

**NOTARIZED SIGNATURE REQUIRED FOR ALL APPLICATIONS MAILED IN AND
FOR REQUESTS TO MAIL LOAN CHECK WHEN COMPLETE**

State of Washington
County of Snohomish

Signed or attested before me on _____, 2020 by

_____ Tribal Identification Number.

(Seal or stamp)

Print Notary Name _____

My appointment expires _____



For Official use only:
BOD Approval date and Resolution or Directive #
Loan ID #:
Customer Number
Address:

Mailing Address if different:

Beginning Balance
Interest Rate:
Loan Type: Fixed
Period type: Month
Number of Periods: 60
Payment Amount:
AR Code:
Start Date: