

Lac Vieux Desert Band Of Lake Superior Chippewa Tribal Government

N4698 US 45 P.O. Box 249 • Watersmeet, Michigan 49969

Phone: 906-358-4577 • Fax: 906-358-4785

Executive Officers:

James Williams Jr., Tribal Chairman
Henry Smith, Tribal Vice-Chairman
Andrea Russell, Tribal Treasurer
Alice Brunk, Tribal Secretary



Council Members:

Tina Caron
Roberta Ivey
Jeffery McGeshick
Mitchell McGeshick
June Saad

SECOND FY2020 COVID-19 TRIBAL MEMBER RELIEF PROGRAM

RELIEF PROGRAM OVERVIEW:

The Tribe received a funding allocation under the Coronavirus Aid, Relief and Economic Security Act (“CARES Act”) to address unforeseen financial needs and risks created by the COVID-19 pandemic. One allowable use of CARES Act Title V funds is emergency financial assistance to individuals and families impacted by loss of income due to the COVID-19 public health emergency.

- On May 6, 2020, the Tribe authorized the COVID-19 Tribal Member Relief Program to ensure that Tribal Members received necessary assistance in the face of this national pandemic.
- The COVID-19 Tribal Member Relief Program was established as General Welfare Program and payments will not be considered taxable income. **This is not an income-based program and your application will not be denied based off income.**
- On August 28, 2020, the Council authorized relief to Adult Tribal Members experiencing the financial impacts of COVID-19.
- Given the rapid escalation of confirmed COVID-19 cases in the Upper Peninsula and Northern Wisconsin area affecting Tribal Members, on October 6, 2020, the Council authorized an additional relief payment to Adult Tribal Members and their families experiencing the financial impacts and effects of COVID-19.

Under the COVID-19 Tribal Member Relief Program, each Adult Tribal Member is authorized to receive an additional One Thousand Dollar (\$1,000.00) COVID-19 relief payment upon return of a completed application. **Applications will be accepted beginning October 19, 2020 and must be completed and returned no later than December 15, 2020. Applications received after December 15, 2020 will not be processed and no payment will be issued. There will be no exceptions.**

REQUIREMENTS:

The relief payment must be used to cover expenses incurred between March 1, 2020, and December 30, 2020. Please fill out why you are requesting relief by checking one or more boxes on the application.

PAYMENT PROCESSING INFORMATION – Please read carefully: To keep Tribal Members and staff safe given the current COVID-19 environment and social distancing requirements, the following processing guidelines will be strictly enforced. No early payments will be processed:

- ALL APPLICATIONS RECEIVED MONDAY-FRIDAY WILL BE PROCESSED WEDNESDAY THE FOLLOWING WEEK.
- CHECKS WILL BE AVAILABLE FOR PICK-UP, BUT ONLY WHEN YOU HAVE RECEIVED A CALL THAT YOUR CHECK IS PROCESSED AND AVAILABLE.
- WE STRONGLY ENCOURAGE THE USE OF THE TRIBE’S DIRECT DEPOSIT PROCESS DUE TO THE RECENT DELAY IN THE US POSTAL SERVICE. ATTACHED YOU WILL FIND A COPY OF THE TRIBE’S DIRECT DEPOSIT FORM THESE MUST BE TURNED IN PRIOR TO OR WITH THE APPLICATION. IF YOU ALREADY HAVE A DIRECT DEPOSIT FORM ON FILE, YOUR PAYMENT WILL AUTOMATICALLY BE ISSUED VIA DIRECT DEPOSIT.

If you need assistance completing the application, please contact the LVD Tribal Offices 906-358-4577.

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FY2020 COVID-19 TRIBAL MEMBER RELIEF PROGRAM

APPLICATION

WHO IS APPLYING: (check one box)

- I am a tribal member who is 18 or older and I am applying for a relief payment on behalf of myself.
- I am applying on behalf of a Tribal Member who is 18 or older and the required documents, i.e. power of attorney, letter of conservatorship or guardianship, are on file with the Tribe's Accounting Department or are attached to this application.

PAYMENT METHODS: (Check one box)

- I would like to receive payment via check.
- I would like to receive payment via Direct Deposit, I have already completed a Direct Deposit Form with the Tribe's Accounting Department.
- I would like to receive payment via Direct Deposit, but have not completed a Direct Deposit Form. (Please return this direct deposit form prior to or with a completed COVID-19 Relief Application.)

NAME: _____ DOB: _____ TRIBAL ID NO.: _____

ADDRESS: _____ CITY: _____ STATE: _____

ZIP CODE: _____ PHONE: _____ EMAIL: _____

RELIEF REQUESTED

Check the situation or expense that applies. Each situation or expense marked must have arisen due to the COVID-19 Pandemic.

<input type="checkbox"/>	Loss of Income	<input type="checkbox"/>	Home Schooling/Distance Learning Supplies	<input type="checkbox"/>	Increased food costs
<input type="checkbox"/>	Increased Medical Costs	<input type="checkbox"/>	Costs to self-quarantine	<input type="checkbox"/>	Housing insecurity
<input type="checkbox"/>	Caring for a Sick Family Member	<input type="checkbox"/>	Home office supplies (e.g. desk, chair, web camera)	<input type="checkbox"/>	Increased Child Care Costs
<input type="checkbox"/>	Increased cost of Cleaning supplies	<input type="checkbox"/>	Costs related to Personal Protective Equipment, e.g. face masks, hand sanitizer, etc.	<input type="checkbox"/>	Increased communication costs
<input type="checkbox"/>	Increased costs due to job search	<input type="checkbox"/>	Increased transportation costs	<input type="checkbox"/>	Utility Assistance
<input type="checkbox"/>	Other:	<input type="checkbox"/> Please explain:			

If the phone number listed above is a cell phone, would you like to begin receiving text messages announcements and updates from the Tribe via text? Yes No

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Would you like to receive email announcements and updates from the Tribe? Yes No

By signing below, I certify that any funds I receive as the result of my Application to this program will be used for the indicated expenses for which I could not or cannot otherwise pay, and/or to supplement income lost due to COVID-19 related circumstances. I further acknowledge and certify that evidence of dishonesty/fraud will be prosecuted to the fullest extent of the laws of the Tribe.

SIGNATURE: _____

DATE: _____

ATTENTION:

Applications received Monday-Friday **until December 15, 2020** will be processed the following Wednesday.

- Direct Deposit will depend on your financial institutions ACH processing cut off time.
- Checks will be mailed via US Mail first class postage.

****Only complete applications will be processed****

To Submit an application/Direct Deposit Form if applicable	
EMAIL:	lvdcovidreliefpayment@lvd-nsn.gov
MAIL:	Lac Vieux Desert Tribal Admin. ATTN: COVID-19 Assistance PO Box 249 Watersmeet, MI 49969
FAX:	(906) 358 – 4785

– FOR OFFICE USE ONLY –

Intake Date: _____ Intake Signature: _____

Approval Date: _____ Approval by (Print): _____

Signature: _____