



**Shiwits Band of Paiutes
COVID SLFRF
Distribution Plan**

**Record of Financial Assistance
Payment Approval**

The Shiwits Band Council obtained funds to provide relief to Shiwits Band members for expenses related to COVID-19. The Band Council developed a COVID State & Local Fiscal Recovery Funds (SLFRF) Distribution Plan. Consistent with the eligibility requirements in the Distribution Plan, enrolled Band member, _____ submitted an application for relief.

Enrollment Number Verification: Age Verification:

The application was deemed complete by the designated Band official: Initials: _____

Accordingly, a payment to the above-named Shiwits Band adult member was approved on (DATE): _____, in the amount of (AMOUNT): _____.

Checks are available for pick up on October 9, 2021 at the Band Community building on the Shiwits Band Reservation. If you do not pick it up in person on that date by 3:00p, it will be mailed to you via the United States Postal Service after your completed application is received. Please notify Jill Haslam (jill@echohawk.com) if you have any questions.

RECEIPT: I affirm that I received the above-referenced payment and will use the funds for the purposes approved in the Shiwits COVID SLFRF Distribution Plan: _____.
(Band Member Signature)