

TEMAGAMI FIRST NATION



BEAR ISLAND
LAKE TEMAGAMI, ONTARIO P0H 1C0
TEL 1.888.737.9884 or 705.237.8943
FAX 705.237.8959
www.temagamifirstnation.ca



TFN Enrichment Funds Elders & Disabled Home Repairs Invoice

Date _____

Company/Contractor Name _____

Invoice # _____

Address _____

Terms: *Due upon Receipt*

Phone _____ Fax _____

Email _____

For payment submit to: Temagami First Nation Housing Department
Bear Island, ON P0H 1C0
ATTENTION: Roger Assiniwe, Infrastructure Manager

RE: Name and Lot # of Homeowner: _____

Date	Description of Work/Materials & Supplies	Hours	Rate	Amount
			Sub-Total	
			Taxes	
			Amount Due	

**Attach all receipts for material and supplies

Homeowner signature: _____ Date: _____

Please make Cheque Payable to _____

Office use only: Requisition # _____