**REQUEST FOR PAYMENT FORM**

**INDIAN COUNTRY ECONOMIC DEVELOPMENT (ICED) PROGRAMS**

Tribal Business Planning Grant (TBPG)

Native American Business Advisors (NABA)

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| **REQUEST FOR FUNDS** | |
| On behalf of the [Enter Name of Tribe/Organization] a request is hereby made for a draw of funds from the Indian Country Economic Development Programs [Enter Contract Number] in the amount of [Enter Amount Requested]. | |
| **REQUESTED BY** | |
| *(This Request for funds must include two of the authorized signatories designated on the Signature Certification Form which is on file.)* | |
| **Name & Title** | **Signature & Date** |
| [Enter authorized signature name here] | **X** |
| [Enter title here] | [Enter Date here] |
| **Name & Title** | **Signature & Date** |
| [Enter authorized signature name here] | **X** |
| [Enter title here] | [Enter Date here] |

Please retain the original for your files and send a copy to [doctribal@mt.gov](mailto:doctribal@mt.gov).