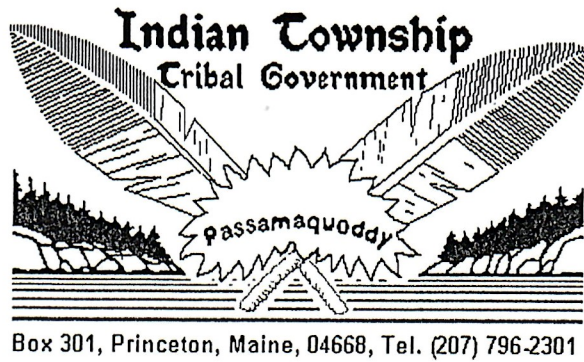


*Chief*  
William Nicholas, Sr

*Vice Chief*  
Joseph Socobasin

*Tribal Representative*  
Aaron Dana



*Council Members*

Matt Dana II  
Roger Socobasin  
Mihku Sabattus  
Alexander Nicholas I  
Wade Lola  
Richard Sabattus

FY24

Dear Independent Contractor,

Enclosed please find the State of Maine Workers' Compensation Board application. Please complete, sign and mail to:

State of Maine  
Workers' Compensation Board  
27 State House Station  
Augusta, ME 04333-0027

You also have the option to complete online at:

<https://www.maine.gov/wcb/departments/coverage/independentcontractor.html>

You will receive an email from the board that they have received your application, please forward this confirmation to: [emma@passamaquoddy.onmicrosoft.com](mailto:emma@passamaquoddy.onmicrosoft.com)

Also enclosed is a W-9 form. This needs to be completed and returned to Emma Soctomah in Finance.

Thank you so much for your promptness in completing this application, as this is a requirement for all independent contractors employed through Indian Township Tribal Government.

With Regards,

Chief William Nicholas