



Yakama Nation 2% Community Contribution Committee

580 Fort Road, Toppenish WA 98948

January 9, 2020

To Whom It May Concern:

Pursuant to the Class III Gaming Compact between the Yakama Nation and the State of Washington, Section XIV.C, the Yakama Nation has established a fund consisting of 2% of the net win from certain Class III gaming activities at the Yakama Nation Legends Casino located on the Yakama Reservation. This fund, known as the *Community Contribution Fund*, is used to provide monetary assistance to law enforcement, emergency services and other service providers/agencies which have been impacted by the Yakama Nation's gaming facility located on the Yakama Reservation.

The Community Contribution Committee is a six member committee comprised of representatives from the Washington State Gambling Commission, Yakima County, City of Yakima, City of Toppenish, Yakama Nation Gaming Commission and the Yakama Nation Tribal Council. This Committee has identified your agency as a service provider who may have been impacted by the operation of the Yakama Nation's Class III gaming operation; therefore, may qualify for funding. In order to be considered, your agency must complete the attached application and return it to the Committee. Completed applications must clearly define the type and extent of the negative impact on your agency which has resulted, directly or indirectly, from the operation of the Yakama Nation's gaming facility. All available documentation, reports, expense records or other supporting documents/data, must be attached to your application. The application must include a narrative describing how your agency plans on utilizing the requested funds.

Forward completed applications to the attention of Dolcee Jack, Yakama Nation Gaming Commission Executive Director, 580 Fort Road, Toppenish, WA 98948. Applications must be postmarked by March 31, 2020. Upon receipt of all applications, the Committee will meet to evaluate each request and allocate funding based upon documented impacts. Your agency may be requested to provide additional information, including an oral presentation to further explain and support your funding request.

If you have any questions concerning this process, please contact Dolcee Jack, Yakama Nation Gaming Commission Executive Director: dolceej@yngc.com, or by phone at: (509)865-5322, ext. 5506.

Sincerely,

Ron Anderson, District 2 Yakima County Commissioner
2% Community Contribution Committee
Committee Chairman

The Yakama Nation (YN) Community Impact Contribution committee is accepting applications for the 2% Community Impact Contribution Fund covering the period beginning October 01, 2018 – September 2019 for FY19. Applications for the 2% Community Contribution Fund must be post marked by March 31, 2020. This contribution funds local both Tribal and non-Tribal law enforcement agencies, emergency response services and other agencies which have been impacted by the continuous operation of the Yakama Nation Legends Casino/Hotel. For additional information, electronic application and applications, please contact Dolcee Jack, Executive Director of the Yakama Nation Gaming Commission at (509)865-5322, Ext. 5506 or dolceej@yngc.com.

**APPLICATION FOR
YAKAMA NATION COMMUNITY
CONTRIBUTION FUND GRANT**

The purpose of the Community Contribution Fund is to provide financial assistance to local law enforcement, emergency medical, traffic and transportation, and other agencies and service providers impacted by activities associated with the operation of the Nation's Class III gaming facilities at the Yakama Nation Legends Casino.

APPLICANT INFORMATION

Applicant: <input style="width: 90%;" type="text"/>	Contact: <input style="width: 90%;" type="text"/>
Agency: <input style="width: 90%;" type="text"/>	Phone: <input style="width: 90%;" type="text"/>
Fax: <input style="width: 90%;" type="text"/>	E-Mail: <input style="width: 90%;" type="text"/>
Address: <input style="width: 90%;" type="text"/>	Project Title: <input style="width: 90%;" type="text"/>
Amount Requested: \$ <input style="width: 150px;" type="text"/>	

TYPE OF AGENCY

Are you a local law enforcement agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a local emergency services agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a local public service agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a local provider of social services not listed above?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please describe the public services you provide within the area:

Are you affiliated with a government entity? If yes, name entity: <input style="width: 300px;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you applied for a grant from the Yakama Nation 2% Community Contribution fund before? If yes, state date(s) and amount awarded: <input style="width: 150px;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Have you previously been awarded a grant from any similar Community Contribution Fund operated by a tribal entity other than the Yakama Nation? If Yes, provide date of grant(s), amount(s), and purposes of grant(s):	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Please describe how you have been impacted by the Yakama Nation Legends Casino operation of a Class III gaming facility? [If necessary, add additional pages]
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Do you have documentation showing these impacts?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If yes, list and describe the documentation (include date created, author, subject matter, dates covered by the document and attach a copy of each document identified:

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If no, please describe any other manner in which the identified impacts can be substantiated:

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Please provide a brief narrative description of how you intend to use any funds you may receive from the Fund:

Are there other factors regarding your project about which we should be aware (e.g. compliance orders, emergency declarations, etc.)?

CERTIFICATION

I certify that I have authority to act on behalf of the applicant agency and that I am authorized by the applicant agency to sign and submit this grant application and certification to the Yakama Nation Community Contribution Fund Committee.

I certify that the answers given in this grant application are true and complete to the best of my personal knowledge and the knowledge of the applicant.

The applicant agency authorizes the Yakama Nation Community Contribution Fund Committee to investigate all statements contained in this grant application as may be necessary in arriving at a grant award decision. The agency understands that the Yakama Nation Community Contribution Fund Committee may interview people and entities concerning the verification of information presented in this application or in any subsequent oral or written presentation and that such people or entities may make statements about the agency in response to the Committee's inquiry. The applicant agency releases the Yakama Nation Community Contribution Committee, Committee members and any person or entities making statements about the agency from any liability arising from activities concerning the verification of information, provided statements are not made maliciously or with the intent to harm the applicant agency.

The applicant agency acknowledges and understands that all grantees must agree in writing at the time of the receipt of the Community Contribution grant that the money will be used as a supplement and according to the grant application to address impacts attributable to the operation of the Yakama Nation's Casino, and not to replace funding already existing and available beginning as of May 1998, or thereafter.

Signature _____

Date _____

Print Form