



## FY2025 Donation Requests from the Oneida Nation

The Oneida Nation and the Finance Committee provide this Donation Packet for your reference/use. The Finance Committee has a limited amount of funds for distribution to organizations that directly serve the Oneida people and Community. The FC has designated that all donation requests from the following groups can be accepted for review:

1. Not-for-Profit Charitable Groups
2. External Entities utilizing The Oneida Hotel

Requestors who represent a qualified 501(c)(3) organization and are seeking donations may complete a Donation Request Form specifying the nature of request. This should include a budget; what request will cover; how funds will be used; date needed; and a copy of organization's non-profit status.

The maximum amount a group can request for Fiscal Year 2025 (Oct. 1, 2024 through September 30, 2025) is \$3,000. Requests are reviewed by the Finance Committee on a first come, first served basis at their second meeting of each month. Enclosed in this packet is the submission/review calendar, instructions, and request form.

Please contact the Finance Administration Office at 920.869.4325 if you have any further questions or e-mail your questions to [FAO@oneidanation.org](mailto:FAO@oneidanation.org). Thank you for your interest in a donation from the Oneida Nation.

Sincerely,  
*Oneida Finance Committee,*  
**ONEIDA NATION**

## INSTRUCTIONS FOR COMPLETING THE DONATION REQUEST FORM

### PART 1. - CONTACT INFORMATION:

- Legal name of group must be clearly spelled out
- Name and title of requester, business telephone and e-mail
- A physical address of the group must be provided (not a PO BOX number)
- Groups are required to provide a copy of their Federal Identification Number (EIN)

#### Donation Request Summary:

- Provide one sentence of what the funds being requested will be used for
- Include date(s) of event and date funds are needed

#### Financial Information:

- Total dollar amount being requested and total amount of the cost for the event

#### Requestor Authorization:

- The requester who is authorized to request funds/services on behalf of the group/organization; to provide information as to how group is related to the Oneida Nation's philosophy and mission.
- Requester printed name and signature are required to complete the form.

### PART 2. - REQUEST NARRATIVE:

The requester narrative asks for information about the requesting group; other activities related to fundraising for event; and how event/activity directly benefits Oneida tribal members and or the Oneida Nation.

#### **ADDITIONAL INFORMATION REQUIRED**

- Provide flyers /pamphlets /brochures or other written information about the Requester's agency and or organization including current event/activity.
- Provide budget related to this request.
- Provide latest annual financial statement of agency and or organization.
- Attach documentation from other sources related to this request. For example, any letters of reference, letters of funding or denials.
- Provide copy of group/organization's 501(c)(3) non-profit status.

# FY2025

## Finance Committee Meeting Dates for Donation Requests

\*REQUEST DUE DATE:

October 16, 2024

November 13, 2024

December 11, 2024

January 15, 2025

February 19, 2025

March 19, 2025

April 16, 2025

May 21, 2025

June 18, 2025

July 16, 2025

August 20, 2025

September 17, 2025

FC MEETING DATE:

October 24, 2024

November 21, 2024

December 19, 2024

January 23, 2025

February 27, 2025

March 27, 2025

April 24, 2025

May 29, 2025

June 26, 2025

July 24, 2025

August 28, 2025

September 25, 2025

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\* All completed Donation Requests are to be received by 4:30PM of the due date.  
Please E-Mail request in one in PDF document to: [FAO@onedanation.org](mailto:FAO@onedanation.org).

**Please Note:** All Donation Requests must be received by the FC for review at least Six Weeks before actual event/need. All information on the Request Form must be filled out completely or the request will be returned to sender to complete which could further delay review. The check for all approved donation requests will be made out to the group not to individuals.



## FY2025 DONATION REQUEST FORM

Date of Application: \_\_\_\_\_ This is a request for:  Donation  Special Event  Sponsorship

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### CONTACT INFORMATION

Legal name of the organization according to the IRS [as it appears on most recent 501(c)(3)] \_\_\_\_\_ Federal I.D. # \_\_\_\_\_

Requester's Name / Title \_\_\_\_\_ Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_

Address of Organization \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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### DONATION REQUEST SUMMARY

Brief one-sentence purpose and or description \_\_\_\_\_

Date of Event /Activity: \_\_\_\_\_ Date Funds Needed: \_\_\_\_/\_\_\_\_/\_\_\_\_

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### FINANCIAL INFORMATION

Total Dollar Amount being requested: \$ \_\_\_\_\_

Total Amount of Event: \$ \_\_\_\_\_

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### REQUESTER AUTHORIZATION

Affiliation of Requester to the Oneida Nation \_\_\_\_\_

Printed Name of Authorized Requester \_\_\_\_\_

Signature \_\_\_\_\_

## Part 2 – REQUEST NARRATIVE

Date of Application: \_\_\_\_\_ Name of Requester: \_\_\_\_\_

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Please include in a few sentences the following information:

The Organization of the Requestor. Include a brief summary of the history of the organization, its goals, activities, mission, accomplishments and current challenges.

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What other sources /organizations /agencies were contacted regarding this request and the results?

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Describe the direct benefit of this request to the Oneida Community and Tribal Members:

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*\*FOR OFFICE USE ONLY\**

Date Received: \_\_\_\_\_ FC Review Date: \_\_\_\_\_

Donation Type:  Donation  Special Event  Sponsorship

Quarter of Review: 1 2 3 4 Request Number: DONA#25-\_\_\_\_\_