

DUNN COUNTY JAIL HUBER FOR SELF-EMPLOYMENT

Inmates Name: _____ Date Of Birth: _____

Offence: _____

BUSINESS INFORMATION

Business Name: _____

Business Location: _____
Address City State Zip Code

Business Phone: _____ Cell Phone: _____

Is the business address the same as your primary address: _____ Yes _____ No

Type of Business: _____

SCHEDULE

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time							
End Time							

* You must stay in the jail one day per week, please indicate which day

Please attach at least 2 of the following documents when submitting your Huber packet to the Jail. You will NOT be released for work until they are received and verified.

- *** Current invoices and/or job bids along with records/receipts
- *** Five previous employer contracts dated within the last six months, unless the contracts are long term
- *** Proof of a business checking account (ex. Active account statements, deposit slips)
- *** Previous years tax returns
- *** Federal and State tax ID numbers

JAIL USE ONLY:
 Information verified by: _____ Date: _____