MR WORKSHEET **Meet:**_____ **dates**_____ **Reported by:**_____

Day 1	Day 2	Day 3
Report time:_____	**Report time:**_____	**Report time:**_____
End time:_____	**End time:**_____	**End time:**_____
Number of Sessions:_____	**Number of Sessions:**_____	**Number of Sessions:**_____
Total Break Time allotted:_____	**Total Break Time allotted:**_____	**Total Break Time allotted:**_____
Total Paid Time for day 1:	**Total Paid Time for day 2:**	**Total Paid Time for day 3:**

Name	Mileage miles X IRS rate	Tolls	Parking	Airfare	Meals	CJ/MR	Rate X	Hours =	FEEs	Total
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Updated 1/1/2019