



# HO-CHUNK NATION STIPEND PAYMENT VOUCHER

**ONLY ORIGINAL FORMS WILL BE PROCESSED**

**TO RECEIVE A CHECK THE FOLLOWING FRIDAY, THIS COMPLETED VOUCHER MUST BE SUBMITTED TO TREASURY BY FRIDAY 4:30 p.m!**

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

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

Middle Initial: \_\_\_\_\_

Last 4 digits of  
Social Security #: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Type of meeting: \_\_\_\_\_

Budget Account #: \_\_\_\_\_

if more than 1 account # is charged  
Budget Account #: \_\_\_\_\_

Stipend Amount: \_\_\_\_\_

## WHAT TO ATTACH

**Every time a stipend is collected:**

- 1.) Meeting Minutes
- 2.) Meeting Sign In Sheet

\*IF REQUESTING MILEAGE, A REGULAR DISBURSEMENT VOUCHER MUST BE COMPLETED AND SENT SEPARATELY TO THE DEPARTMENT OF TREASURY.

**If not a current Ho-Chunk Nation employee and it is the first time a stipend is being collected for serving on this board, committee, or commission:**

- 3.) Federal (W-4) and State Withholding Forms
- 4.) I-9
- 5.) Photocopy of Social Security Card and Photo ID

### STIPEND POLICY

Finance manual 5 HCC & 5. Stipend Policy, c. and d. (3)

"An employee of the Nation serving on a board, committee, or commission during normal work hours may choose to receive a stipend or their regular compensation. If receiving a stipend, the employee must take annual leave or leave without pay.

"Stipends shall only be paid for duly called meetings under the Nation's Open Meetings Act at which quorum has been achieved. If the board, committee, or commission fails to achieve quorum within one (1) hour of the scheduled start time, the payment of stipends shall be prohibited; however, mileage may be paid, as applicable.

For complete copy of the "Stipend Policy" please refer to the Ho-Chunk Nation Legislative approved Finance manual, pages 32 and 33. This can be found on the Ho-Chunk Nation's web page.

### Department Approval

Executive Director/Division Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

Approval Signature  
Name Printed \_\_\_\_\_

### FOR OFFICE USE ONLY:

Empl#: \_\_\_\_\_  
Department: 00 Job: STIP  
Location: 00 EEO: 9

**HAS LEAVE BEEN USED? YES / NO  
PRIMARY / ALTERNATE MEMBER?**

**\*\*Treasury Use Only\*\***