

**STATE OF MINNESOTA  
REQUEST FOR APPROVAL OF SPECIAL EXPENSES**

Minnesota Management & Budget  
400 Centennial Office Building  
658 Cedar Street  
St. Paul, MN 55155

| Name of Requestor:<br>Kevin McDonald  |                                | Title:<br>Supervisor, Sustainable Development Unit   |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
|---|--------------------------------|--|-------------------|------------------------|----------|-----------|-------|----------------------|---|--------|----------|---|---|--------|----------|--|---|-------|-------|--|----|-------|--------|---|---|-------|--------|-------------------------|--|--|-------------------|
| Phone:<br>651-757-2561  | Date of request:<br>08/15/2013 | Requesting agency:<br>MPCA   |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Expenses for which approval is requested (see Instructions on page 2)   |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| <p>The following may be approved by the appointing authority or designee:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> 1. Full cost of meal that is part of conference, etc.<br/> <input checked="" type="checkbox"/> 2. Registration/tuition for conference, seminar, etc.<br/> <input type="checkbox"/> 3. Refreshments for agency meeting where majority are not state employees<br/> <input type="checkbox"/> 4. Refreshments, meals and other costs for agency sponsored conference<br/> <input type="checkbox"/> 5. Refreshments/meals for agency meeting where majority are state employees </div> <div style="width: 48%;"> <input type="checkbox"/> 6. Refreshments/meals for meeting of board, council, etc.<br/> <input type="checkbox"/> 7. Lodging for employee not in travel status<br/> <input type="checkbox"/> 8. Expenses for employee's attendant<br/> <input type="checkbox"/> 9. Expenses for State Fair work assignment<br/> <input type="checkbox"/> 10. Employee award/recognition event </div> </div> <p>The following require approval of the appointing authority and the Commissioner of Minnesota Management &amp; Budget:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> 1. International travel<br/> <input type="checkbox"/> 2. Employee award/recognition event beyond those in Provision A 10 </div> <div style="width: 48%;"> <input type="checkbox"/> 3. Other (describe in space provided on page 2) </div> </div> |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Full title of the event sponsor (do not use acronyms or initials):<br>Pew Charitable Trusts   |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Full title of the conference, workshop, seminar, meeting or other event:<br>2 <sup>nd</sup> Annual National Health Impact Assessment Meeting  |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Event location (title and address of host facility):<br>The Washington Hilton<br>1919 Connecticut Avenue NW<br>Washington, District of Columbia 20009   |                                | Date(s) and time(s) of event:<br>09/23-25/2013   |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Individuals for whom special expense approval is requested (check all that apply):  |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| <input type="checkbox"/> Requestor only<br><input checked="" type="checkbox"/> Additional state employees. List names and titles:<br><br>Paul Moss, Principal Planner   |                                | <input checked="" type="checkbox"/> Other participants. List names, titles and organizations:<br><br>City of Saint Paul representative |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Description of Expense</th> <th style="text-align: center;">Quantity</th> <th style="text-align: center;">Unit Cost</th> <th style="text-align: center;">Total</th> </tr> </thead> <tbody> <tr> <td>RT Airfare (MSP-DCA)</td> <td style="text-align: center;">3</td> <td style="text-align: right;">500.00</td> <td style="text-align: right;">1,500.00</td> </tr> <tr> <td>Accommodations (three nights each at three attendees = 9)</td> <td style="text-align: center;">9</td> <td style="text-align: right;">285.10</td> <td style="text-align: right;">2,565.95</td> </tr> <tr> <td>Conference Registration (to be paid directly by Pew)</td> <td style="text-align: center;">3</td> <td style="text-align: right;">00.00</td> <td style="text-align: right;">00.00</td> </tr> <tr> <td>Meals (Break - \$8, Lunch - \$10, Dinner - \$17 = \$35 daily max); 3 attendees x 4 days = 12</td> <td style="text-align: center;">12</td> <td style="text-align: right;">35.00</td> <td style="text-align: right;">420.00</td> </tr> <tr> <td>Ground Transportation (estimated at \$75/attendee for airport to/from and DC)</td> <td style="text-align: center;">3</td> <td style="text-align: right;">75.00</td> <td style="text-align: right;">225.00</td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>TOTAL REQUESTED:</b></td> <td style="text-align: right;"><b>\$4,710.95</b></td> </tr> </tbody> </table>   |                                |  |                   | Description of Expense | Quantity | Unit Cost | Total | RT Airfare (MSP-DCA) | 3 | 500.00 | 1,500.00 | Accommodations (three nights each at three attendees = 9) | 9 | 285.10 | 2,565.95 | Conference Registration (to be paid directly by Pew) | 3 | 00.00 | 00.00 | Meals (Break - \$8, Lunch - \$10, Dinner - \$17 = \$35 daily max); 3 attendees x 4 days = 12 | 12 | 35.00 | 420.00 | Ground Transportation (estimated at \$75/attendee for airport to/from and DC) | 3 | 75.00 | 225.00 | <b>TOTAL REQUESTED:</b> |  |  | <b>\$4,710.95</b> |
| Description of Expense  | Quantity                       | Unit Cost  | Total             |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| RT Airfare (MSP-DCA)  | 3                              | 500.00   | 1,500.00          |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Accommodations (three nights each at three attendees = 9)   | 9                              | 285.10   | 2,565.95          |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Conference Registration (to be paid directly by Pew)  | 3                              | 00.00  | 00.00             |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Meals (Break - \$8, Lunch - \$10, Dinner - \$17 = \$35 daily max); 3 attendees x 4 days = 12  | 12                             | 35.00  | 420.00            |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Ground Transportation (estimated at \$75/attendee for airport to/from and DC)   | 3                              | 75.00  | 225.00            |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| <b>TOTAL REQUESTED:</b>   |                                |  | <b>\$4,710.95</b> |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| <p>Explain why the State should pay these expenses:<br/> September 23, 2013 meeting in Washington DC required by newly received Pew grant. Conference attendance on September 24-25, 2013, also expected and high value for new HIA initiative. Pew required grantee (MPCA) to budget for two attendees to be paid for by its grant to MPCA.</p>  |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Requestor's Signature: _____ Date: _____ Org # to bill: _____   |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| <b>AGENCY APPROVAL</b>  |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Approved for an amount not to exceed: \$ <input type="checkbox"/> Not approved because: </div>  |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |
| Signature: _____ Date: _____  |                                |  |                   |                        |          |           |       |                      |   |        |          |   |   |        |          |  |   |       |       |  |    |       |        |   |   |       |        |                         |  |  |                   |

**COMMISSIONER OF MINNESOTA MANAGEMENT & BUDGET APPROVAL** (if required)

☐ Approved for an amount not to exceed: \$

☐ Not approved because:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Use this space to describe "Other" special expenses for which approval is requested:

### INSTRUCTIONS

Please include only special expense items on this form. It must contain sufficient detail to justify the expenditure of funds under the special expense provisions. For further information, refer to the Department of Minnesota Management & Budget Administrative Procedure 4.4 - Special Expenses.

Submit a single request for all employees of a division and/or Other Participants attending the same meeting, conference, seminar or other event. Attach additional sheets if you need more space to provide the information requested.

| FIELD  | INSTRUCTIONS  |
|--|---|
| Date of request  | Except as provided in Administrative Procedure 4.4, approval must be obtained in advance from the appointing authority or designee (and, where required, the Commissioner of Minnesota Management & Budget). If approval is requested after the fact because of an emergency situation, the request must include an explanation of why prior approval could not be obtained.  |
| Expenses for which approval is requested                   | <p>Item numbers refer to provisions of the Administrative Procedure - Provision A for expenses approved by the agency head; Provision B for expenses which also require the approval of Minnesota Management &amp; Budget. Refer to Administrative Procedure 4.4 for additional information and limitations on the use of each item.</p> <p>Employees who are not in travel status must request approval of meals and lodging as special expenses. Employees in travel status need not request special expense approval unless meals exceed maximums allowed by the appropriate contract/plan. Maximum reimbursement rates apply unless acceptable justification is provided for greater amounts.</p> <p>Registration/tuition fees are treated as special expenses but <u>prior</u> approval is required only if the cost per participant exceeds \$500.</p> <p>"Refreshments" consist of relatively inexpensive items such as beverages, cookies and rolls and are not to be the equivalent of a meal.</p> |
| Individuals for whom special expense approval is requested | List names, titles and organizations of Other Participants who will be individually reimbursed. If a restaurant or vendor will be paid directly for their expenses, list just the name of each separate group and the total number of participants from that organization.  |
| Description of Expense                                     | Itemize each different type of expense separately. For meals, list breakfasts, lunches, dinners and refreshments separately.  |
| Agency Approval  | <p>Special expenses must be authorized by the appointing authority or a designee to whom approval authority has been formally delegated. Agency procedures may require additional approvals.</p> <p>The appointing authority must sign all requests submitted to the Commissioner of Minnesota Management &amp; Budget for approval.</p>  |