

# BOIS FORTE RESERVATION TRIBAL COUNCIL STATEMENT OF TIME WORKED

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

I certify that I worked on business for the \_\_\_\_\_

Program of the Bois Forte Reservation Tribal Council for a total of \_\_\_\_\_

Hours/days, from \_\_\_\_\_ to \_\_\_\_\_

At the rate of \_\_\_\_\_ per \_\_\_\_\_ The total amount due is \$ \_\_\_\_\_

## DESCRIPTION OF SERVICES RENDERED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Approved by:

\_\_\_\_\_  
Title Date

Check approved by:

\_\_\_\_\_  
Title Date