UNIVERSITY OF MINNESOTA
Bus. Ad. Form 379—Rev 4/97
S-91870

AUTOMOBILE MILEAGE

Used by ..... **DEPARTMENT** .....

Date	From	To	Miles	Rate	Amount
				TOTAL	

I hereby certify that the forgoing is a true statement of automobile mileage used by me in traveling on official business for the University of Minnesota.

Signed ..... Date .....

Recycle This Paper