if the cost of the item exceeds \$100.00. Only one estimate/receipt/statement is required for claims under \$100.00.
8. Enter YES or NO if your property was privately insured.
9. Enter YES or NO if your insurance company was notified of the loss.
10. Enter YES or NO if reimbursement was received from your insurance company. Indicate the dollar amount in the space provided. All payments received from your insurance company will be deducted from your claim. Attach copies of all correspondence from your insurance company.
11. Enter the name and address of your insurance company.
12. Enter YES or NO if the police were notified.
13. Enter YES or NO if there was a police investigation. You must attach a copy of the police report if there was an investigation.
14. Enter YES or NO if there was a claim made against a shipper.
15. Enter YES or NO if reimbursement was received from the shipper. Indicate the dollar amount in the space provided. Attach copies of correspondence from the shipper.
16. Give a brief description of the circumstances causing the loss or damage.
17. State the relationship to the claimant if the claimant is not the owner.
18. Enter your signature.
19. Enter the date.
20. The employee's approving official must sign.
21. Approving Official's title.
22. Enter the date (Approving Official).

CHECKLIST

DO YOU HAVE THE FOLLOWING ATTACHED TO THIS FORM?

1. One of the following:
 - A. Two receipts/estimates for claims exceeding \$100.00
 - B. One receipt/estimate for claims under \$100.00
2. A memorandum if the item has been destroyed
3. If item is unrepairable and over \$100.00, two statements are needed from a disinterested party saying that item cannot be repaired. If under \$100.00, only one statement is needed.
4. If the answer to Questions 10, 13, or 15 was YES, attach the following:
 - A. Copies of correspondence from your insurance company
 - B. Copy of the police report
 - C. Copies of correspondence from the shipper
5. Remember to sign and date your claim

DOMINION VALLEY CLEANERS

5521 Merchants View Square

Haymarket, VA 20169

(703) 754-0875

(b) (6), (b) (7)(C)

THU 05/13/2021 12:28 PM Clerk:

(b) (6), (b) (7)(C)

TUE

PATCH ONLY

1 Reg. Jacket	7.90
Patch	70.00

TOTAL	1	PIECES	
		SUBTOTAL	\$ 77.90
		ESC	\$ 0.10

DUE AMOUNT \$ 78.00

Store hours

M-F: 7 AM - 7 PM

SAT: 8 AM - 6 PM

SUN: 11 AM - 5 PM

Ready 5 PM

TUE 06/15/2021

..... THANK YOU FOR YOUR BUSINESS
Not responsible for items left over 30days
CUSTOMER COPY

From: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@gmail.com>
Obtained via FOIA by Judicial Watch, Inc.

Date: May 27, 2021 at 1:18:15 PM EDT

To: (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)@gmail.com>

Subject: Re:

Hi (b) (6), (b) (7)(C)

Everything is well, thank you!

Yes, I would definitely need to patch your suit in order to properly cover up/repair the holes.

Hope all else is well!

Thank you,

(b) (6), (b) (7)(C)

--

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

858 (b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)@gmail.com

(b) (6), (b) (7)(C)

San Diego, CA (b) (6), (b) (7)(C)

On Jun 5, 2021, at 3:03 AM

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)@gmail.com> wrote:

Hi (b) (6), (b) (7)(C)

Patching the suit will not be adequate and will be very difficult to match the original color. Even then, the patch will not look seamless. The only real solution is to replace the suit.

Thank you and please let me know if you have any questions.

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

858 (b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)@gmail.com

(b) (6), (b) (7)(C)

San Diego, CA

(b) (6), (b) (7)(C)

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Indigo Classic Fit Carmel Suit

Designer: **Robert Talbott**

SKU: S645CRSF-01

- Color indigo Carmel suit
- Cielo and orchid windowpane check design
- Soft shoulder
- Notch lapel
- Two buttons front closure
- One chest pocket
- Two lower flap pockets
- Side vents
- 3/8 lined
- The Laguna trouser is plain front with slanted pockets and 3/8 inch belt loops
- 100% Super 130's Wool
- Classic fit
- Dry clean only
- Made in Canada

Price: \$1,398.00

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Stature

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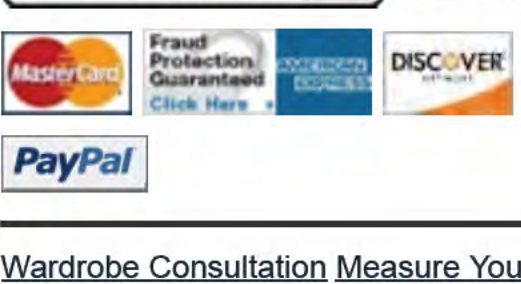
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Southwick Suit - Super 120's Tropical Worsted Wool - Tic Weave Navy



Southwick Suit - Super 120's Tropical Worsted Wool - Tic Weave Navy

Be the first to review this product

\$995.00

Option *

(b) (6), (b) (7)(C)

Qty

1



Add to Cart



Wish List



Email



0

Details



The 120s wool tic weave fabric drapes beautifully. The pic stitching finishes it off. Perfectly suitable for 3+ season wear.

- Traditional non-darted 3-button, lapel rolled over top button.
- Soft natural shoulders, fully canvas lined, genuine horn buttons.
- Full bemberg lining, center hook vent, flap pockets.
- Made in USA.

Reviews



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Heritage



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Robert Talbott

7/26/18

To: (b) (6), (b) (7)(C) >

Robert Talbott: New Order

(b) (6), (b) (7)(C)

Robert Talbott - Monterey California

Hello, (b) (6), (b) (7)(C)

Thank you for your order from Robert Talbott. Once your package ships we will send an email with a link to track your order. If you have any questions about your order please contact us at rtorders@roberttalbott.com or call us at [1-833-762-3266](tel:1-833-762-3266) Monday - Friday, 8am - 5pm PST.

Your order confirmation is below. Thank you again for your business.

Your Order # (b) (6), (b) (7)(C) (placed on July 26, 2018 3:56:58 PM PDT)

Billing Information:

(b) (6), (b) (7)(C)

Payment Method:

Credit Card

Credit Card Type: Visa

Credit Card Number: xxxx (b) (6), (b) (7)(C)

Shipping Information:

(b) (6), (b) (7)(C)

Shipping Method:

Federal Express - Home Delivery

Item	Sku	Qty	Subtotal
-STILLWATER SUIT Size (b) (6), (b) (7)(C)	p615crsf-01 (b) (6), (b) (7)(C) USS	1	\$943.60





(b) (6), (b) (7)(C)

