



# THE NAVAJO NATION TOHATCHI COMMUNITY CHAPTER

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Elvis Bitsilly  
Chapter President

Lee Rodgers  
Chapter Vice-President

Jean Crawford  
Chapter Secretary/Treasurer

Gerald Moore  
Grazing Official

Nathan Notah  
Council Delegate

## FUNERAL FINANCIAL ASSISTANCE APPLICATION

### RESPONSIBLE PARTY'S INFORMATION

NAME: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(P.O./STREET ADDRESS) (CITY) (STATE) (ZIP CODE)

### DECENDENT'S INFORMATION

NAME OF DECENDENT: \_\_\_\_\_

SOCIAL SECURITY NO.: \_\_\_\_\_ CENSUS NO.: \_\_\_\_\_

### TYPE OF ASSISTANCE REQUESTING (PLEASE CHECK ONLY ONE BOX)

- ☐ \$150.00 CHECK WRITTEN TO MORTUARY OF CHOICE  
NAME OF MORTUARY: \_\_\_\_\_
- ☐ \$150.00 CHECK WRITTEN TO A VENDOR FOR FOOD ITEMS  
NAME OF VENDOR: \_\_\_\_\_

**PLEASE ATTACH A COPY OF CIB AND INVOICE FROM THE MORTUARY**

\_\_\_\_\_  
SIGNATURE OF RESPONSIBLE PARTY

\_\_\_\_\_  
DATE

### FOR OFFICE USE ONLY

APPROVED or DISAPPROVED:

ACCOUNT #: \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_

\_\_\_\_\_  
Community Service Coordinator's Signature

\_\_\_\_\_  
Date

IF DISAPPROVED, STATE REASON: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REGISTERED VOTER? \_\_\_\_ YES \_\_\_\_ NO (if under 18, parent(s) registered?)

Parent Name: \_\_\_\_\_

CONCURRED:

\_\_\_\_\_  
Chapter Official Signature

\_\_\_\_\_  
Date