## CULTURAL RESOURCE CONSULTANT BILLING COVER FORM

North Dakota Department of Transportation, Design SFN 58397 (Rev. 09-2006)

## Consultant Fill Out Sections 1 and 2 and Attach to Bill

Section 1 Bill Number				
		Final Billing?	Final Billing?	
Contract Number	Contract Date	Contract Cost	Contract End-Da	te
Consultant Name				
Consultant Address				
Section 2				
Work Completed to Date (Ide	entify by Task and Brief Description)			
All Tasks Completed?				
If No, What remains?				
Amount of Current Billing	Total Amount	of Previous Billing	Total Billing to Date	
Section 3				
Cultural Resource Section Co	omments			

OK to Pay?	
Cultural Resources Section Signature	Date