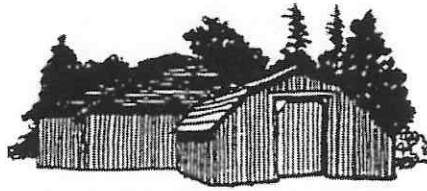


## Exhibit A



### Burial Assistance Application Kashia Band of Pomo Indians of The Stewarts Point Rancheria

Name of DECEASED: \_\_\_\_\_ Jr., Sr. I, II, III  
*First Middle Last (Please circle one)*

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

Date of DEATH: \_\_\_\_\_ Date of BIRTH: \_\_\_\_\_

Location of Death or Facility: \_\_\_\_\_  
*City State Zip*

#### Next of Kin:

1. \_\_\_\_\_ Phone Number: \_\_\_\_\_  
**Name** *First Middle Last*

\_\_\_\_\_  
*Address City State Zip Relationship*

2. \_\_\_\_\_ Phone Number: \_\_\_\_\_  
**Name** *First Middle Last*

\_\_\_\_\_  
*Address City State Zip Relationship*

#### If different than next of Kin:

\_\_\_\_\_  
**Name** *First Middle Last* Phone Number: \_\_\_\_\_

\_\_\_\_\_  
*Address City State Zip Relationship*

Power of Attorney: \_\_\_\_\_ Yes (Attach Copy) \_\_\_\_\_ No

Approved by General Council 02112012

### SERVICES REQUESTED

Amount Requested from Burial Assistance (Not to Exceed \$8,000.00)

Funeral Service Provider: \$ \_\_\_\_\_ Private Service: \$ \_\_\_\_\_

Cremation: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

Funeral Service Provider Information (Attach Invoice):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Vigil/Reception

Funds for Vigil Service/Reception Allowable Expenses (Not to Exceed \$1,000.00): Yes No (Circle One)

Amount Requested: \$ \_\_\_\_\_

Signature: \_\_\_\_\_

Requested by: Name (Please Print) \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature: \_\_\_\_\_

Requested by: Name (Please Print) \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Down Payment/Advance Required: ☐ Yes Amount: \$ \_\_\_\_\_ No ☐

*(All receipts must accompany request)*

Signature \_\_\_\_\_

**The information that has been provided in this application is true and correct to the best of my knowledge. I will submit copies of all documents, including a copy of the Death Certificate, as required by the Kashia Band of Pomo Indian's Burial Assistance Policy. I am aware that any falsification of documentation will result in an obligation to reimburse all funding I have received from the Burial Assistance Fund. I understand that the Tribal Council will hear and resolve disputes regarding this policy, and that adverse decisions of the Tribal Council may be appealed to the General Council.**

**I further understand that Burial Assistance Funding may not be traded or transferred to another party in any circumstance, whether the other party is a relative or non-relative.**

**Receipts and/or invoices are required for all expenditures incurred for the Burial Assistance Fund. All requests for reimbursement of allowable expenses must be accompanied by receipts.**

---

**For Office Use (provide date and initials where applicable)**

Membership Verification: \_\_\_\_\_ Application Denied: \_\_\_\_\_

Application Approved: \_\_\_\_\_ Reason(s): \_\_\_\_\_

Documentation Received: \_\_\_\_\_ (attach additional sheets as necessary)

Amount Approved: \$ \_\_\_\_\_

Funeral Service Provider: \$ \_\_\_\_\_ Private Service \$ \_\_\_\_\_ Cremation \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Total Burial Assistance Grant Amount: \$ \_\_\_\_\_

Checks made payable to: \_\_\_\_\_, \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_

Chairman (or) Treasurer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

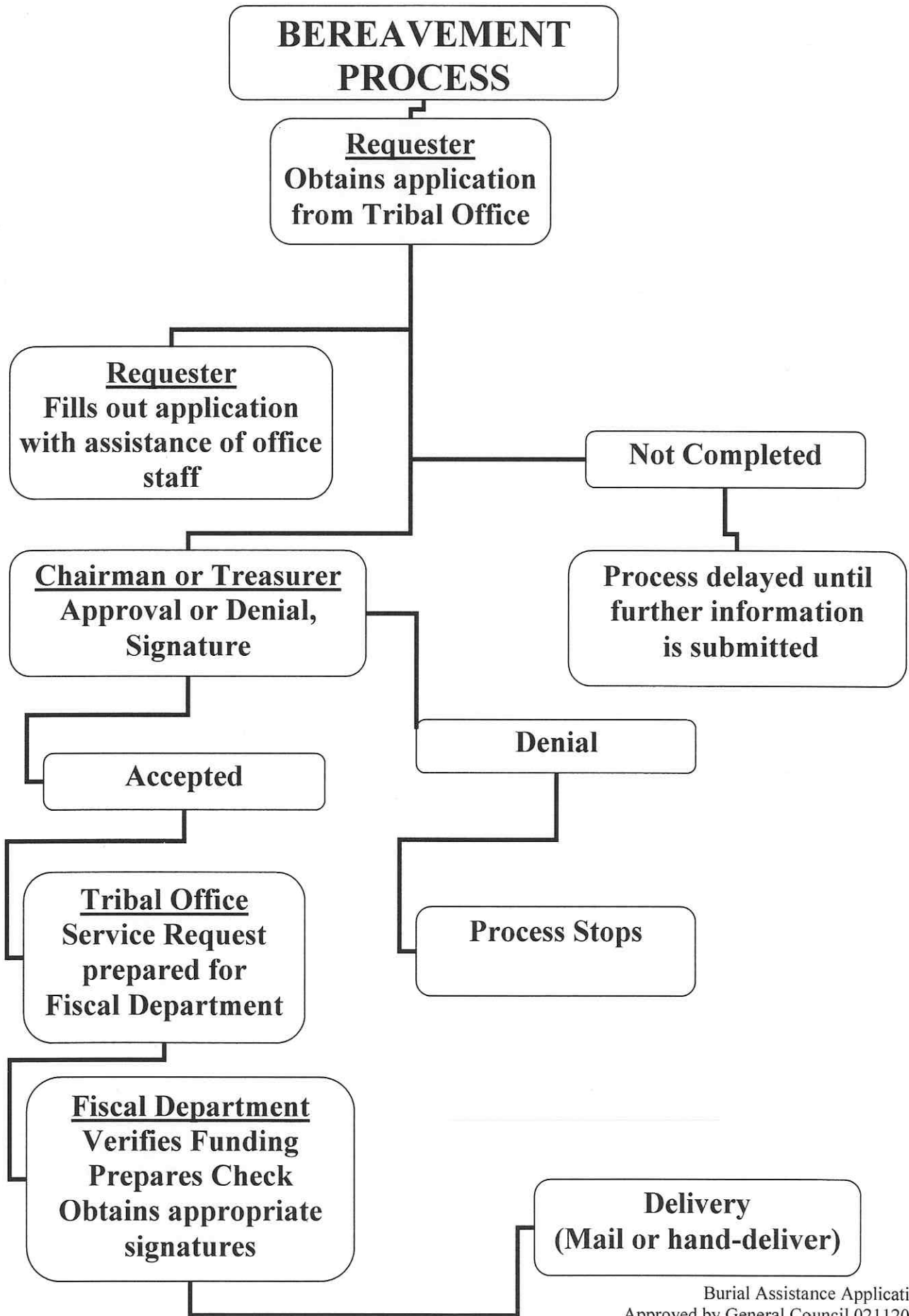
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## **Intake Check List**

- \_\_\_\_\_ Application Completed
- \_\_\_\_\_ Signatures Confirmed
- \_\_\_\_\_ Power of Attorney
- \_\_\_\_\_ Funeral Provider Information
- \_\_\_\_\_ Vigil/Reception Expenses? Yes ☐ No ☐
- \_\_\_\_\_ Explanation of Purchase Order
- \_\_\_\_\_ Supporting Documentation Attached
- \_\_\_\_\_ Explanation of Benefits/Policy Requirement

**Applicant Signature:** \_\_\_\_\_

**Intake Signature :** \_\_\_\_\_



(This page is positioned to be printed on letter head)

## **Resolution to Adopt Burial Assistance Policy**

### **Resolution Number**

- WHEREAS,** The Kashia Band of Pomo Indians of The Stewarts Point Rancheria is recognized as a sovereign government by the United States of America, and
- WHEREAS:** Article IV, Sections 1(d) and (g) of the Tribal Constitution authorize the governing body to manage Tribal assets and regulate the use of Tribal funds, and
- WHEREAS,** Funding for Burial Assistance through the Bureau of Indian Affairs and other sources is very limited and does not meet the needs of the members of the Kashia Band of Pomo Indians of the Stewarts Point Rancheria, and
- WHEREAS,** The Kashia Band of Pomo Indians of the Stewarts Point Rancheria receives funds from the Indian Gaming Revenue Sharing Trust Fund (IGRSTF), that the Tribal Council distributes as directed by the General Council, and
- WHEREAS,** At a duly called Special Community Meeting on October 12, 2008, at which there was a quorum, the Community Council voted to establish a Burial Assistance Fund, to be funded from the IGRSTF in the amount of \$50,000 per year to assist Tribal Members with funeral costs and related expenses, and
- WHEREAS,** The Tribal Council has been administering the approved Burial Assistance Fund according to a policy developed at its direction in 2009, and
- WHEREAS,** The General Council has determined that it is in the best interests of the Kashia Band and its members to update the Tribal Council's Burial Assistance Policy and seek its review and approval by the General Council, and
- WHEREAS,** The General Council has reviewed the attached Burial Assistance Policy and concludes that the Policy will fulfill the goals of the Tribe in establishing the Burial Assistance Fund.
- NOW, THEREFORE BE IT RESOLVED,** that the General Council of the Kashia Band of Pomo Indians of the Stewarts Point Rancheria hereby approves and adopts the Burial Assistance Policy attached hereto, to remain in full force and effect unless amended or rescinded by further action of the General Council.
- BE IT FURTHER RESOLVED,** that the General Council of the Kashia Band of Pomo Indians of the Stewarts Point Rancheria authorizes the Chairperson or, in his absence, the Vice Chairperson to execute any and all documents, and take such action as may be necessary or appropriate to implement this Resolution and the attached Burial Assistance Policy.

### CERTIFICATION

This is to certify that the foregoing Resolution was adopted at a duly called meeting of the General Council of the Stewarts Point Rancheria at which a quorum was present on this May 14, 2011 by a vote of \_\_\_\_ for, \_\_\_\_ against, \_\_\_\_ abstaining \_\_\_\_.

\_\_\_\_\_  
Ralph Sepulveda, Tribal Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attest: Gina Perrine, Tribal Secretary

\_\_\_\_\_  
Date

# Kashia Band of Pomo Indians of the Stewarts Point Rancheria

## Burial Assistance Policy

Revision 5/11/2011

### I. Purpose

- A. The Kashia Band of Pomo Indians of The Stewarts Point Rancheria (Tribe) has established a Burial Assistance Fund to assist Tribal Members with funeral costs and related expenses. A portion of the Tribe's Indian Gaming Revenue Sharing Trust Fund (IGRSTF) and other sources as applicable will be allocated quarterly to support the Fund in accordance with General Council approval and as long as such funds exist. The purpose of this policy is to provide guidance in the distribution and management of this Fund including, but not limited to: eligibility, application requirements, funding limits, and a dispute resolution process. This policy shall be effective upon its approval and adoption by the General Council.

### II. Eligibility

- A. Burial Assistance Funding is available to cover expenses associated with funeral and related services for the following categories of people (collectively referenced as "Tribal Members"):
1. Enrolled members of the Kashia Tribe who pass away regardless of:
    - a) income and other resources available to the family.
    - b) membership status of the next of kin or person with Power of Attorney for burial of the Tribal Member.
    - c) existence of a life insurance policy in the name of the Tribal Member.
  2. Children from birth to 3 years old who are eligible for membership, regardless of whether a membership application was submitted at the time of their passing.
  3. Persons older than 3 years of age who are eligible for membership, PROVIDED that they have a membership application pending official action at the time of their passing.
  4. A Tribal Member ***mother/parent*** who miscarries a fetus that is eligible for burial as determined by a registered physician or mid-wife.
- B. Burial Assistance Funding is NOT available to cover expenses associated with funeral and related services for the following categories of people:
1. Non-tribal members aged 3 years and above who are not eligible for membership or do not have a membership application pending official action.
  2. Non-tribal member spouses, children or other relatives, except those identified in sections A.2 and A.3 above.

### III. Allowable Costs

- A. The following costs are eligible for payment from the Burial Assistance Fund:
1. Funeral and related expenses including: funeral home, mortuary, crematorium, burial expenses, embalming, cemetery headstone, clothing, food, death certificates, permits, obituary publication, floral arrangements, religious ceremony related to a memorial service.
  2. Any other financial hardship the next of kin or person holding Power of Attorney for burial of the Tribal Member not mentioned above.
  3. A terminally ill Tribal Member who is not expected to live more than six (6) months is eligible for down payment or advance payment for his or her burial plot provided the application is accompanied by documentation of the Tribal Member's medical status from a registered physician.
  4. Travel expenses i.e. airfare, mileage and per diem for the immediate family (grandparents, a parent or guardian, sibling, child, spouse or domestic partner, **aunt or uncle, niece or nephew**) of a decedent Tribal Member to attend funeral services.
- B. The following expenses are NOT eligible for payment from the Burial Assistance Fund:
1. Any and all fees associated with termination of a pregnancy.
  2. Unpaid bills or rent.
  3. Down payment or advance payment for a burial plot where the life expectancy of the Tribal Member may be longer than six (6) months.
  4. Any and all alcohol and tobacco products.

### IV. Application Procedures and Documentation

- A. A request for funding under this Policy must be made no later than thirty (30) days after the date of death of the Tribal Member. Applications may be obtained at the Tribal Office. The application form is attached as Exhibit A.
- B. An application form must be completed by the next of kin or person holding Power of Attorney ("POA") for burial of the Tribal Member, or by a terminally ill Tribal Member, next of kin or POA if the application seeks advance payment. For purposes of this Policy "next of kin" is defined as grandparents, a parent or guardian, sibling, child, spouse or domestic partner, **aunt or uncle, niece or nephew**.
- C. The Tribal Council will appoint a designated staff member(s) to work with applicants to complete their applications, and handle all requests and approvals to expedite the process. Once an application is completed, intake will be conducted, the application package will be forwarded to the Chairman or Treasurer for approval, then to the Fiscal staff for processing, if appropriate.
- D. The application must be supported by presentation of official documentation of death provided by a funeral home, government agency, hospital, or other facility or agency in charge of the after-death care of the Tribal Member. The Death Certificate must be received within 30 days after the Tribal Member's passing unless an extension is requested by the



applicant for good cause (such as a delay in the issuance of the Death Certificate by the responsible governmental agency).

- E. The designated staff member(s) shall make their best effort to review, and process each request for assistance, and obtain an approval (or denial), within three (3) business days after receipt of a completed application with all required supporting documentation.
- F. Receipts and/or invoices are required for all expenditures incurred for the Burial Assistance Policy. Any request for reimbursement for allowable expenses **must** be accompanied by receipts.

## V. Funding

- A. Except as provided in paragraph B below, the Tribe will pay up to \$8,000 for Tribal Member funeral and related expenses, including no more than \$1,000 for vigil / reception related expenses.
- B. The Tribe will pay up to \$2,000 for burial, cremation and/or funeral expenses for an eligible fetus, including no more than \$1,000 for vigil / reception related expenses.
- C. In all cases, burial, cremation and/or funeral expenses will be paid by the Tribe directly to the Funeral Service Provider. Benefits will be paid once supporting documentation and invoices for services have been submitted by the Funeral Service Provider.
- D. In all cases, vigil/reception related expenses, such as for food, plates, flatware and flowers, shall be ordered and paid via purchase order issued by the Tribe.
- E. This Fund will continue to serve Tribal Members as long as funds are available and are sufficient to support this Policy.
- F. ***The Tribal Council reserves the right to reduce the benefits in the event that funds become limited.***
- G. Under no special or extenuating circumstances will the Tribal Council use available funds for costs in excess of the maximum amounts set forth in this Policy.
- H. Eligible participants who request down payment or advance payment for a burial plot will not be entitled to additional funding if the down payment or advance payment is non-refundable.
- I. The Tribal Council shall make its best effort to ensure that Burial Assistance Funds are paid on behalf of eligible applicants within thirty (30) calendar days of approval of an application for assistance.
- J. Burial Assistance Funds shall be paid to the parties identified in writing on the Burial Assistance Fund Application with supporting documentation attached. Any changes to the parties to receive funding must be made in writing by the applicant.

## VI. Dispute Resolution

- A. The Tribal Council reserves the right to investigate the authenticity of documents submitted to support a request for Burial Assistance Funding. Any person found to have made false statements on an application may be denied assistance. If the falsehood is discovered after assistance has been provided, the person who obtained funds from the Tribe based on false

information or any fraudulent act will be obligated to reimburse all funds to the Tribe. In both cases, such person may be subject to disciplinary proceedings under the Tribe's Ethics and Conduct Ordinance if he or she is a Tribal Representative as defined in Section 1.1.4 of that Ordinance.

- B. At no time shall the Tribal Council be held responsible or liable for the activities or non-performance of any Funeral Service Provider.
- C. Benefits under this policy are a privilege of membership and subject to the availability of funding and Tribal Council approval. This policy does not create an entitlement or right for any person.
- D. The Tribal Council will hear and decide any dispute arising under this policy in a proceeding where affected persons will have an opportunity to present evidence and a statement before a decision is reached. Any person the Tribal Council has denied assistance or found to have obtained funds from the Tribe based on false information or any fraudulent act or a violation of the Tribe's Ethics and Conduct Ordinance may appeal the adverse decision to the General Council. The affected person(s) shall submit, within seven (7) days of receipt of the Council's decision, a written request for appeal that explains the reasons for the appeal. Any such appeal shall be heard and decided by secret ballot at the next General Council meeting at which a quorum is present. All decisions of the General Council shall be final and not subject to further appeal.