FY2027 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 2027 (Oct. 1, 2026, through September 30, 2027) 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.

It is a requirement for the requester or delegate be present during this meeting to help answer any questions the Finance Committee may have. A Teams link can be sent if unable to attend in person. Please be sure to provide a good email address if a link is needed.

Please contact the Finance Administration Office at 920.869.4491 if you have any further questions or e-mail your questions to FAO@oneidanation.org. Thank you for your interest in a donation from the Oneida Nation.

Respectfully,

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)
- It is now a requirement for the Requester or delegate to be present. A Teams link can be sent if needed.

Donation Request Summary:

- Provide a brief summary of the specific program, project, activity, or event for which funding is being requested.
- Include date(s) of the program, project, activity, or event and the date funding is needed.

Financial Information:

- Total dollar amount being requested and total amount of the cost for the event
- A required matching contribution of 10% from the group for specific event/project must be clearly explained (provide receipts as necessary)

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; include information on 10% matching contribution from agency and or organization.
- 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.

FY2027
Finance Committee Meeting Dates
for Donation Requests

*REQUEST DUE DATE:	FC MEETING DATE:
October 21, 2026	October 29, 2026
November 10, 2026	November 19, 2026
December 9, 2026	December 17, 2026
January 18, 2027	January 28, 2027
February 15, 2027	February 25, 2027
March 15, 2027	March 25, 2027
April 12, 2027	April 22, 2027
May 17, 2027	May 27, 2027
June 14, 2027	June 24, 2027
July 12, 2027	July 22, 2027
August 16, 2027	August 26, 2027
September 13, 2027	September 23, 2027

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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@oneidanation.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.

FY2027 DONATION REQUEST FORM

Date of Application: _____ This is a request for: ☐ Donation ☐ Special Event ☐ Sponsorship

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

It is now a requirement for the Requester or delegate to be present during the meeting.
To help answer any questions the Finance Committee may have.

Will you be present for the meeting: Yes ☐ No ☐ If unable to attend in person, please provide an email address for the Teams link:

_____

Norbert Hill Center
N7210 Seminary Rd
Oneida, WI 54155
BC Conf. Room – 2nd floor at 8:30 AM

DONATION REQUEST SUMMARY

Brief one-sentence purpose and or description:

Date of Event /Activity: _____ Date Funds Needed: _____/_____/_____

FINANCIAL INFORMATION

Total Dollar Amount being requested: $_____

Total Amount of Event: $_____

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: _____

Please include in a few sentences for 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.

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

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

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Date Received: _____ FC Review Date: _____

Donation Type: ____ Donation ____ Special Event ____Sponsorship

Quarter of Review: 1 2 3 4 Request Number: DONA#27-_____