Minnesota Department of Agriculture 625 Robert St. N., St. Paul, MN 55155-2538

Agricultural Development & Financial Assistance Division, Ph: 651-201-6646

AFFIDAVIT AgBMP Expenses - No Receipt Available

I do hereby certify that the following expenses were incurred for implementation of an Agricultural Best Management Practices loan project that was approved by the administering local government unit and for which no receipt is available.

Date of Expense	Contractor or Vendor Name	Expense (Descri		Amount Incurred
	de for the purpose of securing a d Ianagement Practices Loan Progra		Minnesota Departi	ment of Agriculture,
BORROWER				
DATE			STATE OF MINN	
ADDRESS		Signed and attest	ed before me on	(date)(name of person)
CITY		(SEAL)		· · · · · · · · · · · · · · · · · · ·
			(SIGNATURE OF NOTARIAL OFFICER) MY COMMISSION EXPIRES:	