

**REQUEST FOR PAYMENT FORM
INDIAN COUNTRY ECONOMIC DEVELOPMENT (ICED) PROGRAMS**

Native American Business Advisors (NABA)

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	
<i>(This Request for funds must include two of the authorized signatories designated on the Signature Certification Form which is on file.)</i>	
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.