MINNESOTA JUDICIAL BRANCH

FIRST JUDICIAL DISTRICT ADMINISTRATION
1560 WEST HIGHWAY 55
HASTINGS, MN 55033

STATEMENT OF PER DIEM REPORTER EXPENSES

Name: _____ Reporting Period: _____

Address: _____ District Court Served: _____

_____ Vendor #: _____

_____ Or Fed. Tax I.D: _____

Phone: _____ And State I.D: _____

Date	Location	Miles[1]	Mileage Rate[2]	Mileage Amt.	Per Diem Rate	Other (List)[3]	Total
TOTALS							

[1] Maximum of 100 miles per day allowed
[2] Current IRS rate (http://www.irs.gov/newsroom/article/0,,id=200505,00.html)
[3] Meals, parking, or lodging are not an allowable expenses

I hereby certify, under the penalties of perjury, that the above claim is true and correct and that the services have been fully performed. All stenographic notes are the property of the District Court and have been deposited with the court.

Reporter Signature: _____

Approved and ordered paid this _____ day of _____

By:

_____
District Court Judge

After approved by the judge, submit to: District Finance (address listed above)