## Eastern Band of Cherokee Indians
## Department of the Treasury - Revenue Department
# *Per Capita Loan Application* *(attach one form of identification)*

_______________________________ ______________ - -
Name of Enrolled Member | Enrollment No. | Social Security No.

_______________________________ ______________ ______
Mailing Address - needs to be what is on file with the Enrollment Office | City, State | ZIP

**Please mark the months that you would like to receive**

October N/A November Processed January ________ February ________ March ________

**The monthly repayments will be withheld from the June 2017 distribution.**

$ ____________ + $ 35.00 = $ ____________ (the fee is per application not each month)

Amount of Loan Requested Per Month | Fee | Total Amount

Please Specify the Nature of your Emergency or Hardship:

I understand that the largest amount that I can receive monthly is $500.00, however if it is verified that my garnishments from the last distribution are greater than $1,500 the amount I can receive will be changed to reflect the tier allowed by policy.

****October-March loans will be withheld from June Disbursement April-September will be withheld from December Disbursement****

I hereby pledge my portion of the net distributable per capita allocation (per capita) for the next applicable cycle as collaterel for this loan. I further assign to the Eastern Band of Cherokee Indians (the Tribe) the right to apply the payments of this loan to my per capita distributions of net gaming revenues. I make this Assignment knowingly and voluntarily to pay a debt. This form shall act as both application and Security Agreement as specified in Cherokee Code 16C-5, m and I acknowledge making this Assignment as a single document Application and Security Agreement I have entered with the Tribe.

I cannot revoke, breach or interfere with this Assignment, It will remain in effect until my debt is paid in full. I understand that if I breach the terms of this Assignment or the terms of a Note and/or Security Agreement to which it applies or refers, this Assignment shall constitute my irrevocable consent and authorization to the Tribe to involuntary garnishment my per capita to collect the debt expressed herein.

I understand that by making this Assignment I am giving the Tribe all of my present and future right, title and interest in my present and future per capita distributions, in the amount expressed herein and, if applicable, the accompanying Note and/or Security Agreement. By signing this Assignment I am also granting permission to the Tribe to execute and file any documents necessary or helpful to the Tribe to perfect a security interest in my per capita and/or collect therefrom. I agree to cooperate with the Tribe in the execution of the documents and to execute the documents.

When I have paid my debt in full, my per capita distributions will be given to me without further deduction for the debt expressed herein.

On behalf of myself, my heirs and assigns, I release and forever discharge the Tribe and/or Entity named below, their successors, assigns, affiliated, agents, employment and legal representatives, From any and all claims and demands, whether known or unknown, which may arise out of this Assignment. This Assignment is governed by the laws of the Eastern Band of Cherokee Indians. By executing this Assignment I consent to the exclusive jurisdiction of the Cherokee Tribal Court and to venue in that court.

_______________________________ ______________
Signature of Enrolled Member | Date

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**To be filled out by Notary Only**

State of: ______________________ County of: ______________________

On this ________ day of ______________, 20_____, before me, ______________________________, the undersigned Notary Public for ________________ County, personally appeared:

☐ Personally known to me; or

☐ Proved to me on the basis of satisfactory evidence

_______________________________
Name of Signer

To be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed the same for the purposes therein stated.

Witness my hand and official seal

_______________________________
Signature of Notary Public

_______________________________
Printed Name

My commission expires: Place Notary Seal and/or Stamp Above

**To be filled out by Finance Office Only**

Previous Garnishment Amount ____________ Approved Loan Amount ____________