

## Gila River Indian Community Urban Members Association

## **REQUEST FOR FINANCIAL ASSISTANCE**

Funding Dependent on Availability

### ELIGIBILITY CRITERIA

- a. Applicants must submit an application to UMA 2 weeks prior to due date.
- b. Applicants must be enrolled Community members.
- c. Applicants are required to reside outside the Gila River Indian Community.
- d. Priority is for those who are fifty-five (55) years of age or older, documented disabled members as defined by the Americans with Disabilities Act, which basically means having a physical or mental impairment that substantially limits one or more major life activities, and military personnel (Veterans and Active Duty).
- e. Applicants may be required to attend a series of classes to assist them in moving toward self-sufficiency.

#### ASSISTANCE PROVIDED

- a. Assistance \$500 Annual Limit (Excluding Elders)
- b. \$250 max per request
- c. Possible Tax Implications
- 1) Applicants must provide a current original billing statement from the vendor.
- Approved applicants will receive assistance on a utility bill of an amount between \$25 and \$250. Any amounts in excess of \$250 shall be the responsibility of the Applicant.
- 3) The bill must have the applicants name as the customer. The name must also be written as it is on the applicants GRIC Tribal enrollment identification.
- 4) UMA will be partnering with electrical service providers to assure any credits and/or refunds will be returned to the Association upon receiving a request to close an account.
- 5) Assistance under this program shall be for the applicant's principal residence
- 6) W-9 must be provided

Send Request to: <u>gilariveruma@gmail.com</u> or

Mail to: Gila River UMA

4520 N Central Ave, Suite 370

Phoenix, AZ 85012



#### **GRIC-UMA FRAUD, WASTE AND ABUSE STATEMENT**

Fraud, Waste and/or Abuse (FWA) are a drain on the time, effort and resources of the Association and all of its members. Fraud, waste or abuse can occur through an unintentional act or can occur by deliberate action. Regardless of the intent, fraud, waste and/or abuse CANNOT be tolerated. The definitions for Fraud, Waste and Abuse are listed below. If you believe you know of a potential FWA situation within the Association, you should contact a member of the Board of Directors or GRIC-OGC.

FOR FWA issues please contact Anthony Newkirk at anewkirk71@gmail.com

**Fraud** is any intentional deception (including attempts and conspiracies to effect such deception) for the purpose of: inducing UMA action, inaction or reliance on that deception; depriving UMA of something of value; securing from UMA a benefit, privilege, or consideration to which the party is not entitled. Such practices include, but are not limited to: offer of payment, acceptance of bribes or gratuities; making false statements, submission of false claims, use of false weights or measures, evasion or corruption of inspectors and other officials, deceit by suppression of the truth or misrepresentation of a material fact, adulteration or substitution of materials, falsification of records and books of account, arrangements for secret profits, kickbacks, or commissions, and conspiracy to use any of these devices.

Waste is the extravagant, careless, or needless expenditure of UMA funds or consumption of UMA property that results from deficient practices, system controls, or decisions.

Abuse is the intentional, wrongful, or improper use of UMA resources such as the misuse of position or authority that causes the loss or misuse of resources such as funds, bus passes, event tickets, memberships, etc.

I have read and understand the FWA statement and will use any UMA resources as intended.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_



Gila River Indian Community Urban Members Association

# **REQUEST FOR FINANCIAL ASSISTANCE**

Name		_ Enrollment	No		
Address		GRIC Dis	strict No		
City	State	Zip Co	ode		
Telephone:	_ Work	Cell		E-Mail	
Number in family: Name,			Enrollment# c	of Children:	
Reason for Request of Fir	ancial Assista	nce:			
Date Funds needed:	Ar	nount Request	ing:		
*****	*****	*****	******	******	
<u>Notice</u> – Applicant may r	equest up to \$	\$500/annually.			
<u>Applicant r</u>	nark one or two	o choices (Ex: F	ood card with ei	<u>ther a Gas or Bus Pass).</u>	
☐ Food Card A	mount 🗌 C	Gas Card	□ Bus Pass		
Signature		Date			
_				IS TRUE AND COMPLE remain CONFIDENTIA	
В			CANCE PROV EMBERS AS		

	*Except Food Cards & Bus Card	
	All applications will need two approving signatures by the	
		Date
2 <sup>nd</sup> /	Approving Signature/Title:	
		Date
1 <sup>st</sup> A	pproving Signature/Title:	
∟ #_	Bus Pass	
□ #_	Frys Food Card Amount	
		pt 2 <sup>nd</sup> Receipt 3 <sup>rd</sup> Receip
	CARD REQUESTS	
	3) Check Issued: #	Amount \$
	Check Issued: #	
	2)	Amount \$
	Check Issued: #	
	1)	Amount \$