



# FY22 Grand Traverse Band of Ottawa and Chippewa Indians Elders Program

## Elders Emergency Service Form

### October 1, 2021 – September 1, 2022

Name \_\_\_\_\_ Tribal ID #: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Michigan Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Age Category and amounts: Birthdate \_\_\_\_\_ Age \_\_\_\_\_

- 55-64 \$600
- 65-70 \$800
- 71-older \$1000

Vendor Name: \_\_\_\_\_ Amount: \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Amount: \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Amount: \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Amount: \_\_\_\_\_

- Attach a **copy of your Tribal Id**
- I understand that I can apply for assistance for: food, heat, cooling, snow removal, lawn maintenance, clothing, appliances, or other
- I understand that payment towards my bill will need a current invoice with my name on it to process and/or Vendor (Utility, Insurance, and Landlord) statement.
- For Reimbursement:** Your Name, item purchased, and amount paid must be on receipt. (all receipts must be from businesses within the vicinity of the six-county service area)
- All Purchase Orders must be used immediately**
- Funds to not exceed past Fiscal Year**
- Program closes on September 1 of current fiscal year so all purchase orders will be spent out before end of fiscal year.**
- Birthday must fall within current Fiscal Year ending Sept 30**

In signing below, I attest that I reside in GTB's 6-county service area and that I have read, been given an opportunity to discuss, and understand Attachment A—Title 17, sections 204 and 205 of the GTB Code.

Application's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Office Notes: Copy form and give or mail to Elder once signed as received.

Application received by \_\_\_\_\_ date \_\_\_\_\_

Uploaded to Elder file in Department 01 folder on (date) \_\_\_\_\_ by: \_\_\_\_\_

Purchase Order # 2022 - \_\_\_\_\_

Site Coordinator Initial \_\_\_\_\_