office of the city council/mayor

CITY COUNCIL PROJECT FUNDS APPLICATION



	INTERNAI	L OR EX	TERNAL (CCPF APPI	LICATION	10010	Ins	structions
						Are	you submitti	ng an:
Today's date: 10/03/2013						✓ I	nternal Applie	cation
						F	External Appli	ication
	1	APPLICA	ANT INFO	RMATION				
Applicant Last Name: Cardona	First: Angela	M	Iiddle:			Amour	nt Requesting	* 15,220
Council District Request (May sen	nd to multiple dis	stricts):				*Please		ard over \$10,000
□ District 1 □ District 2 ☑ District 3	District 4	District 5	District 6	District 7	District 8	District 9	District 10	Mayor
City Council finds that investment of Coguidelines established under this ordina Promoting the health, safety and well Promoting family, social and econom Promoting community education and Promoting community recreation; Preventing homelessness; and Revitalizing neighborhoods. Please identify your project request	ance serve the munifare of the communi- nic stability; I training, which, in	nicipal publ	lic purposes o	of:				
☑ District / Community Events								
☐ Education								
☐ Youth / Senior Activities								
City Council finds that the following qualify	as eligible Applican	its for CCPF	7:					
A City Council District Office for di	istrict events;							
 A non-profit entity that: a) is exempted determined by the Internal Revenue corporation; b) is able to show proof that the proposed services, programs 	f of exemption from	franchise ta	(3) of the Unit	ed States Intern	nal Revenue Co	ode or is an affi	liate of a non pro	ofit toy exempt
3) A neighborhood association or other	legally formed entity	ty whose pur	rpose as stated	in its organizati	ional document	s is defined as so	erving the comm	unity;
Another governmental entity, such a project it is not required to carry under the control of the control o	as municipality, cor er its own charter or	unty, schoo mandates b	ol district, or or y state or feder	ther political sural law, unless it	abdivision of the	ne State of Texas	s, who is request ne City.	ing CCPF for a

	PROJECT INFORMATION	
Project Name: District 3 Fall Fun Run	Project Liaison: Angela	Date of Event: 11/02/2013
Description of Event/Purpose (Describe in 20	0-300 words):	
partnership with San Antonio Sports for a fa	ill fitness family challenge to promote health	and wellness in District 3
Invoices of how funds will be allocated (I missing invoices will not be covered by funds of from city departments and delegate agencies):	certify that I have attached all invoices relat and purchases need to exclude alcohol, gift/g	ted to this request. I understand that any tas cards, livestock, equipment or supplies
Important Note: Please, if you are no	t a registered vendor with the City of San Ar	ntonio, visit this website to register:
http:/	/www.sanantonio.gov/purchasing/SAePS.a	spx
Project Liaison Phone Number: 210.207.09	69 Email: angela.cardona@sanantonio	o.gov
Department/District/Organization: District 3	Address: 3319 Sidne	y Brooks Bldg 510,78235
All fields are required to be filled on	SIGNATURE t prior to submitting. Applications will be consider	
✓ I certify that the statements contained		
best of my knowledge and belief.	in this City Council Project Fund Applica	uon are true, correct and complete to the
Signature of Applicant:	la Cardona	Date: 10/04/2013
	APPROVAL OF FUNDS	
	Not a series	
Signature of Councilmember (If Applicable):	was la	Date: 10 / 4 / 13
Signature of Department Director/Department	(If Applicable):	Date: 10 / 4 / 13 Date: 10 / 14 / 13
Fiscal Approval:	Approved Fr	
	•••	47),000



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Bill to		
City Council District 3	Date 12/2/2013	
Councilwoman Viagran		

Description		Total
2013 District 4 Fall 5k Run, November 2, 2013 -Project Management Fee		\$3,270.00
Races Expenses Incurred		\$7,181.00
	Total	\$10.451.00

Method of Payment:	Check	MasterCard	Visa	American Express	Discover
Card Number			_ Expira	tion Date	
Signature					

San Antonio Sports is a charitable 501(c)(3) organization. Gifts are tax deductible to the extent allowed by law. San Antonio Sports will send a receipt to you for your tax records.

PLEASE REFERENCE INVOICE NUMBER ON CHECK

Please make checks payable to:

San Antonio Sports P.O. Box 830386

San Antonio, TX 78283-0386

Kari Chapman · <u>kchapman@sanantoniosports.org</u>

Phone: 210-820-2107 · Fax: 210-820-2199

Payable upon receipt. Thank you!

IAAP
1201 · Accounts Receivable

D3 5k Race Director

11/15/13

20581

Operating (SASF-852 Inv

Invoice #2173

2,774.00

622191 (1/12)

Rev 3/11

INVOICE NUMBER:

-9175

Brief Description: Race director for D3 5K

start/finish line set-up, banners, race clock, 500 bib #'s, metal barricades

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- · Attach originals of each invoice to be paid
- Amounts listed must equal the total of the check requested
- Specify the account number, account name, and class for each amount

Anna 6.

11.11.13

Prepared By

Date

Budget Manager Approval

Date

All Requests must be approved by budget manager as well as the Director of Finance

Sylvia Montemayor Approval

Date

D3 5k Medical

11/15/13

20582

Onaration	GASF-852	* NATI
Operanno	1 (SASE-85)	Invoice #2679

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622191 (1/12)

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Rev 3/11

77.00

INVOICE NUMBER:

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Brief Description:

Medical for D35K

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- Specify the account number, account name, and class for each amount

Anna G.

Data

Budget Manager Approval

Date

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Sylvia Montemayor Approval

Date

D3 5k Banners & Web Registration

ESD & Associates 1201 · Accounts Receivable

Operating (SASF-852 Invoice #40827 1,770.00

622191 (1/12)

Rev 3/11

INVOICE NUMBER:

Brief Description:

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Budget Manager Approval

Date

Sylvia Montemayor Approval

All Requests must be approved by budget manager as well as the Director of Finance

Anna Gonzalez

Elisa Medellin [EMedellin@CortezServices.com] Friday, November 01, 2013 12:39 PM Anna Gonzalez From: Sent:

Receipt

Subject:

10:

Follow Up Flag:

Follow Up Flagged

Flag Status:

Thank you for choosing Cortez Liquid Waste Services!

CORTEZ LIQUID WASTE SERVICE SAN ANTONIO, TX 78221, US 19540 S. US HWY 281 (210) 626-2531

Store #1224596

11/01/13 12:36:38 PM

MO/TO Sale

Cortez Liquid Waste Service

Billing Address

Anna Gonzalez

P.O. Box 830386

San Antonio, TX 78283

Credit Card Information

CREDIT CARD NUMBER: Amex1053 SWIPE CARD: APPROVED - 202428

STATUS:

10.174.5.135-14214BCF761-63F19A80-611CB9CD ORDER NUMBER:

PO NUMBER:

Qty

Extended Cost

Unit Cost

Extended Cost	565.00	\$565.00	: UER.
Unit Cost	565.00	SUBTOTAL:	TOTAL: I AGREE TO PAY ABOVE AMOUNT ACCORDING TO CARD ISSUER.
Qty	-		

Elisa Medelliu Administrative Hosistant Cortez Liquid Waste Services 19540 S US Huy 281 Sau Antonio, Tr. 78221 210)626-2531



CITY OF SAN ANTONIO
PARKS & RECREATION DEPARTMENT
SOUND AND STAGES PROGRAM
5800 OLD HWY. 90 WEST
SAN ANTONIO, TX 78227
PHONE 207-3000 FAX 207-3101

DATE:

INVOICE

Council District 3 @ Brooke City Bas	se		
-			

DATE	DESCRIPTION OF SERVICES	AMOUNT
11/2/11	Towing Only	\$220.00
	TOTAL AMOUNT DUE	\$220.00

Make a check payable to the *City of San Antonio* and send it to the attention of: **MOBILE STAGES-Special Programs** at the address stated above.

D3 5k Security

Operating (SASF-852 Invoice #13-146

620.00

622191 (1/12)

2007851

Rev 3/11

INVOICE NUMBER:	12/01	
*	1-1-10	

Brief Description: Security officers for D35K on 11.2.13 9t

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Anna G.	11.11.13
Prepared By	Date

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Budget Manager Approval

Date

Sylvia Montemayor Approval

Date



PRESENTED BY COUNCILWOMAN REBECCA J. VIAGRAN

SATURDAY, NOVEMBER 2 BROOKS CITY BASE

2510 KENNEDY CIRCLE SAN ANTONIO, TEXAS 78235

Event begins at 8 a.m. Packet pick-up & late registration at 7 a.m.

The first 500 people to cross the finish line will get a medal.

All ages and fitness levels are welcome to enjoy a
Family Fun Day at Brooks City Base.

Register today at FitFamilyChallenge.com or call the District 3 Field Office at 210.207.0969 for more information.







