LOST STIPEND CHECK / DIRECT I	DEPOSIT	IHS-856-9 (Rev. 2/08) FORM APPROVED: OMB Approval No. 0917-0006 Exp. Date: 2/28/2011 See Estimated Average Burden Time per Response on Reverse Side
IHS Division of Grants Operations Grants Scholarship Coordinator 801 Thompson Avenue - TMP Suite 120 Rockville, Maryland 20852		
Attention Grants/Financial Management:		
I did not receive my Electronic Transfer o month I believe th		
Please trace and reissue as soon as possib	le.	·
Name: Address:		
Telephone and/or Cell Phone Number: Social Security Number:		
	Signature (Do Not Print)	

IHS-856-9 (Rev. 2/08)

ESTIMATED AVERAGE BURDEN TIME PER RESPONSE

Public reporting burden for this collection of information is estimated to average 8 minutes per response including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Indian Health Service, OPHS/DHPS/Scholarships Branch, 801 Thompson Avenue, TMP Suite 450, Rockville, MD 20852, RE: PRA 0917-0006.