CITY COUNCIL

TRAVEL AUTHO	RIZATION	REQUEST	
I hereby request that I be authorized following named places and return to So and to be reimbursed for the travel expectly funds in accordance with prescribe reimbursement.	an Antoni enses inc ed policie	o, on or about the dates inc urred in performance there	licated of from to such
<u>Destination or Itinerary</u> : (If more than on order.")	e point, s	tate, "in order listed" or "any	1: 08 PH 1: 08
Attending the SA to DC XXVII Convention	June 12-	15, 2005	
Estimated date of departure from San Ar Estimated date of return to San Antonio:	ntonio:	06/12/2005 06/15/2005	
GRATUITOUS OR N	ON-CITY	FUNDED TRIPS	
This trip will be paid for (entirely) or (part	tially) by c	a third party or from non-City	funds.
DONOR:			
VALUE:			
EXCEPTIONS:		Official Business only Dual purpose-Goodwill Dual purpose-Education Dual purpose-City Busine	
<u>Financial Data:</u>			
Estimated cost of travel:		\$2418.00	•
Travel Advance requested: Fund, Account & Index Code to be cho	ırged:	0110010001 5207010	11
		U:#\>	
		Signature of Traveler	
I hereby certify that the above request by the City Council on the day	for travel of	authorization has been app	roved
	<u></u>	MAYOR	
ATTEST:			

Agenda Hem 21

CITY COUNCIL

TRAVEL AUTHORIZATION REQUEST

I hereby request that I be authorized to proceed on official city business to the following named places and return to San Antonio, on or about the dates indicated and to be reimbursed for the travel expenses incurred in performance thereof from city funds in accordance with prescribed policies and procedures applied to such reimbursement.

NAME OF TRAVEL	ER:	Councilwoman Mo	Neil	্র্ ———————————————————————————————————	
Purpose and Just	ification of	Travel:		హీ	
The Greater San .	Antonio Ch	amber of Commer	rce SA-DC Trip XXVII	2	
<u>Destination or Itir</u> order.") Washington, D. C		nore than one poin	t, state, "in order listed" o	or "añy	OWOLN
Estimated date of Estimated date of		e from San Antonic San Antonio:	June 12, 2005 June 15, 2005		
	GRATI	JITOUS OR NON-CI	TY FUNDED TRIPS		
This trip will be po non-City funds.	aid for (ent	irely) or (partially) b	oy a third party or from		
DONOR:			the latter than the latter tha		
VALUE:					
EXCEPTIONS:			Official Business only Dual purpose-Goodwi Dual purpose-Educatio Dual purpose-City Busi	on	
Financial Data:					
Estimated cost of Travel Advance Fund, Account 8	requested:	de to be charged:	\$2.418.00 /0/10201001-02-1 Kula M (Signature of Traveler)		10
I hereby certify to by the City Cour		ove request for tro day of	avel authorization has bed	en appro	oved
ATTEST:	CITY CLER		MAYOR		