**Goldbelt Heritage Foundation**
One Sealaska Plaza Suite 201
Juneau, AK 99801
Linda.carroll@goldbelt.com

## INVOICE FOR CONTRACTORS, ELDERS & YOUTH

**CHECK PAYABLE TO:** **CHECK NEEDED:** _____**NEXT CHECK RUN:**_____

_____ **DATE:**_____

_____ **AMOUNT:**_____

_____ **SSN:**_____

| DESCRIPTION | | | | | |
|---|---|---|---|---|---|
| **DATE** | **LOCATION** | **ACTIVITY** | **Start Time** | **End Time** | **Total Hours** |
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| **Participant Signature:** | | | **TOTAL HOURS →** | | |

**GHF STAFF USE ONLY**

**Rate per Hour: $_____ X Total Hours:_____** **Amount**

| | |
|---|---|
| **Account Number:** | **$** |
| **Account Number:** | **$** |
| **Account Number:** | **$** |
| **Account Number:** | **$** |
| **TOTAL AMOUNT OF CHECK:** | **$** |

Lead GHF Staff Sign: _____Date:_____

Check Approved By: _____ Date:_____

Special Instructions: