

FY2022 ONEIDA FINANCE FUND

The Oneida Finance Fund requests are reviewed by the Finance Committee once a month. The FY22 fiscal year for the Oneida Nation begins Oct 1, 2021 and ends Sept. 30, 2022. Funds are for Oneida enrolled members and covers the following categories: 1.) Self-Development; 2.) Community Events; and 3.) Fundraising Activities.

Included in this packet are the instructions for completing the form and the FY22 Request Form. Following is the Finance Committee Meeting calendar when the requests are reviewed.

FY22 FINANCE COMMITTEE MEETINGS to review Oneida Finance Fund Requests

Request Due Date:	FC Meeting Dates:
Sept. 27, 2021	Oct. 4, 2021
Oct. 25, 2021	Nov. 1, 2021
Nov. 22, 2021	Nov. 29, 2022 (for Dec.)
Dec. 27, 2021	Jan. 3, 2022
Jan. 24, 2022	Jan. 31, 2022 (for Feb.)
Feb. 21, 2022	Feb. 28, 2022 (for Mar.)
Mar. 28, 2022	Apr. 4, 2022
Apr. 25, 2022	May 2, 2022
May 23, 2022	May 30, 2022 (for Jun.)
Jun. 28, 2022 (Tues.)	Jul. 5, 2022 (Tues.)
Jul. 25, 2022	Aug. 1, 2022
Aug. 30, 2022 (Tues.)	Sept. 6, 2022 (Tues.)

All regularly scheduled meetings are subject to change per the Office of the Treasurer and the Finance Committee. Contact the Finance Office at (820) 869-4325 for questions or to check on specific meeting times.

All Oneida Finance Fund requests are *due by noon* on the request due dates listed above. All incomplete requests will be sent back to the requester to complete. It is advised that all completed requests are received at least six weeks before actual event to ensure a timely review and processing of the request.

Note: No requests will be accepted/reviewed in FY2022 if the requester had received a previous request in FY2021 and did not submit the required follow-up report. Individual requests are limited to one request per person/per year, up to \$500. Group requests are limited to one request per group/per year, up to \$750.

FY22 -ONEIDA FINANCE FUND Request Form Instructions

Please print legibly using Black Ink.

1. Print name of person making the request (only a parent or legal guardian can make request for any minor children)
2. Provide complete home address of person making request
3. Provide E-Mail address of person making request (required as all communication about your request will be conveyed to you through your e-mail)
4. Provide best contact number to reach requester and check if home or cell phone number
5. Provide Social Security Number and Oneida Enrollment number of requestor (If request is for yourself, provide copy of Oneida I.D.) **NOTE:** If returning requester simply write **On File**
6. Provide reason for request (i.e. gymnastics classes; registration fees for child, Oneida fundraising event for group, sports registration, etc.)
7. Provide start and end date of activity /event.
8. The date the funds are needed. (Please ensure your request has been submitted well before the FC review date as it does take several weeks for processing)
9. Provide the total amount of need pertaining to request (this would be the total cost of paying for everything on your own; the requested amount, and the 10% match amount.
10. Check the category type and attach flyers, brochures, payment schedules, registrations, receipts and budget with your request
11. If request is on behalf of minor child include child's name and Oneida enrollment number (Provide copy of enrollment-required; If returning requester simply write **On File**)
12. Provide other sources /organizations /agencies you have contacted regarding this request and what were the results? (All denial letters from other programs must accompany this request)
13. Fully describe the reason for this request and the benefit to the Oneida Community/members.
14. If a check is to go to a 3rd party vendor, provide all information including name of business, EIN number, contact person at business, phone of contact person and the complete mailing address of vendor.
15. Signature of person making the request (required)

Along with the request form include on a separate sheet of paper receipts & provide budget of all expenses associated with this request. When completed please e-mail the Oneida Finance Fund form and all backup in one PDF to: FAO@oneidanation.org or mail request to:

Finance Administration
Attn: Oneida Finance Fund
P.O. Box 365
Oneida, WI 54155

Note: All incomplete applications will be returned without review. No request will be reviewed if a previous request in FY21 was awarded and no required follow up report provided. No personal information provided will be made public without the expressed written permission of the requester. *Individual requests are limited to one request per person/per year, up to \$500. Group requests are limited to one request per group/per year, up to \$750. No equipment requests will be reviewed.*



ONEIDA FINANCE FUND

FY22 FUNDS REQUEST FORM

REQUESTER'S NAME: _____ Date of Request: _____

ADDRESS: _____
City State Zip

E-MAIL ADDRESS: _____
Required

BEST NUMBER FOR CONTACT: _____ CHECK ONE: HOME: _____ CELL PHONE: _____

SOCIAL SECURITY # _____ ONEIDA ENROLLMENT # _____

REASON FOR REQUEST: _____

(Briefly describe)

START & END DATES OF EVENT/ACTIVITY: _____ DATE FUNDS NEEDED: _____

TOTAL COST: \$ _____ REQUEST AMT.: \$ _____ REQUESTER AMT.: _____
(10% match required)

Individual requests are limited to one request per person/per year, up to \$500. Group requests are limited to one request per group/per year, up to \$750.

TYPE OF REQUEST: COMMUNITY EVENT _____ FUND-RAISING _____ SELF-DEVELOPMENT _____

If Request is made on behalf of minor child provide name and tribal enrollment number here:

List other sources /organizations /agencies you have contacted regarding this request.

Describe the reason for this request and benefit to the Oneida Community/citizens.

→ If Funds are to be paid to a Third Party, provide complete information here:

NAME OF VENDOR: _____ EIN # _____

CONTACT NAME: _____ CONTACT'S PHONE # _____

VENDOR ADDRESS: _____

SIGNATURE OF REQUESTOR: _____ DATE: _____

REQUIRED

NOTICE: No Funding request will be reviewed for any event/activity that has already occurred by request review date. The Oneida Finance Fund does not supplement tribal program budgets, or cover personal, household, travel, education, or professional/work expenses to individuals, this includes exercise equipment requests. This fund also does not provide duplicate funding for service already received or could be received under another program.

For Office Use Only

Date Received: _____ Date for FC Review: _____ Year of Review: FY22

Quarter of Review: _____ Request Number: OFF #22- _____

Office Follow-Up: _____

9321 OFF form/funds