

**CITY COUNCIL DISCRETIONARY FUNDS
REQUEST FOR EXPENDITURE**

Account Number: _____

Submission Date: _____

Current Council Policy Manual Chapter 5.10 Acknowledgement Form on File?

Type of Expenditure:

Select the category of authorized expenditure from Council Policy Chapter 5.10 and attach the corresponding documentation for the selected expenditure.

CPM 5.10.010(4)(A)
Community Application

CPM 5.10.010(4)(B)
Travel Reimbursement

CPM 5.10.010(4)(C)
Membership Reimbursement

CPM 5.10.010(4)(D)
Sponsorship Event

Brief Description: _____

Date for Expenditure: _____

Amount for Expenditure: _____

Expenditure Payable to: _____

I certify that the information and materials submitted are true to the best of my knowledge and belief. I understand that I subject myself to potential enforcement action under Council Policy Chapter 5.10 if the submitted information is found to be falsified or out of compliance with the policy.

Councilmember Name: _____

Councilmember Signature: _____

Approval Signatures:

City Attorney's Office: _____

City Manager's Office: _____

CPM 5.10.010(4)(A), COMMUNITY APPLICATION

Community Application Attached.

W-9 Attached.

Applicant signed Acknowledgement Form Attached.

Expenditure is not political in nature _____ (Initial)

Expenditure is not religious in nature _____ (Initial)

Expenditure has no Personal Benefit _____ (Initial)

CPM 5.10.010(4)(B), TRAVEL REIMBURSEMENT

Name of Organization, Conference, or Event: _____

Purpose of Travel:

Communication or meeting with constituents.

If selected, identify constituents: _____

Attend local events that have a Community Benefit.

If selected, describe Community Benefit and attach supporting documentation:

Attend City-sponsored events.

If selected, identify City-sponsored: _____

Date of the Event: _____ Location of the Event: _____

Expenditure is not political in nature _____ (Initial)

Expenditure is not religious in nature _____ (Initial)

Expenditure has no Personal Benefit _____ (Initial)

CPM 5.10.010(4)(C), MEMBERSHIP REIMBURSEMENT

Name of Organization: _____

Description of Community Benefit: _____

Documentation Supporting Community Benefit Attached.

Expenditure is not political in nature _____ (Initial)

Expenditure is not religious in nature _____ (Initial)

Expenditure has no Personal Benefit _____ (Initial)

CPM 5.10.010(4)(D), SPONSORSHIP EVENT

Description of Event: _____

Description of Community Benefit: _____

Documentation Supporting Community Benefit Attached.

List of Additional Participants, if any: _____

Expenditure is not political in nature _____ (Initial)

Expenditure is not religious in nature _____ (Initial)

Expenditure has no Personal Benefit _____ (Initial)