

**Department of Commerce,  
Community and Economic  
Development  
FY21 Community Assistance Program**

**APPLICATION MUST BE SUBMITTED NO  
LATER THAN JUNE 1, 2020**



**State of Alaska  
Mike Dunleavy, Governor**

**Department of Commerce, Community,  
and Economic Development  
Julie Anderson, Commissioner**

**Division of Community and Regional  
Affairs  
Sandra Moller, Director**



**FY 2021 COMMUNITY ASSISTANCE PROGRAM  
REQUIREMENTS AND CERTIFICATION  
RESERVE APPLICATION**

**DEADLINE: JUNE 1, 2020**

<b>NAME OF RESERVE</b>	<b>CONTACT NAME</b>
<b>MAILING ADDRESS</b>	<b>CONTACT EMAIL ADDRESS</b>
<b>CITY, STATE, ZIP CODE</b>	<b>CONTACT PHONE &amp; FAX NUMBER</b>

ACKNOWLEDGE THE REQUIREMENTS BY CHECKING OR INITIALING EACH BOX:

- The community assistance payment will be used only for a public purpose as required under AS 29.60.850(a) and the reserve agrees to make available a service or facility with the funds under AS 29.60.855 – 29.60.879 to every person in the community.
- The reserve will maintain, as required by 3 AAC 180.010 (4), all records relating to receipt and expenditure of a community assistance payment for at least three years, or longer if there is an unresolved audit finding, questioned costs, litigation or a grievance.
- Subject to AS 29.60.865(a) and 3 AAC 180.130, a community assistance payment will not be made to a reserve unless the reserve waives its sovereign immunity.
- A statement of expenditures of the prior year's community assistance payment and a budget form for current year's application.

CERTIFICATION:

As the highest ranking official, I certify the \_\_\_\_\_ understands the requirements for receiving the community assistance payment and agrees to comply with all laws and regulations governing the community assistance funds.  
*(Name of Reserve)*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name and Title

**FY 2021 COMMUNITY ASSISTANCE PROGRAM  
PROPOSED CAP BUDGET**

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**Name of Reserve**

Please describe below how your organization proposes to use its estimated FY 2020 Community Assistance Program payment.

FUEL	\$ _____
ELECTRICITY	\$ _____
INSURANCE	\$ _____
EDUCATION	\$ _____
EMS	\$ _____
WATER/SEWER	\$ _____
PUBLIC SAFETY	\$ _____
FIRE	\$ _____
ROAD MAINTENANCE	\$ _____
HARBORS	\$ _____
HEALTH	\$ _____
GENERAL ADMINISTRATION	\$ _____
OTHER _____	\$ _____
OTHER _____	\$ _____
OTHER _____	\$ _____
<b>FY 2021 ESTIMATED PAYMENT</b>	<b>\$ _____</b>

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**FY 2021 COMMUNITY ASSISTANCE PROGRAM  
Statement of Expenditures for Prior Year Payment**

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**Name of Reserve**

Please detail below how your organization spent its FY 2020 Community Assistance Payment.

FUEL	\$ _____
ELECTRICITY	\$ _____
INSURANCE	\$ _____
EDUCATION	\$ _____
EMS	\$ _____
WATER/SEWER	\$ _____
PUBLIC SAFETY	\$ _____
FIRE	\$ _____
ROAD MAINTENANCE	\$ _____
HARBORS	\$ _____
HEALTH	\$ _____
GENERAL ADMINISTRATION	\$ _____
OTHER _____	\$ _____
SAVINGS/NOT SPENT	\$ _____

**FY 2020 TOTAL PAYMENT** \$ \_\_\_\_\_

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**WAIVER OF SOVEREIGN IMMUNITY FOR TRIBAL ENTITIES**  
**RESOLUTION NO. \_\_\_\_\_**

WHEREAS, the \_\_\_\_\_ (Name of Native village council) wishes to receive payment under the Department of Commerce, Community, and Economic Development Community Assistance Payment Program in State Fiscal Year 2021; and

WHEREAS, AS 29.60.865(a) and 3 AAC 180.130 requires the entity's governing body to waive the entity's sovereign immunity from legal prosecution by the state with respect to claims arising out of activities related to the payment;

THEREFORE, BE IT RESOLVED THAT, the \_\_\_\_\_, (Name of Reserve ) hereby irrevocably waives its sovereign immunity and consents to suit in Alaska State Courts or in a state administrative agency proceeding for any cause of action or claim (including any claim for allowable pre-judgment or post-judgment interest, costs and attorney fees) filed by the state arising out of or related to the payment, to enforcement of any court or agency order or judgment entered in such action or agency proceeding, and to levy and execution of any judgment entered in any such lawsuit or agency proceeding against all property and funds of the \_\_\_\_\_ (Name of Native village council) however held and wherever located, provided that such execution of judgment not exceed the program payment.

BE IT FURTHER RESOLVED THAT: \_\_\_\_\_ (Chief Administrative Officer, Chief, President) is hereby authorized to negotiate, execute, and administer any and all documents and contracts required for granting funds to the \_\_\_\_\_ (Name of Native village council) and managing funds on behalf of this entity, including any subsequent amendments to the payment agreement.

BE IT FURTHER RESOLVED THAT: This resolution shall remain in effect until the expiration of the statute of limitations on any cause of action or claim arising out of or related to the payment, including, but not limited to, any cause of action or claim related to a demand for reimbursement of program funds. Issues related to the statute of limitations shall be determined under the laws of the State of Alaska.

This resolution was adopted at a duly convened meeting of the \_\_\_\_\_ (Name of Native village council) on \_\_\_\_\_, 20\_\_\_\_ and complies with all current requirements necessary for the \_\_\_\_\_ (Name of Native village council) to validly and irrevocably waive its sovereign immunity.

IN WITNESS THERETO:

By: \_\_\_\_\_  
Signature Chief Administrative Officer Title

Attest: \_\_\_\_\_  
Signature Clerk or Secretary of Organization Title