

MID-MINNESOTA DEVELOPMENT COMMISSION

Commissioner Expense Sheet

Reporting Period:

Name: _____

Date	Location	Meeting	Mileage		Meals			Misc. Travel	Per Diem	Misc. Exp.	Totals
			TOTAL # Miles	\$.70/Mi	B	L	D				
Totals:											
<i>Office Use Only</i>				per diem	311025-58020	\$					
				mileage	311025-58010	\$					

Commissioner's Signature _____