## 39

## CITY COUNCIL

## TRAVEL AUTHORIZATION REQUEST

hereby request that I be authorized following named places and return to Stand to be reimbursed for the travel expectly funds in accordance with prescribe	ian Antonic Senses incu	o, on or about the dates indic urred in performance thereof	ated from such
eimbursement.			05 A
NAME OF TRAVELER: PURPOSE and JUSTIFICATION:	Sheila D. McNeil		AUG :
TML & AMACC - NEWLY ELECTED CITY OFFICIAL ORIENTATION			٦.
<b>Destination or itinerary</b> : (If more than o	ne point st	tate. "in order listed" or "anv	VA 11: 01
order.")	10 poii.i, 31	idio, ili ordor ilbiodi or diri,	
Sugarland, Texas			
Estimated date of departure from \$an A Estimated date of return to San Antonio:		08/11/2005 08/14/2005	
GRATUITOUS OR N	ION-CITY F	FUNDED IKITS	
This trip will be paid for <u>(entirely)</u> or (pa	rtially) by a	a third party or from non-City fo	unds.
DONOR:			<del></del>
VALUE:			
EXCEPTIONS:	$\bowtie$	Official Business only	
	Д	Dual purpose-Goodwill	
	H	Dual purpose-Education  Dual purpose-City Business	i
		,	
<u>Financial Data:</u>			
Estimated cost of travel:	$\mathcal{O}$	7 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Travel Advance requested: Fund, Account & Index Code to be cho	araed:	\$265.19 11 \$102010001/5207010	<del></del>
rona, necesim a mack esac le pe em		Kues McMail	
		Signature of Traveler	
	1		
I hereby certify that the above request by the City Council on the day			/ea
			<u></u>
ATTEST:		MAYOR	
CITY CLERK	<del></del>		

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