THE NAVAJO NATION

Department of Diné Education

JOHNSON-O'MALLEY PROGRAM

PERSONNEL LISTING

1. Subcontractor: _____

2. For Month or Pay Period Ending: _____

EMPLOYEE NO./NAME/TITLE	F.T.E.	BUDGET	THIS INVOICE	YEAR-TO-DATE	BALANCE
TOTAL:					
199 Fringe Benefits:	%				
FICA	%				
ERA	%				
Insurance	%				
Unemployment	%				
Workmen's Compensation	%				
	TOTAL:				