Attachment 2

TA #: _____

PIMA COUNTY TRAVEL AUTHORIZATION #1

1. NAME: Andres Cano
2. DEPARTMENT: BOARD OF SUPERVISORS
3. PLANNED DEPARTURE DATE: SEPT. @ 24, 2013
4. PLANNED RETURN DATE: SEPT. @ 27, 2013
5. DESTINATION: WASHINGTON, D.C.
6. PURPOSE OF TRAVEL: SOUTHERN BORDER COMMUNITIES COALITION

7. ESTIMATED EXPENDITURES:

ITEM	AMOUNT	VOUCHER
a. Transportation		
b. Lodging	803.79	
c. Per Diem	156.00	
d. Registration	—	
e. Other		
f. Total		

I, employee, am fully aware that advances made for this trip are to be repaid/closed for this trip within 15 days of the close of the trip, or a lien against my wages and salary may be institute.

8. [signature] 9/18/13
Employee/Traveler Signature Date

9. [signature] 9/18/13
Authorized Signer (Admin. Procedure 22-10) Date

THE ORIGINAL OF THE FORM MUST BE FORWARDED TO THE FINANCE DEPARTMENT-ACCOUNTS PAYABLE SECTION

- SEE INSTRUCTIONS ON REVERSE SIDE -

INSTRUCTIONS FOR COMPLETION

1. Enter employee's name. Andres Cano
2. Enter employee's Department. Board of Supervisors District 5
3. Enter planned departure date. 09.24.2013
4. Enter planned return date. 09.27.2013
5. Enter place of destination. Washington, D.C.
6. Describe purpose of travel. Southern Border Communities Coalition

7.a.-e. Enter estimated expenditure amounts by category.

7.f. Add 7.a. - 7.e. and enter result in 7.f.

8. Signature of employee/traveler and date.

9. Signature of Department Authorized Signer (Administrative Procedure 22-10). If the TRAVELER IS AN APPOINTED DEPARTMENT HEAD, OBTAIN SIGNATURE OF COUNTY ADMINISTRATOR, OR BOARD OF SUPERVISORS AS APPROPRIATE.