



Shellfishermen Relief Fund Application

Name: _____

Phone number: _____

Email address: _____

Physical address: _____

Are you an aquaculturist or do you fish in the wild? _____

Do you lease a grant? If so, what is the name on your grant?

Do you work for someone who leases a grant, and if so, who?

Do you make the majority of your income from shellfishing?

Please list your most immediate financial needs:

Please provide the following information so we can better understand your financial need. Per IRS regulations, documentation of expenses or losses must be provided in order for our nonprofit to distribute funds:

- Proof of income generated from commercial shellfishing by submitting one or more of the following items:
 - Recent tax filing (W2, 1099, quarterly or 1040 filing)
 - Affidavit from employer
 - Catch reports
 - Self-employment profit/loss ledger
- Proof of specific expenses that you need help with, for example:
 - Health insurance or medical bill
 - Utility bill
 - Rent or mortgage payment
 - Loan payment

Submit this COMPLETED application and supplemental information to Wellfleet SPAT. Applications will be kept confidential and materials will not be returned. The information may be emailed to Michele@wellfleetspat.org, delivered to the SPAT office (second office on the left on the second floor of the Mooney building) or mailed to:

Wellfleet SPAT
P.O. Box 2156
Wellfleet, MA 02645

**Completed applications must be postmarked or delivered
no later than December 15 at 5:00 p.m.**

Funds will be distributed before Christmas.