



Finance Department  
ATT: MEMBERSHIP DISTRIBUTION  
6406 Marine Drive  
Tulalip, WA 98271

## VOLUNTARY LOAN DEDUCTION REQUEST

NAME: \_\_\_\_\_ TRIBAL ID # \_\_\_\_\_

This form is submitted voluntarily to request my loan payments be withheld from my monthly membership distribution. This request can be stopped at any time, by request in writing, to Membership Distribution via email or fax. This form should be filled out in full to ensure timely processing.

### DEDUCTIONS:

Start Date of Deductions: \_\_\_\_\_ (1<sup>st</sup> of month following submission if not listed here)

Tribal Loan: Loan # \_\_\_\_\_ \$ \_\_\_\_\_ /Month T# \_\_\_\_\_

If loan is not for you please list the following additional information:

Tribal Member Name: \_\_\_\_\_ T# \_\_\_\_\_ \_\_\_\_\_ Initials of payor

Choose one:

- Monthly Membership Distribution (One deduction)**
- Monthly Senior Distribution (Two deductions)**
- Bi-monthly Elder Support Distribution (Two deductions)**
- Bi-monthly Disability Support Distribution (Two deductions)**

Please return directly to the Finance Department, cashiers window.

You may EMAIL [membershipdistribution@tulaliptribes-nsn.gov](mailto:membershipdistribution@tulaliptribes-nsn.gov) or FAX 360-716-0304.

Please check both boxes below and sign and date this form. These boxes must be checked or it will delay the processing of payment set up.

- I certify that the original tribal loan I received, which I am currently making payments, was used to pay housing/mortgage, utilities, child care or other general welfare living expense. Therefore, I am requesting that my loan payments be deducted from my monthly general welfare payment
- I understand and agree that the IRS has the ability to determine these payments are not in fact General Welfare Qualifying and may require the signatory to pay taxes on these loans and/or payments at some time in the future

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### **FORM MUST BE RECEIVED:**

**BY 5<sup>TH</sup> of the MONTH TO BE EFFECTIVE FOR THE 15TH CHECK DISTRIBUTION OR  
BY 18<sup>TH</sup> of the MONTH TO BE EFFECTIVE FOR THE CHECK DISTRIBUTION ON THE 1<sup>ST</sup>.**