



FORT BELKNAP HOUSING AUTHORITY

668 Agency Main Street
Harlem, Montana 59526
Phone: (406)353-2601
FAX: (406)353-4975

WAGE DEDUCTION

TO: Aaniiih Nakoda College
Finance Office

Re: Wage deduction

Date: _____

You are hereby requested and authorized to deduct from salaries due me the

Deduction amount of \$_____ per pay period for remittance to:

Fort Belknap Housing Department
668 Agency Main Street
Harlem, MT 59526

Thank you.

Employee

Date

Fort Belknap Housing Department

Date

cc: file-Occupancy Program

FINANCE OFFICER: Payments will not be waived unless authorized by F.B.H.A. Director.