



NAVAJO NATION DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

ETHEL B. BRANCH
Attorney General

HEATHER CLAH
Deputy Attorney General

DEPARTMENT OF JUSTICE
INITIAL ELIGIBILITY DETERMINATION
FOR NAVAJO NATION FISCAL RECOVERY FUNDS

RFS/HK Review #: _____

Date & Time Received: _____

Date & Time of Response: _____

Entity Requesting FRF: _____

Title of Project: _____

Administrative Oversight: _____

Amount of Funding Requested: _____

Eligibility Determination:

- ☐ FRF eligible
☐ FRF ineligible
☐ Additional information requested

FRF Eligibility Category:

- ☐ (1) Public Health and Economic Impact
☐ (2) Premium Pay
☐ (3) Government Services/Lost Revenue
☐ (4) Water, Sewer, Broadband Infrastructure

U.S. Department of Treasury Reporting Expenditure Category: _____

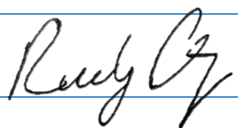
Returned for the following reasons (Ineligibility Reasons/Paragraphs 5.E.(1)-(10) of FRF Procedures):

- | | |
|--|--|
| <input type="checkbox"/> Missing Form | <input type="checkbox"/> Expenditure Plan incomplete |
| <input type="checkbox"/> Supporting documentation missing | <input type="checkbox"/> Funds will not be obligated by 12/31/2024 |
| <input type="checkbox"/> Project will not be completed by 12/31/2026 | <input type="checkbox"/> Incorrect Signatory |
| <input type="checkbox"/> Ineligible purpose | <input type="checkbox"/> Inconsistent with applicable NN or federal laws |
| <input type="checkbox"/> Submitter failed to timely submit CARES reports | |
| <input type="checkbox"/> Additional information submitted is insufficient to make a proper determination | |

Other Comments: _____

Name of DOJ Reviewer: _____

Signature of DOJ Reviewer: _____



Disclaimers:

If additional information has been requested and you wish to provide it, please resubmit all the required forms updated to include the additional information. Full resubmission will expedite the Initial Eligibility Determination process. Therefore, please include a new RFS form indicating resubmission, revised Appendix A, Budget Form 1, and other supporting documents. **Please email your resubmission to arpa@nndoj.org.** Please be aware that under Resolution BFS-31-21 a Project or Program can only be reviewed twice, therefore it is critical that you include all the requested additional information for your second submission.

An NNDOJ Initial Eligibility Determination is based on the documents provided, which NNDOJ will assume are true, correct, and complete. Should the Project or Program change in any material way after the initial determination, the requestor must seek the advice of NNDOJ. An initial determination is limited to review of the Project or Program as it relates to whether the Project or Program is a legally allowable use – it does not serve as an opinion as to whether or not the Project or Program should be funded, nor does it serve as an opinion as to whether or not the amount requested is reasonable or accurate.

**THE NAVAJO NATION
FISCAL RECOVERY FUNDS REQUEST FORM & EXPENDITURE PLAN
FOR NON-GOVERNANCE CERTIFIED CHAPTERS**

Part 1. Identification of parties.

Non-Governance Certified Chapter requesting FRF: Coyote Canyon Chapter Date prepared: 12/2/2022
 Chapter's PO Box 257 Brimhall NM 87310 phone/email: 505-735-2623/ coyotecanyon@navajochapters.org
 mailing address: website (if any): coyotecanyon.navajochapters.org
 This Form prepared by: Sherylene Yazzie phone/email: 505-735-2623
Chapter President coyotecanyon.navajochapters.org
CONTACT PERSON'S name and title CONTACT PERSON'S info

Title and type of Project: Purchase Chapter Industrial Refrigeration Unit, Freezer Unit

Chapter President: Sherylene Yazzie phone & email: 505-879-0903/yahzegurl@yahoo.com
 Chapter Vice-President: Evelyn Morris phone & email: 505-979-4040/evelynmorris.em@gmail.com
 Chapter Secretary: Sharon Warren phone & email: 505-422-1708
 Chapter Treasurer: Sharon Warren phone & email: eaglesswilliams@yahoo.com
 Chapter Manager or CSC: Vacent phone & email: _____
 DCD/Chapter ASO: Patricia Begay phone & email: 928-871-7172

List types of Subcontractors or Subrecipients that will be paid with FRF (if known): _____ ☐ document attached

Amount of FRF requested: \$20,000 FRF funding period: 10/10/2022 - 9/30/2026
indicate Project starting and ending/deadline date

Part 2. Expenditure Plan details.

(a) Describe the Program(s) and/or Project(s) to be funded, including how the funds will be used, for what purposes, the location(s) to be served, and what COVID-related needs will be addressed:

The Coyote Canyon Chapter requesting for \$20,000 to purchase an Industrial Freezer and Refrigerator for our community chapter to hold food items an other perishable food items for community members

☐ document attached

(b) Explain how the Program or Project will benefit the Navajo Nation, Navajo communities, or the Navajo People:

This project will allow our chapter to store community healthy foods received from the community pantry to store and distribute to community members. We will have chapter staff and CHR deliver food items to our at risk community members.

☐ document attached

(c) Provide a prospective timeline showing the estimated date of completion of the Project and/or each phase of the Project. Disclose any challenges that may prevent you from incurring costs for all funding by December 31, 2024 and/or fully expending funds and completing the

Program(s) or Project(s) by December 31, 2026:

The Coyote Canyon Chapter will leverage the Junk Food Tax funds to also make purchases to provide healthy meals for our community constituents.

☐ document attached

(d) Identify who will be responsible for implementing the Program or Project:

Division of Community Development and the Coyote Canyon Chapter will monitor all chapter scholarship applications received to ensure all supporting documents will be submitted to support and adhere to the Coyote Canyon Chapter Scholarship Financial Policies and Procedures.

☐ document attached

(e) Explain who will be responsible for operations and maintenance costs for the Project once completed, and how such costs will be funded prospectively:

The Coyote Canyon Chapter will be responsible for O&M costs related to the industrial items.

☐ document attached

(f) State which of the 66 Fiscal Recovery Fund expenditure categories in the attached U.S. Department of the Treasury Appendix 1 listing the proposed Program or Project falls under, and explain the reason why:

Project 1: Public Health
1:12 Other Public Health Services

☐ document attached

Part 3. Additional documents.

List here all additional supporting documents attached to this FRF Expenditure Plan (or indicate N/A):

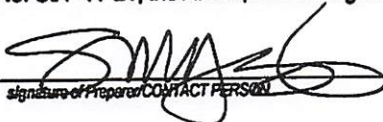
Navajo Nation OMB Forms

☐ Chapter Resolution attached

Part 4. Affirmation by Funding Recipient.

Funding Recipient affirms that its receipt of Fiscal Recovery Funds and the implementation of this FRF Expenditure Plan shall be in accordance with Resolution No. CJY-41-21, the ARPA, ARPA Regulations, and with all applicable federal and Navajo Nation laws, regulations, and policies:

Chapter's
Preparer:


signature of Preparer/CONTACT PERSON


Approved by:


signature of Chapter President (or Vice President)

Approved by:

signature of CSC

Approved by:


signature of Chapter ASO

Approved to submit
for Review:


signature of DCD Director

FY 2022

**THE NAVAJO NATION
PROGRAM BUDGET SUMMARY**

Page 1 of 4
BUDGET FORM 1

Refrigerator / Freezer Unit

PART I. Business Unit No.: NEW Program Title: Coyote Canyon Chapter Division/Branch: DCD/Executive Branch

Prepared By: Sherylene Yazzie Phone No.: 505-725-2623 Email Address: coyotecanyon@navajochapters.org

PART II. FUNDING SOURCE(S)	Fiscal Year /Term	Amount	% of Total	PART III. BUDGET SUMMARY	Fund Type Code	(A) NNC Approved Original Budget	(B) Proposed Budget	(C) Difference or Total
NN Fiscal Recovery Funds	10/1/21-9/30/26	20,000.00	100%	2001 Personnel Expenses				
				3000 Travel Expenses				
				3500 Meeting Expenses				
				4000 Supplies				-0
				5000 Lease and Rental				
				5500 Communications and Utilities				-0
				6000 Repairs and Maintenance				
				6500 Contractual Services				-0
				7000 Special Transactions				
				8000 Public Assistance				
				9000 Capital Outlay	16	—	20,000	20,000
				TOTAL			20,000.00	20,000
				PART IV. POSITIONS AND VEHICLES		(D)	(E)	
				Total # of Positions Budgeted:		0	0	
				Total # of Vehicles Budgeted:		0	2	
TOTAL:		\$20,000.00	100%					

PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.

SUBMITTED BY: Sherylene Yazzie, Chapter President APPROVED BY: Calvin Castillo, DCD Executive Director

Program Manager's Printed Name Division Director / Branch Chief's Printed Name

Program Manager's Signature and Date 3/15/2023

Division Director / Branch Chief's Signature and Date

3-16-23
James Adakai, Deputy Director

FY 2023THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIAPage 2 of 4
BUDGET FORM 2

PART I. PROGRAM INFORMATION:

Business Unit No.: NEW

Program Name/Title:

Purchase Chapter Industrial Ref. Unit, Freezer Unit

PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:

PART III. PROGRAM PERFORMANCE CRITERIA:

1. Goal Statement:

To Store Food for Emergency Purpose

Program Performance Measure/Objective:

Purchase Refridgeration / Freezer Unit

2. Goal Statement:

TO Hold perishable food items

Program Performance Measure/Objective:

Purchase Refridgeration / Freezer Unit

3. Goal Statement:

Program Performance Measure/Objective:

4. Goal Statement:

Program Performance Measure/Objective:

5. Goal Statement:

Program Performance Measure/Objective:

1st QTR		2nd QTR		3rd QTR		4th QTR	
Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.

Sherylene Yazzie, Chapter President

Program Manager's Printed Name

Program Manager's Signature and Date

James Adakai, Deputy Director

Calvin Castillo, Division Director

Division Director/Branch Chief's Printed Name

Division Director/Branch Chief's Signature and Date

3/15/2023

FY 2023

THE NAVAJO NATION DETAILED BUDGET AND JUSTIFICATION

Page 3 of 4
BUDGET FORM 4

[illegible]

**THE NAVAJO NATION
PROJECT BUDGET SCHEDULE**

Page ____ of ____
PROJECT FORM

PART I. Business Unit No.: <u>NEW</u> Project Title: <u>Purchase Chapter Industrial Refridgeration Unit/Freezer Unit - Coyote Canyon</u> Project Descrip Pur: <u>Used for road maintenance & Food/Supplies Deliveries</u> Check one box: <input checked="" type="checkbox"/> Original Budget <input type="checkbox"/> Budget Revision <input type="checkbox"/> Budget Reallocation <input type="checkbox"/> Budget Modification															PART II. Project Information Project Type: <u>Refridgeration/Freezer Unit</u> Planned Start Date: <u>10/1/2022</u> Planned End Date: <u>9/30/2025</u> Project Manager: <u>Sherylene Yazzie</u>																																																																																																																																																										
PART III. List Project Task separately; such as Plan, Design, Construct, Equip or Furnish.		PART IV. Use Fiscal Year (FY) Quarters to complete the information below. O = Oct.; N = Nov.; D = Dec., etc. <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <th colspan="12">FY <u>23</u></th> <th colspan="12">FY <u>24</u></th> <th colspan="6" rowspan="2">Expected Completion Date if project exceeds 8 FY Qtrs. Date <u>9/30/26</u></th> </tr> <tr> <th colspan="3">1st Qtr.</th> <th colspan="3">2nd Qtr.</th> <th colspan="3">3rd Qtr.</th> <th colspan="3">4th Qtr.</th> <th colspan="3">1st Qtr.</th> <th colspan="3">2nd Qtr.</th> <th colspan="3">3rd Qtr.</th> <th colspan="3">4th Qtr.</th> </tr> <tr> <td>O</td><td>N</td><td>D</td> <td>J</td><td>F</td><td>M</td> <td>A</td><td>M</td><td>J</td> <td>Jul</td><td>A</td><td>S</td> <td>O</td><td>N</td><td>D</td> <td>J</td><td>F</td><td>M</td> <td>A</td><td>M</td><td>J</td> <td>Jul</td><td>A</td><td>S</td> <td>O</td><td>N</td><td>D</td> <td>J</td><td>F</td><td>M</td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td>X</td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td>X</td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> </tr> </table>																								FY <u>23</u>												FY <u>24</u>												Expected Completion Date if project exceeds 8 FY Qtrs. Date <u>9/30/26</u>						1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.			1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.			O	N	D	J	F	M	A	M	J	Jul	A	S	O	N	D	J	F	M	A	M	J	Jul	A	S	O	N	D	J	F	M									X																														X																					
FY <u>23</u>												FY <u>24</u>												Expected Completion Date if project exceeds 8 FY Qtrs. Date <u>9/30/26</u>																																																																																																																																																	
1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.			1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.																																																																																																																																																				
O	N	D	J	F	M	A	M	J	Jul	A	S	O	N	D	J	F	M	A	M	J	Jul	A	S	O	N	D	J	F	M																																																																																																																																												
								X																																																																																																																																																																	
								X																																																																																																																																																																	
PART V. Expected Quarterly Expenditures		\$			\$			\$			\$			\$			\$			\$			\$			PROJECT TOTAL																																																																																																																																															
																										<u>29,000</u>																																																																																																																																															

FOR OMB USE ONLY: Resolution No: _____ FMIS Set Up Date: _____ Company No: _____ OMB Analyst: _____



COYOTE CANYON CHAPTER

The Navajo Nation

"Home of Chief Manuelito"



Nathan Notah
Council Delegate

Sherylene Yazzie
President

Evelyn Morris
Vice President

Sharon Warren
Secretary-Treasurer

Isaiah T. Tsosie
Grazing Officer

COY-23-03-041 COVID 19

SUPPORTING RESOLUTION OF COYOTE CANYON CHAPTER TO PURCHASE AND INDUSTRIAL REFRIGERATION UNIT AND A FREEZER UNIT IN THE AMOUNT OF \$ 20,000.00 DOLLARS AND THE FUNDS WILL BE IMPLEMENT THIS FRF EXPENDITURE PLAN IN COMPLIANCE WITH ARPA, ARPA REGULATIONS AND WITH ALL APPLICABLE FEDERAL AND NAVAJO NATION LAWS, REGULATIONS AND POLICIES.

WHEREAS

1. Pursuant to N.N.C. Title 26; Chapter 1, Section 3(A) under the Local Governance Act, Coyote Canyon Chapter is a certified local government entity of the Navajo Nation and codified at 11 N.N.C. Part 1 Section 10; and
2. Pursuant to Chapter 1, Section 1(B)(1) of the same "Act" Coyote Canyon is vested with the governmental authority with respect to local matters consistent with Navajo law, including custom and tradition; and
3. Pursuant to Chapter 1, Section 1(B)(2) of the same "Act" Coyote Canyon is vested with the governmental authority to make decisions over local matters and to govern with responsibility and accountability to the local citizens; and
4. The Coyote Canyon Chapter is accepting and approving to accept the current resolution to purchase an Industrial Refrigeration Unit Freezer Unit in the amount of \$20,000.00 Dollars from the FRF (Fiscal Recovery Funds); and
5. The Coyote Canyon Chapter affirms that the Chapter will only use awarded Fiscal Recovery funds and implement this FRF Expenditure Plan in compliance with the ARPA, ARPA Regulations and will all applicable federal and Navajo Nation Laws, Regulations and policies; and

NOW THEREFORE BE IT RESOLVED THAT:

1. Coyote Canyon Chapter hereby approves and accepts this foregoing resolution to approve and accept current resolution to Purchase and Industrial Refrigeration Unit, Freezer Unit in the amount of \$20,000.00 Dollars from the FRF (Fiscal Recovery Funds); and
2. The Coyote Canyon Chapter affirms that the Chapter will only use awarded Fiscal Recovery funds and implement this FRF Expenditure Plan in compliance with the ARPA, ARPA Regulations and will all applicable federal and Navajo Nation Laws, Regulations and policies
3. The Coyote Canyon Chapter Officials and Administration are hereby authorized and directed to act upon all essential chapter Administration duties and responsibilities to enact the purpose of this resolution.

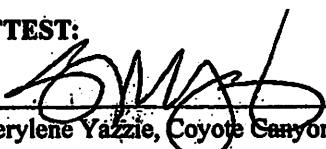
CERTIFICATION

WE HEREBY CERTIFY that the foregoing Resolution was duly considered by Coyote Canyon Chapter at a duly called chapter meeting at Coyote Canyon (Navajo Nation), New Mexico, at which a quorum was present, and the same was passed by a vote of 9 in favor, 0 opposed, 1 abstained, this 12th day of **March, 2023**.

MOTION: Isaiah Tsosie

SECOND: Albertine Wright

ATTEST:



Sherylene Yazzie, Coyote Canyon Chapter President



Sharon A. Warren, Coyote Canyon Chapter Secretary/Treasurer