



The Eastern Band of Cherokee Indians  
**Treasury Division – Office of Budget & Finance**  
 Post Office Box 455 | Cherokee, North Carolina 28719 | (828) 359-6000  
**Application for Disbursement of EBCI Minors Trust Fund**



**MINORS FUND PARTICIPANT INFORMATION**

Name: \_\_\_\_\_ Enrollment Number: \_\_\_\_\_  
First Middle Last

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

\_\_\_\_\_  
 Signature Applicant Printed Name Date

**Age 18 distribution, first payment of \$25,000.**

**Age 18 distribution, first payment of \$25,000.** You must submit a copy of your high school diploma, GED, or official transcript (transcript is acceptable after the school year ends) AND certificate of completion for [ManageYourEBCIMoney.org](http://ManageYourEBCIMoney.org) course. You must be 18 before the deadline to qualify. First payment is \$25,000 or 25% of account balance, whichever is less.

**Age 21 distribution, second payment of \$25,000.** You must be 21 before the deadline to qualify. If you did not qualify for payment at age 18, a total payment of \$50,000 will be disbursed to you. If second payment, you will receive \$25,000 or 25% of account balance, whichever is less. If first payment, you will receive \$50,000 or 50% of account balance, whichever is less.

**Age 25 distribution,** the remaining balance of your trust fund with any earned interest. All payments are subject to a 25% federal tax withholding. You are responsible for any applicable state taxes.

**NOTARY ACKNOWLEDGEMENT**

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

\_\_\_\_\_  
 Signature of Notary Printed Name of Notary My Commission Expires \_\_\_\_/\_\_\_\_/\_\_\_\_



The Eastern Band of Cherokee Indians  
 Treasury Division – Office of Budget & Finance  
 Post Office Box 455 | Cherokee, North Carolina 28719 | (828) 359-7085  
**Application for Early Disbursement Direct Deposit Agreement**



**EBCI Minors Trust Fund** Revised 5/10/22

**AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS OF MINORS TRUST FUND DISBURSEMENT**  
**\*\*OPTIONAL\*\***

**NAME:** \_\_\_\_\_

I hereby authorize EASTERN BAND OF CHEROKEE INDIANS to initiate credit entries to my account indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to credit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of US law.

**Checking**       **Savings**

**Bank Name:** \_\_\_\_\_ **Bank Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Account Name:** \_\_\_\_\_

**Routing Number:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_

Please attach a VOIDED check or a letter from your financial institution with this form. Form is considered incomplete with verification.

**FOR HOUSING, HEALTHCARE OR EDUCATION APPLICATIONS**

**WIRE & DELIVERY INSTRUCTIONS**

**Receiving Institution ABA #:** \_\_\_\_\_

**Receiving Institution Account #:** \_\_\_\_\_

**Receiving Institution:** \_\_\_\_\_

**Beneficiary Name:** \_\_\_\_\_

**Beneficiary Instructions:** \_\_\_\_\_

**FFC:** \_\_\_\_\_

By filling out this form, you accept that you are voluntarily enrolling in direct deposit for your Minors Trust Fund payment. You are responsible for keeping your bank account open. Any changes to your bank account may result in a late payment. The bank account for direct deposit must include the applicant’s name. If form is not filled out completely, a paper check will be mailed.

**Deadlines are March 31, paid in June; June 30, paid in September; September 30, paid in December; and December 31, paid in March.**

\*\* Payments are not issued with Per Capita payments and come from Charles Schwab Bank. Minors Trust Fund payments are guaranteed by the 15th of the month. \*\*