

Elder's Monthly Renewal Slip: For the Month of:



1. Are you still in need of the Elder's Hamper? Yes _____ No _____

2. Has there been any change in your monthly income? Yes _____ No _____

If so, please list:

Monthly Income: _____

Print Name

Signature

Date

If you require continued Elder's Hamper, PLEASE COMPLETE THIS FORM & return it to the Human Services Dept.

If you are unable to mail in your Elder's Hamper Renewal Form, please call the Uchucklesaht Tribe office at 250-724-1832 or by calling the toll free number at 1-888-724-1832 if you are calling long distance.

FOR THE UCHUCKLESAHT OFFICE USE ONLY:

Elder's Hamper Renewal Form received by MAIL on:		
Mail received by:		
Elder's Hamper Renewal Form received by PHONE on:		
Phone call taken by:		
Elder's Hamper Renewal Form initialed by: _____		
Director of Human Services		