

Birchdale Township Gopher Bounty Claims

Name of Claimant: _____

Street Address: _____

City, State, Zip: _____

Number of Pocket Gophers Caught: _____ (please collect feet)

State Location(s) of where gophers were caught within Birchdale Township:

I declare under the penalties of law that this claim is just and correct and that no part of it has been paid.

Signature of Claimant: _____

TO BE COMPLETED BY BIRCHDALE TOWNSHIP SUPERVISOR

Formula:

Total Number of Gopher Feet _____ / 4 = Total Gophers

Gophers X \$3.00 each = \$ _____ : Amount to be paid to Claimant

Birchdale Township Supervisor signature: _____