

SAC and FOX NEWS

Nemishâtênemo êhthâkiwiyâni



Phone: 918-968-3526 • 920963 S. Hwy. 99, Bldg. A • Stroud, OK 74079 • Vol. 44 • No. 5 • May 2022

Families Attend Easter Celebration on Tribal Grounds



Junior Miss Sac and Fox Nation Tribal Princess Breanna Butler and a crew of helpers scattered hundreds of Easter eggs for children to gather during the 2022 Easter Egg Hunt and Celebration hosted April 9 by the Sac and Fox Nation Activity Committee. (All Photos by Mike Brown)



Kids Enjoy Easter Bunnies and Celebration

Families and tribal members of all ages attended an Easter egg hunt hosted April 9 by the Sac and Fox Nation Activity Committee. In addition to a special visit by Mr. and Mrs. Easter Bunny, the family-fun included food, games, contests and prizes. A few of the dozens of children in attendance during the 11 a.m. to 2 p.m. event are shown above with the Easter bunnies in the Sac and Fox Nation Community Building. (Photo by Mike Brown)



Plenty of crayons and coloring materials were provided for youngsters to enjoy during the Easter celebration headquartered in the Sac and Fox Nation Community Building. Children were also invited to participate in Easter bonnet and Easter egg decorating contests.



Some of the crew members who helped prepare hamburgers, hotdogs and all the trimmings for the Easter celebration lunch are shown busy in the kitchen during the April 9 Event.

Camp Clean-Up Notice

In preparation for Pow-Wow, there are three camp clean-up days: **The weekends of April 9, May 7 and June 18, 2022.** Please have trash ready for pickup by the roadway and, larger items please mark with an X so we know to go into the camp for disposal. If you have limbs around your camp, please pick them up so we can mow around the campsite.

Sac and Fox Nation 'Victory Day' is a Time to Recognize Strength, Resilience

by Juaquin Hamilton
Historical Researcher
Sac and Fox Nation of
Oklahoma

May 17th marks the national holiday, "Victory Day" for the Sac and Fox Nation. Victory Day was declared after the Sac and Fox Nation had sued the State of Oklahoma for failing to recognize the motor vehicle titles and tags issued by our tribe.

With a Native American legal team, including the late Bill Rice, the late Truman Carter and Greg Bigler, the case made it through all levels of the court system in our favor. The final decision by the Supreme Court was unanimous 9-0, siding with the Sac and Fox Nation. It acknowledged that the State of Oklahoma would not impose income taxes or motor vehicle taxes on Sac and Fox Nation tribal members.

Thereafter, the State of Oklahoma was to recognize the tags and titles issued to our tribal members. The Sac and Fox Nation was victorious for these reasons. However, Victory Day comes about for more reasons than that. This victory was only possible because of the tribal members who took it upon themselves to gain the education needed to break the cycles our tribe was stuck in for generations.

In our history with the U.S. Government, the Sac and Fox people were made to believe that we had lost our sovereignty. We were told that all of our matters were matters for the Bureau of Indian Affairs to dictate for us because we were not living on a reservation. They told us we had no governing authority over our own people. These things we were made to believe were never confirmed.

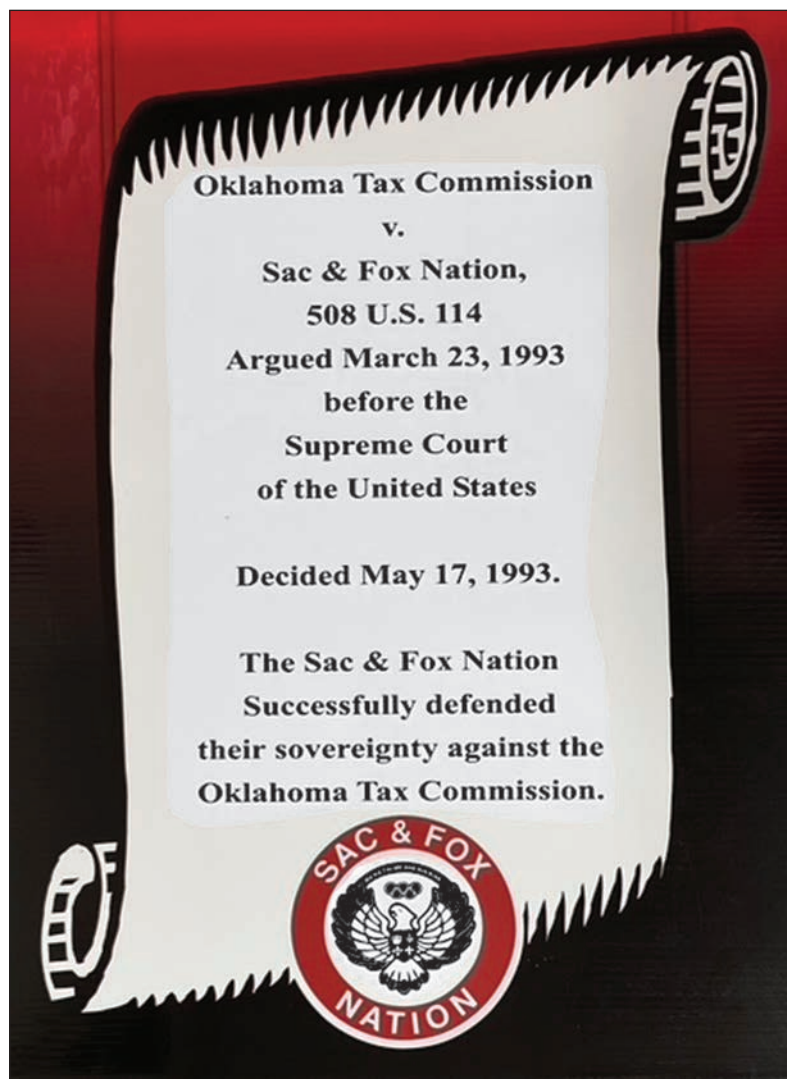
It was in 1980 when our people acted to change that for good.

More than Winning The Supreme Court Case

Our council of that time took it upon themselves to commit to this fight for all of us: Principal Chief John R. Thorpe; Second Chief Gaylon R. Franklin, Sr.; Secretary/Treasurer Hazel Williamson; Committee Member Henrietta Massey; Committee Member Thomas Morris Jr.; and, Committee Member Alvin Falls.

In 1982, our Council enacted new taxation laws that allowed the tribe to tax oil, gas, sales, tobacco, and earnings. These actions taken by our council

paved the way for other tribes to follow suit. Victory Day for the Sac and Fox Nation is more than winning the Supreme Court case. May 17th is a Sac and Fox Holiday that acknowledges we have always had the power to govern according to our own laws. It is acknowledging that we are our own nation. Sac and Fox Victory Day is set to remind us of our sovereignty. It is a day to recognize our strength and resilience.



Sac and Fox News

The Sac & Fox News is the monthly publication of the Sac & Fox Nation, located on SH 99, six miles south of Stroud, OK.

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Stroud, OK 74079
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The Sac & Fox News is the official publication of the Sac and Fox Nation. Our mission is to meet all tribal members information needs concerning the Nation.

The Sac & Fox News is mailed free, one per address, to enrolled Sac and Fox tribal members. Paid subscriptions are available for \$12.00 annually.

Editorial statements, guest columns, and letters to the editor published in this newspaper contain the opinions of the writers. These opinions do not necessarily reflect the opinions of the Sac and Fox News staff or any elected official or department of tribal government or administration.

The Sac and Fox News reserves the right to refuse publication of letters to the editor. All editorials and letters to the editor become the property of the Sac and Fox News.

Submissions for publication must be signed by the author and include an address and contact phone number. They are limited to 300 words. The staff will not edit editorials or letters to the editor to fit the 300-word limit.

Deadline for the June issue is:
Friday, May 20 at 4:30 p.m.

Reprint permission is granted, with proper credit to the Sac and Fox News, unless other copyrights are shown. Articles and letters may be submitted to the newspaper either by mail or Fax to the address provided above, - or by e-mail: newspaper@sacandfoxnation-nsn.gov.

Address corrections & changes are accepted by The Business Committee at the address listed below.

Managing Editor
Mike Brown

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Member of
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Assn - Since 1988
Member OPA
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**Stroud, OK 74079**  
Visit us on the webb @  
sacandfoxnation.com  
click news

Church, School  
Added to National  
Historic Register

The Oklahoma Historical Society, State Historic Preservation Office (SHPO) has announced the National Register of Historic Places designation for the following properties in Oklahoma. The National Register of Historic Places is the nation’s official list of properties significant in our past.

Oklahoma County  
First Unitarian Church of Oklahoma  
City, 60 N W 18 h St., Oklahoma City

First Unitarian Church of Oklahoma City was listed in the National Register of Historic Places under Criterion C at the local level of significance for Architecture. Constructed in 1929, with additions completed in 198 and 1974 First Unitarian Church is an excellent local example of a religious building designed in the Colonial Revival architectural style. Original building sections, including the sanctuary and Daniel Hall, were designed by the firm Smith and Walker of Boston, Mass. These sections retain much of their original layout and historic features, including multi-light arched windows and a prominent copper-clad spire. Subsequent additions reflect mid-century interpretations of the Colonial Revival style and completed the building’s unique , U-shaped footprint around an elevated open courtyard. The overall design and construction of First Unitarian Church reflects the evolution of the congregation’s community outreach and education programs. The property remains a community landmark symbolizing downtown Oklahoma City’s historic development.

Seminole County  
Seminole High School, 61 North Timmons St., Seminole

Seminole High School, located in Seminole, Seminole County, was listed in the National Register of Historic Places at the local level of significance for its association with Community Planning

(Continued on Page 3)

Happy May Birthday Elders!

Bertha Lynn Brown-Hill  
Joseph Virgil McCreless  
Rona Kay Goodeagle  
Paula Iris Winlock  
Christi Lorena Dutro  
David Glenn West  
Judy K. Stephens  
Vada Rose Meek  
Bobbie L. Shaw  
Byron Keith Wakole  
Melva Ladawn York  
Clifton Wade Papn  
Edgar Thomas Butler  
Marietta Reynolds  
Letha Dawn Leaderchase  
Ronald M. Bemo  
Michael John Pimley  
Odell M. Dowd  
Cecil Dewayne Littlehead  
Mary Sue Truitt  
Robin Gaye Brown  
Ricky Dean Brice  
Traci Alene Smith  
Sonja Renee Hanson  
Jeffrey Wayne Rumbaugh  
Myra Kaye Bohannon  
Monty Eli Tasier  
Cathleen Dolores Mikulski  
Theresa Sue Ferguson  
James Lee Goniwicha  
Debra Elaine Wakole  
Michael David Gibbs  
Billie F. Berry  
Randall Keith Tigert  
Neecy Twinem  
Elizabeth Denise Natseway  
Barbara Ladon Hale  
Peg Ann Dixon  
Francis Leroy Grant  
Robert David Chaney  
Monica Lee Lenzini  
Pauline Sue Webb  
Katherine Sue Higgin  
Rosalyn G. Clinkenbeard



Glennister Charles Brown  
Tonya Lisa Lizarraga  
Patricia Ann Holland  
William Cliff Jones  
Gwendolyn J. Smith  
Elvita Louise Jefferson  
Jeffrey Alan Whipple  
Alden Gene Blanchard  
Gloria Gay Williams  
Bertha Lynn Brown  
Joy Ellen Walklin  
Patricia R. Yarbrough  
Veronica Marie Hilbrink  
Edward L. O'Brien  
Reginald Ashley  
Duke Anthony Henthorn  
Genevieve Marie Barber  
Teri Denise Ellis  
William Francis Thornton  
Anita Marie Zein  
Frankie Charles Carter  
Debora Camille Steiner  
Janna Dee Haynes  
Carla Delain Torres  
Elizabeth Ann Macias  
Jimmy C. Henthorn  
Larry William Dowd  
Carmelia Ketcher  
Rebecca Jeanne French  
Edward Lenfesti Safford  
Rebecca Ann Martinez  
Sheryl Ann Russell  
Sammy Lee Bass  
Katie L. Wood  
Stephanie Michelle Kramer  
Tracey Dawn Romine  
Rebecca Lea Dean  
Edward Abraham Longhore  
Ida Louise Parish  
Barbara Jane Harshberger  
Timothy H. Dean  
Monty Bass  
Judy Anita Baggett



2022-2023

Sr. Man & Sr. Woman Nominations

Nomination deadline: May 20th, 2022

I, \_\_\_\_\_, Roll No. \_\_\_\_\_ hereby nominate the following

Man: \_\_\_\_\_. He should be the Sac & Fox Nation Sr. Man because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, Roll No. \_\_\_\_\_ hereby nominate the following

Woman: \_\_\_\_\_. She should be the Sac & Fox Nation Sr. Woman

because: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mail nomination to: Activity Committee  
920963 S. Hwy. 99  
Stroud, OK 74079

OR E-mail nomination to: carrieladeaux@gmail.com



Mr. Easter Bunny is pictured with shawls, crowns and boxes presented to tribal princesses during the Sac and Fox Nation Activity Committee Easter Celebration held April 9 in the Community Building. (Photos by Mike Brown)

## U. S. Dept. of Interior to Hold Nation-to-Nation Consultations

The U. S. Department of the Interior’s Office of the Assistant Secretary for Indian Affairs on March 29 announced that it will hold nation-to-nation consultations with Tribes on draft amendments to two different regulations, one regarding the fee-to-trust process and one regarding Class III gaming compacts. The potential changes to these separate regulations aim to address concerns about their clarity, efficiency, and cost. Tribal leaders were notified of upcoming consultations in a letter from Assistant Secretary for Indian Affairs Bryan Newland.

“The changes we are exploring represent progress towards good governance and follow-through on the Biden-Harris administration’s commitments to Indian Country,” said Assistant Secretary Bryan Newland. “We understand the importance of ensuring a timely and efficient process for taking land into trust and providing clarity on Class III gaming compact negotiations. We look forward to additional feedback from Tribes on how to further improve these proposed amendments.”

Taking land into trust on behalf of Tribes is critical for Tribal sovereignty, self-determination, preservation of history and culture, economic development, well-being of Tribal citizens, and to help right the wrongs of past policy. The changes being considered to 25 C.F.R. Part 151 would lead to a more efficient, less cumbersome, and less expensive fee-to-trust process by clarifying the Secretary of the Interior’s authority to take land in trust for Tribes, reducing processing time, and establishing clear decision-making criteria. The proposed amendments also place an express focus on taking land into trust for conservation purposes.

The proposed changes would build on action taken by Secretary of the Interior Deb Haaland in her first month in office to improve land in trust process. In April 2021, Secretary Haaland issued Secretary’s Order #0, which re-delegates the authority to review and approve applications to place land into trust to the Bureau of Indian Affairs regional directors. The action reversed steps taken in 2017 that unnecessarily elevated land-into-trust decisions to the Department’s head-

quarters staff, increasing the complexity of the decision-making process and causing delays. The proposed amendments were also developed in response to nation-to-nation consultations on tribal homelands restoration held in October 2021.

The Indian gaming industry remains one of the most significant sources of Tribal economic development in Indian Country. The changes being considered to 25 C.F.R. Part 293, which governs the review and approval of tribal-state gaming compacts, would provide clarity on the criteria the Department would consider when deciding whether to approve these compacts by clarifying boundaries as to allowable topics of negotiation, better defining key terms, and clearly outlining when the Department must review a gaming compact.

The Department will conduct four virtual consultation sessions between May 9 and May 23. While these regulations are not directly connected to one another, the Department is holding consultations on these changes at the same time to maximize convenience for Tribal leaders.



Activity Committee volunteers Carrie LaDeaux, right, and Yannah Frazier are shown using new grills to prepare hamburgers and hotdogs for the dozens of families attending the 2022 Easter Egg Hunt and Celebration.



### Shawnee Trophy Company

A Sac and Fox Nation LLC

Trophies, Business Products, Personalized Gifts, and More

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Fax: 405-273-0519 [www.shawnee-trophy.com](http://www.shawnee-trophy.com)  
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## National Historic Register

(Continued From Page 2)

and Development, Education and Architecture. The property is significant for community planning and development as a tangible product of the City Beautiful Movement in Seminole. Construction of a new, expansive high school building that was modern in every respect provided for an expanded curriculum, including a junior college, making the property significant for education. Seminole High School is also architecturally significant as an exemplary local example of a pre-New Deal, Art Deco-styled school building designed by prominent Oklahoma architect Josephus Overton (J. O.) Parr. The period of significance extends from 190 to 190. In addition to the three-story school building, an expansive front lawn, metal flagpole and stone retaining wall all contribute to the property’s historic significance.

Listing in the National Register of Historic Places is an honorific designation that provides recognition, limited protection and, in some cases, financial incentives for these important properties. The SHPO identifies, evaluates and nominates properties for this special designation.

# MEMORIAL DAY GOURD DANCE



## SAC & FOX VETERANS HONOR GUARD



# MAY 28, 2022

SFN COMMUNITY BLDG - 5.5M SOUTH OF STROUD - HWY 99

### HEAD STAFF

|                       |                        |
|-----------------------|------------------------|
| MASTER OF CEREMONIES: | R.G. HARRIS            |
| HEAD SINGER:          | MIKE DEER (ARMY)       |
| HEAD GOURD DANCER:    | ROBERT TABOR (ARMY)    |
| ARENA DIRECTOR:       | JAIME CERVANTES (NAVY) |

### GOURD DANCE PROGRAM

|         |              |
|---------|--------------|
| 2:00 PM | GOURD DANCE  |
| 6:00 PM | SUPPER BREAK |
| 7:00 PM | GOURD DANCE  |

*Everybody Welcome!!!*

FOR MORE INFO CONTACT RICKY CLINE, SERVICE OFFICER: [VETERANS@SACANDFOXNATION-NSN.GOV](mailto:veterans@sacandfoxnation-nsn.gov)

Sac and Fox Nation Education Department News

by Edwina Butler-Wolfe

We hope that everyone is enjoying the fine weather that we are having. Just to give an update on the VISA Cards for the RAP Clothing/School Supply. We have made an agreement with the Citizen Bank of Ada to start the process of our account with them. The cards will be available to issue out when we start accepting RAP Clothing/School Supply Applications on July 1, 2022.

If you received funding for 2021-2022 school year and DID NOT TURN IN YOUR CLOTHING RECEIPTS, YOU WILL NOT BE ELIGIBLE TO SUBMIT APPLICATION IN JULY 2022.

This next school year 2022-2023, the clothing allowance will be \$300.00 and \$100.00 for school supply per student. You will still need to fill out RAP Clothing/School Supply application and have your school sign for verification of enrollment. We will not be asking for a W-9 form BUT YOU WILL NEED TO SEND IN STUDENT(S) COPY OF TRIBAL MEMBERSHIP CARD.

You will receive two different cards for clothing and school supply. When you receive your VISA cards in the mail PLEASE READ THE INSTRUCTIONS. If you lose your cards there will be a \$5.00 fee per card for the first time and will be deduct from either clothing or supply, whichever card is lost. If the second card you lose then it will be a \$10.00 fee per card and you will have to pay out of pocket. You will have until December 30th to use all funds on both cards. More details to come next month.

The Education Department has been

very busy attending Every Student Succeeds Act (ESSA) Consultations at various public school locations. We have met with Stillwater, Cushing, Tecumseh, Shawnee, McLoud and Tulsa Public Schools.

The Education Department and Health Department both setup booths at the Native American Student Day on April 1. The event was at the PayCom Center downtown Oklahoma City. There were 31 booths and 1,000 students that attended. This was the 2nd annual event. The Education Department Booth was raffling off three laptops. Students that came by the booth had to answer a 10 question survey in order to earn a raffle ticket.

Questions were as listed: How many federally recognized tribes are in Oklahoma? Can you name 5 of the Federally recognized tribes in Oklahoma? How many federally recognized are in the United States? Can you name 5 current tribal leaders in Oklahoma? Who is the Governor of Oklahoma? How many counties are in Oklahoma? Name the 5 Tribes (5 Civilized Tribes)? How many stars are on the United States Flag?

Questions were geared towards what we thought our American Indian Students should be aware of in our current state of affairs with the United States and amongst tribal government. The turnout was large and majority of the students successfully completed the entire questionnaire. Winners of the laptops: Chris Johnson, Navajo from Will Rogers School, Tulsa, Oklahoma, Kristlyn Hinton-Slavin, Citizen Potawatomi Nation,

North Rock Creek School, and Henry Mitchell, Cherokee Nation from Thoreau Demonstration Academy, Tulsa, Oklahoma.

The Scholarship winners for the Jim Thorpe and Blackhawk Leadership Award were present at the last hockey game in Chicago on April 10, 2022. Each winner received a Blackhawk Hockey Jersey and recognized at the hockey game and with an interview they did during the game.

NOTICE COLLEGE STUDENTS STUDENTS WHO PLAN TO AT-

TEND COLLEGE FALL OF 2022, DEADLINE FOR ALL RAP AND DOI APPLICATIONS NEED TO BE SUBMIT BY JUNE 30, 2022. ANY APPLICATIONS AND DOCUMENTS AFTER JUNE 30 WILL BE CONSIDERED NOT MEETING THE DEADLINE.


If you have any concerns or questions please let us know in the Education Department.

Thank you,  
Edwina Butler-Wolfe  
Director of Education



Pictured from left on their visit in Chicago are scholarship recipients Payton Rice, Katrina Garcia and Ethan Patton. (Photo Submitted)

| SAC AND FOX TAX COMMISSION |              |
|----------------------------|--------------|
| REVENUE                    |              |
| July 2021                  |              |
| Beer and Liquor.....       | \$200.07     |
| State Tobacco Rebate.....  | \$298,432.28 |
| Motor Vehicle.....         | \$9,593.47   |
| Sales Tax.....             | \$15,826.74  |
| Treasury.....              | \$940.00     |
| Oil and Gas.....           | \$0.00       |
| Gaming.....                | \$201,019.28 |
| TOTAL.....                 | \$526,011.84 |



INTEREST TO SERVE  
ON  
COMMITTEES, COMMISSIONS, AND BOARDS

The Sac and Fox Nation’s Business Committee will appoint people to fill vacancies, as they occur on various Committees, Commissions and Boards. If you are a tribal member 18 years of age or older, and wish to serve, please complete the information below and return the completed form to the Tribal Secretary.

NAME: \_\_\_\_\_

ROLL NUMBER: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

• **SAUK BUSINESS ENTERPRISES BOARD**

Purpose is to provide sources of revenue, remedy the underemployment rate of tribal members, attract diversified business enterprises and expand the Nation’s land base and economic development potential. The board is composed of a Chairman, Vice-Chairman, and Member. The term of office shall be for three (3) years, and staggered. A board member may be a member or non-member of the Sac and Fox Nation and shall be at least twenty-one (21) years of age and legally capable of entering into a binding contract. Must be able to pass background check for Gaming License.

Vacancies: Position #1 and Position #2

Please submit Interest to Serve forms with Resume to:

Secretary, Lana Butler  
Business Committee  
Sac and Fox Nation  
920883 S. Hwy 99, Bldg. A  
Stroud, Ok 74079  
secretary@sacandfoxnation-nsn.gov




Winners of the laptops pictured clockwise from left at the Thunder Arena in Oklahoma City are: Chris Johnson, Navajo from Will Rogers School, Tulsa, Oklahoma, Kristlyn Hinton-Slavin, Citizen Potawatomi Nation, North Rock Creek School, and Henry Mitchell, Cherokee Nation from Thoreau Demonstration Academy, Tulsa, Oklahoma. Pictured with the students is Sac and Fox Nation Education Specialist Justin Morris. (Photos Provided)

Save - the - Date

06.10.22

Save the date for the  
2022-2023 Sac & Fox Nation Tribal  
Princess Pageant


Sac & Fox Nation Community Bldg. Stroud, OK



# TAKE OUR NEEDS ASSESSMENT SURVEY!

DATA COLLECTED WILL BE USED TO ASSIST THE HOUSING AUTHORITY IN DETERMINING IF THERE IS A NEED FOR ELDER HOUSING, THE IDENTIFIED AREA FOR ELDER LIVING UNITS AND TO GUIDE THE HOUSING AUTHORITY WITH THE DEVELOPMENT OF NEW UNITS IN IDENTIFIED LOCATIONS.

SURVEYS CAN BE OBTAINED BY ONE OF THE FOLLOWING:  
-CALLING THE OFFICE AT (405)275-8200  
-VIA A LINK ON THE NATION'S FACEBOOK PAGE  
-BY VISITING OUR WEBSITE AT WWW.SACANDFOXHA.COM



SAC AND FOX NATION  
920963 S. Hwy. 99, Building A • Stroud, OK 74079 • (918) 968-1141 • FAX (918) 968-1142

NAME CHANGE  
AND/OR  
CHANGE OF ADDRESS FORM

NAME

PRINT CURRENT FULL NAME (First, Middle & Last)ROLL NUMBER

SIGNATUREDATE

A COPY OF THE LEGAL DOCUMENT CHANGING YOUR NAME AND A COPY OF YOUR NEW SOCIAL SECURITY CARD MUST BE ATTACHED.

PLEASE LIST PREVIOUS NAME (PRINT)DATE OF BIRTH

MAILING ADDRESS

OLDNEW

ADDRESSADDRESS

CITYSTATEZIPCITYSTATEZIP

STREET ADDRESS (IF DIFFERENT THAN MAILING ADDRESS)

OLDNEW

STREET ADDRESSSTREET ADDRESS

CITYSTATEZIPCITYSTATEZIP

CHANGE OF ADDRESS FOR MINORS REQUIRE A W-9 FORM BE COMPLETED FOR THE BANK. PLEASE REQUEST A FORM FOR EACH CHILD FROM THE ENROLLMENT DEPARTMENT, 918-968-3526 ext. 1040 or 1041.

TO BE COMPLETED BY THE ENROLLMENT DEPARTMENT

Date Electronic File Was UpdatedDate Sac and Fox News Was NotifiedStaff Initials

NOTICE

A W-9 form is not needed for Per Capita Payments unless you have a name change, new address, you are a newly-enrolled tribal member or, if required, for RAP applications.

↓ W-9 FORM MUST BE CUT ON DOTTED LINE BEFORE MAILING ↓



Free help

Oklahoma Tobacco Helpline  
1 800 QUIT NOW  
784-8669 OKhelpline.com

Business Committee Meeting Minutes are now accessible on the Website [sacandfoxnation-nsn.gov](http://sacandfoxnation-nsn.gov) and Facebook

Sac and Fox  
Nation Telephone  
Extensions  
Main Number:  
918-968-3526

- Chief - 1004
- Second Chief - 1008
- Treasurer - 1006
- Secretary - 1007
- Committee Member - 1005
- BC Front Desk - 1009
- Tax - 1043-1045
- Accounting - 1030-1036
- Property and Procurement - 1020-1039-1022
- Maintenance - 2063
- BHHc - 918-968-9531
- ICW - 1711
- Court - 2039
- Library - 2020-2021
- Language - 1075
- JUVI - 4000
- USDA - 2077 (WIC 2079)-2080-2081-2082 (Warehouse USDA 2089)
- Education - 2046
- IT - 2041
- Police - 2033
- Self-Governance - 1080
- Capitol Security - 1090
- Realty - 1052
- Enrollment - 1040-1041
- RAP - 2000 - 2001
- Social Services - 2010-2011
- OES - 2091-2092-2094
- Veterans - 1065
- Newspaper - 1060
- Tribal Administrator - 1010
- NAGPRA/Historic Preservation - 1070
- ARPA - 1819

Form W-9  
(Rev. October 2018)  
Department of the Treasury  
Internal Revenue Service

Request for Taxpayer  
Identification Number and Certification  
Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Give Form to the  
requester. Do not  
send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.  
☐ Individual/sole proprietor or single-member LLC  
☐ C Corporation  
☐ S Corporation  
☐ Partnership  
☐ Trust/estate  
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ☐  
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  
☐ Other (see instructions) ☐

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
Exempt payee code (if any)   
Exemption from FATCA reporting code (if any)   
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

6 City, state, and ZIP code

7 List account number(s) here (optional)

Requester's name and address (optional)  
SAC AND FOX NATION  
920883 S. HIGHWAY 99 BLDG. "A"  
STROUD, OKLAHOMA, 74079

Part I Taxpayer Identification Number (TIN)  
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN, later.  
Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Number To Give the Requester for guidelines on whose number to enter.

Social security number  
or  
Employer identification number


Part II Certification  
Under penalties of perjury, I certify that:  
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and  
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and  
3. I am a U.S. citizen or other U.S. person (defined below); and  
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.  
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here  
Signature of U.S. person  
Date

General Instructions  
Section references are to the Internal Revenue Code unless otherwise noted.  
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).  
Purpose of Form  
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.  
• Form 1099-INT (interest earned or paid)  
• Form 1099-DIV (dividends, including those from stocks or mutual funds)  
• Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)  
• Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)  
• Form 1099-S (proceeds from real estate transactions)  
• Form 1099-K (merchant card and third party network transactions)  
• Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)  
• Form 1099-C (canceled debt)  
• Form 1099-A (acquisition or abandonment of secured property)  
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.  
If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Cat. No. 10231X

Form W-9 (Rev. 10-2018)



SAC AND FOX NATION

920963 S Hwy. 99 • Stroud, Oklahoma 74079 • (918) 968-1141 • FAX (918) 968-1142

ENROLLMENT PACKET

PLEASE COMPLETE AND ATTACH ALL REQUESTED DOCUMENTS

1.

SAC AND FOX NATION MEMBERSHIP CRITERIA: Identify the section of the Sac and Fox Constitution under which the applicant claims a right to membership per Article I – Membership of Tribe.” Please check only one blank.

2.

APPLICATION FOR ENROLLMENT: Please furnish as much information as possible on this portion, sign and date. Attach any legal guardianship papers.

3.

CERTIFIED BIRTH CERTIFICATE: A certified birth certificate has an embossed seal of the State in which the applicant was born and the signature of the State Registrar. A photo copy "IS NOT" acceptable. The certificate should indicate the name of the applicant. THIS CERTIFIED BIRTH CERTIFICATE WILL BE RETURNED once all documentation is verified by the Enrollment Department. A copy of the birth certificate will become a part of the official records of the Sac and Fox Nation. If the name on the application differs from the BIRTH NAME, please provide documentation of name change with the application, i.e. Marriage License, Adoption Papers.

4.

SOCIAL SECURITY CARD: Please provide a copy of the applicant's card. Name on Birth Certificate, Social Security Card and Application must match.

5.

ANCESTRAL INFORMATION: This guides the researcher in verifying ancestral information and any Indian Blood degree. Please include maiden names if they are known.

6.

AFFIDAVIT: Please complete, sign and date. This affidavit must be signed by a Notary Public before it is accepted by this office.

RETURN TO:

SAC AND FOX NATION  
Enrollment Department  
920883 S. Hwy. 99  
Stroud, OK, 74079

SAC AND FOX NATION MEMBERSHIP CRITERIA

IDENTIFY THE SECTION OF THE SAC AND FOX CONSTITUTION UNDER WHICH THE APPLICANT CLAIMS A RIGHT TO MEMBERSHIP PER ARTICLE I - MEMBERSHIP OF TRIBE (Per SFN Code of Laws Title 24. Tribal Enrollment and Membership Act, Chapter 3 – Enrollment, Section 301):

Please check only one blank.

SECTION 1. All enrolled persons who names appear on the official Tribal Roll as of the date of the ratification of this constitution.

SECTION 2. All persons of one-eight (1/8) or more degree of total combined Sac and Fox Indian blood at least one of whose parents is a member of the Sac and Fox Nation.

SECTION 3. All persons now living and eligible for membership under Article I of the Constitution of the Sac and Fox Nation as amended August 26, 1967.

a. All enrolled persons who names appear on the official census roll of the tribe as of January 1, 1937, and who were living on that date.

b. Each child born since the date of the said roll and prior to the effective date of Amendment I (October 16, 1954) each of whose parents was a member of the tribe.



c. Each child of Sac and Fox Indian blood born prior to the effective date of Amendment I (October 16,1954) of a marriage between a member of the tribe and any other person, if such child is admitted to membership by the council.

d. Each child who is of one-eighth or more Sac and Fox Indian blood born on or after October 16, 1954, each of whose parents is a member of the tribe.

e. Persons born after date of October 16, 1954, who possess one-eighth (1/8) or more Sac and Fox Indian blood, \* at least one parent is a member of the Sac and Fox Nation, shall be entitled to membership with the Sac and Fox Nation, provided an application is submitted in writing to the Sac and Fox Nation and provided that such person,\* if enrolled with another tribe, shall first file a conditional relinquishment with the other tribe.

f. Persons making application for membership shall be entitled to file application under Section 3 (c) only two times, and if rejected both times, they shall not be entitled to further consideration under 3 (c).

\*Having been duly ratified and approved,proposed Amendment A is hereby designated as Amendment No. VII to the Constitution of the Sac and Fox Nation.



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The Sac and Fox Nation Chapel

Is Now Open

The First and Third Sundays of Each Month

Everyone is Welcome!

Time: 10:30 a.m.

Pastor Paul Wolf

“Come and Praise the Lord”

920621 S. Hwy. 99

Stroud, Okla.

APPLICATION FOR ENROLLMENT

1. Name of Applicant:

2. Other names used (Maiden, Alias, etc.):

Indian Name: Clan: Meaning:

3. Date of Birth: 4. Social Security Number  
(PLEASE INCLUDE A COPY OF SOCIAL SECURITY CARD)

5. Address: (Street) (City) (State) (Zip)

6. Phone Numbers: Home Work Cell

7. Degree of Sac and Fox Blood: 8. Degree of other Indian blood:

9. Have you ever been denied by the General Council? ( ) NO ( ) YES  
Date(s):

10. Are you currently enrolled with another Tribe? ( ) NO ( ) YES  
a. If YES, name of the Tribe and Name by which you are known on that roll:  
(Please include copy of Conditional Relinquishment from that tribe.)

11. Name and Roll number of Parent(s) on the Sac and Fox of Oklahoma roll:

12. APPLICANT: To certify your desire to become a member of the Sac and Fox Nation, please sign below.

SIGNATURE OF APPLICANT/PARENT/LEGAL GUARDIAN  
(Please attach supporting legal documents)

DATE

TRACE ANCESTRY TO SAC AND FOX ANCESTOR ON BASIC ROLL

PLEASE COMPLETE THE WHOLE SHEET AND USE "N/A" FOR "NOT APPLICABLE" WHERE APPROPRIATE

FATHER of Applicant:

Sac and Fox blood degree: Roll Number:

Other Indian blood degree: Tribe(s):

Enrolled with another tribe: ( ) NO ( ) YES If YES, name and address of Tribal Office:

FATHER'S FATHER: TRIBE(S):

FATHER'S MOTHER: TRIBE(S):

FATHER'S PATERNAL GRANDFATHER: TRIBE(S):

FATHER'S PATERNAL GRANDMOTHER: TRIBE(S):

FATHER'S MATERNAL GRANDFATHER: TRIBE(S):

FATHER'S MATERNAL GRANDMOTHER: TRIBE(S):

FATHER'S PATERNAL GREAT-GRANDFATHER: TRIBE(S):

FATHER'S PATERNAL GREAT-GRANDMOTHER: TRIBE(S):

FATHER'S MATERNAL GREAT-GRANDFATHER: TRIBE(S):

FATHER'S MATERNAL GREAT-GRANDMOTHER: TRIBE(S):

MOTHER of Applicant:

Sac and Fox blood degree: Roll Number:

Other Indian blood degree: Tribe(s):

Enrolled with another tribe: ( ) NO ( ) YES If YES, name and address of Tribal Office:

MOTHER'S FATHER: TRIBE(S):

MOTHER'S MOTHER: TRIBE(S):

MOTHER'S PATERNAL-GRANDFATHER: TRIBE(S):

MOTHER'S PATERNAL-GRANDMOTHER: TRIBE(S):

MOTHER'S MATERNAL-GRANDFATHER: TRIBE(S):

MOTHER'S MATERNAL-GRANDMOTHER: TRIBE(S):

MOTHER'S PATERNAL GREAT-GRANDFATHER: TRIBE(S):

MOTHER'S PATERNAL GREAT-GRANDMOTHER: TRIBE(S):

MOTHER'S MATERNAL GREAT-GRANDFATHER: TRIBE(S):

MOTHER'S MATERNAL GREAT-GRANDMOTHER: TRIBE(S):

AFFIDAVIT

County of }  
State of }

I, , of lawful age, being first sworn upon oath  
(Name of Applicant/Parent (Biological)/Legal Guardian)

deposes and states:

That , for whom this application is made,  
(Applicant's Name)

(check one) ☐ is or ☐ is not an adopted child  
a direct descendant by blood of a member  
of the Sac and Fox Nation.

(check one) ☐ is or ☐ is not an adopted child

ON BEHALF OF A MINOR:

I further state that I am the (check appropriate box):  
( ) parent (Biological)  
( ) legal guardian

of (child's name) and I am vested with the authority to  
make and submit the above and foregoing application to the Sac and Fox Nation and all information  
provided and furnished by me in this application is true and correct.

In executing the foregoing application, I am fully aware that the provisions in Sec. 1001, Title 18,  
U.S.C., provide for a fine or not more than \$10,000 or imprisonment for not more than five years or  
both, for making false or fraudulent statements in connection with any matter within the jurisdiction  
of any Department or Agency of the United States.

DATE: NAME:  
SIGNATURE OF APPLICANT/PARENT (BIOLOGICAL)/LEGAL  
GUARDIAN

Subscribed and sworn to before me this day of , 20.

NOTARY PUBLIC'S PRINTED NAME NOTARY PUBLIC SIGNATURE

MY COMMISSION EXPIRES: Seal:

What Are the Warning Signs of Elder Abuse?

The most common warning signs of elder abuse are strange and sudden changes to an elderly loved one’s mental, physical, or financial well-being. Specific signs of elder abuse vary depending on what type of elder abuse is affecting the victim. Signs and symptoms of elder abuse can include:

- Injuries such as bruises, cuts, or broken bones
- Malnourishment or weight loss
- Poor hygiene
- Symptoms of anxiety, depression, or confusion
- Unexplained transactions or loss of money
- Withdrawal from family members or friends

To prevent elder abuse, family members should keep a close watch on older loved ones under the care of someone else. Relatives should also report any signs of elder abuse to local authorities as soon as possible.

Risk Factors for Elder Abuse

While any older person can suffer from elder abuse, some run a greater risk of abuse or neglect than others. Risk factors for elder abuse include:

- Age: Adults over the age of 80 are more likely to suffer from elder abuse, according to a 2014 medical study from Northwestern University and Rush University researchers.
- Caregiver: A caregiver who lives with the elder, depends on them for financial support, abuses drugs, or has a criminal background may be more likely to commit abuse.
- Gender: The 2014 Chicago study found that women were more likely to suffer from elder abuse. Women may also suffer from more severe types of abuse over longer periods of time, according to the World Health Organization (WHO).
- Health: This includes poor physical health and mental health issues such as dementia. According to the National Council on Aging (NCOA), nearly 50% of those with dementia suffer from elder abuse and neglect.
- Isolation: According to a 2015 report from the Department of Health and Human Services (DHS), nearly 13 million older people in the U.S. lived alone. Elders who live by themselves or who are withdrawn may be at risk of abuse, according to the NCOA.

Signs of Elder Abuse by Type

The signs of elder abuse can vary with each case, and some seniors may fall victim to more than one type of abuse. Since any type of elder abuse can affect a parent, grandparent, or other relatives, it is important to know the warning signs for each type.

Physical Signs of Elder Abuse

Physical abuse is the most obvious type of elder abuse. Loved ones should regularly check up on their older family members and use their best judgment in cases of physical injury. Sometimes, caregivers or nursing home staff members may claim that something else caused the injuries to cover up the abuse.

Signs of Emotional Abuse

While it may not leave physical scars, emotional abuse can be just as damaging to an older relative’s health. Emotional abuse can include screaming, threatening, or instilling fear in an elderly loved one. Signs of emotional elder abuse include:

- Being hesitant to talk freely
- Isolating or withdrawing from others
- Making up implausible stories about how an injury occurred
- Suffering from anxiety, anger, depression, or fear

As a senior transition into the care of someone else, family members should take note of their emotional well-being. If the elder’s happiness and overall mood decrease in a concerning way, emotional abuse could be the cause.

Signs of Financial Abuse

Unlike the other types of abuse, financial abuse can go unnoticed because the senior’s physical and emotional health won’t be directly affected. Yet financial abuse can leave elders unable to afford even the most basic health care needs. Common signs of financial abuse include:

- Large sums of money missing from bank statements
- The senior cannot access their financial records
- The elder provides gifts or monetary reimbursement in exchange for companionship
- Strange or unexplainable transactions

A trusted financial expert or family member should monitor the elderly person’s accounts and ask about any concerning transactions, if possible. If the senior cannot explain the loss of funds, they may be a victim of financial abuse.

Signs of Sexual Abuse

Some seniors, such as those with mental or physical handicaps, may not be able to consent to sexual relationships. If an elder is sexually abused, their physical and emotional health can suffer significantly. Sexual abuse can also devastate loved ones and family members. Signs of sexual abuse of an elder include:

- An unexplained sexually transmitted disease (STD)
- Bruises on the thighs or genitals
- Bleeding, pain, or irritation of the genitals
- Inappropriate relationships between a caregiver and elder

Family members should promptly address any possible cases of sexual abuse to keep their parents, grandparents, or other elderly relatives safe.

Warning Signs of Neglect

While the signs of elder abuse and neglect are similar, the latter often stems from inadequate care, not intentional harm. That said, neglect can be just as harmful to an elderly loved one’s health, particularly if the health issues go on for months. Signs of neglecting an elder include:

- Bedsores or pressure ulcers
- Being left in bed for an extended period of time without supervision or care
- Lack of basic hygiene, adequate food, or hydration
- Missing medical aids, such as walkers, dentures, eyeglasses, medications, or hearing aids
- Unclean or unsafe living conditions, such as a lack of heat or plumbing, soiled bedding, or bug infestations

Signs of Abusive Caregivers

Trusted family members should always keep a close watch on those providing care to their elderly parents, grandparents, and other relatives. Sometimes, the first signs of elder abuse stem from caregivers. Possible signs of abusive caregivers include:

- Being indifferent, angry, demeaning, or aggressive toward the elderly person
- Failing to show affection toward the senior (if they are related)

Signs of Abusive Caregivers Continued

- Giving conflicting explanations of physical injuries
- Having a history of mental illness, substance abuse, family violence, or criminal behavior
- Keeping the elderly person from talking to visitors alone
- Speaking about the elder as if they were a burden
- Using flirtatious or inappropriate language around the elder

Signs of Elder Abuse and Neglect? Take Action Today

- Never brush off possible signs of elder abuse. Your parents, grandparents, and other elderly relatives do not deserve to suffer. If you suspect your loved one is in danger, report it. Call 911 immediately to address any urgent concerns.
- Another way to report suspected abuse is to connect with your local Adult Protective Services agency. To find the reporting number for your state, call the Eldercare Locator at 1-800-677-1116.
- To learn more about the signs of elder abuse and next steps you can take, get a free case review today. We can recommend important medical and legal resources to help your loved ones.



Free help

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|----------|-----|----------------|
| 1        | 800 | QUIT NOW       |
| 784-8669 |     | OKhelpline.com |






**ARE YOU PARTICIPATING IN WALK FOR WEAAD?**

Build a national elder justice movement, through movement!

Walk for WEAAD begins **May 1st**, on the first day of Older Americans Month, and runs through **June 15th**, WEAAD.

Register & create your profile on [weaad.walkertracker.com](http://weaad.walkertracker.com)!

EACH YEAR, THOUSANDS OF ADULT OKLAHOMANS SUFFER ABUSE, NEGLECT AND EXPLOITATION BY FAMILY MEMBERS AND OTHER CAREGIVERS.




There's no excuse for abuse!

We Help Vulnerable Adults.

Many victims are frail and vulnerable, cannot help themselves and depend on others to meet their basic needs. Physical, behavioral and environmental signs, or signs of financial irregularities, are **WARNING SIGNS** of possible abuse or neglect. They are not proof, but they are clues that a problem may exist.

**MAKE THE CALL**  
**1-800-522-3511**



Foster and Adoptive Homes Needed

You can make a Difference.

Contact the Indian Child Welfare department to

learn how you can make a Difference



For more information, please contact:  
Karen Hamilton or Nethia Wallace  
Shawnee Multi-Purpose Building  
405-275-1262

Business Committee Meeting Minutes

Please be advised that the following are official actions taken by the Business Committee in a Special Business Committee meeting held on March 22, 2022. These actions are to be followed up by the appropriate departments.

- 1) Lana J. Butler motion to approve of Regular Business Committee meeting minutes dated March 8, 2022. Carla J. Wallace-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion
- 2) **Resolution SF-22-98a**, a resolution approving and authorizing Justin F. Wood, Principal Chief, and Carla J. Wallace, Treasurer, to have temporary signature authority for the Sac and Fox Nation Casino Bank Accounts at BancFirst. Robert E. Williamson-motion. Lana J. Butler-2<sup>nd</sup>. Vote: Justin-Yes, Don-Yes, Lana-Yes, Carla-Abstain, Robert-Yes. Motion carried.
- 3) **Resolution SF-22-99**, a resolution approving the Department of the Interior CARES ACT Education Department Budget in the total funding amount of Seven Thousand Eight Hundred Twenty-Two Dollars (\$7,822.00). The funding source is identified as the Fiscal Year 2020 US Department of the Interior Funding Agreement, one-time distribution of CARES Act funds. Carla J. Wallace-motion. Lana J. Butler-2<sup>nd</sup>. Vote: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 4) **Resolution SF-22-100**, a resolution Sac and Fox Nation Business Committee to authorize and approve the Fiscal Year 2022 Tribal Transportation Program Agreement between the Sac and Fox Nation and the United States Department of the Interior Bureau of Indian Affairs. Carla J. Wallace-motion. Don W. Abney-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 5) Don W. Abney motion to approve the United States Department of the Interior Bureau of Indian Affairs Consent of Owners for Grant of Right-of-Way Renewal (Enbridge Pipelines (Ozark), L.L.C.). Robert E. Williamson-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 6) Carla J. Wallace motion to approve the Indirect Cost Proposal for Fiscal Year 2023 for the Sac and Fox Nation to be prepared by Falmouth Institute. Lana J. Butler-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 7) Carla J. Wallace motion to approve an agreement with the Citizen Bank of Ada for Student School Supplies/Clothing. Robert E. Williamson-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 8) **Resolution SF-22-101**, a resolution approving the Fiscal Year 2022 Elders Advisory Board Budget in the total amount of Nine Thousand One Hundred Twenty-Eight Dollars (\$9,128.00). The funding source is identified as fund-raising activities. Carla J. Wallace-motion. Don W. Abney-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Absent. Motion carried.
- 9) **Resolution SF-22-102**, a resolution approving the Oklahoma Department of Libraries (ODL) American Rescue Plan Act (ARPA) Library budget in the total amount of Four Thousand Nine Hundred Eighty-Seven Dollars (\$4,987.00). The funding source is identified as the Oklahoma Department of Libraries (ARPA) Contract No. F-22-212. Don W. Abney-motion. Lana J. Butler -2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Absent. Motion carried.
- 10) **Resolution SF-22-103**, a resolution approving the Fiscal Year 2022 Revenue Allocation Plan Lawn Care Budget in the total funding amount of Seventy Thousand Dollars (\$70,000.00). The funding source is identified as the Fiscal Year 2022 Governing Council Resolution SF/GC-22-07. Robert E. Williamson-motion. Carla J. Wallace-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 11) **Resolution SF-22-104**, a resolution approving the American Rescue Plan Act (ARPA) Food Distribution Operations Budget in the total funding amount of One Hundred Nineteen Thousand Forty Dollars (\$119,040.00). The funding source is identified as the American Rescue Plan Act Treasury Appropriations. Carla J. Wallace-motion. Lana J. Butler-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 12) Carla J. Wallace motion to approve to rescind the Tribal Emergency Water Repair (T.E.W.R) Assistance for 401 N. McKinley Ave., Shawnee, OK. 74801 in the amount of Two Thousand One Hundred Thirty Dollars (\$2,130.00). Issues with Vendor regarding other T.E.W.R projects. Robert E. Williamson-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 13) Carla J. Wallace motion to approve the Tribal Emergency Water Repair (T.E.W.R) Assistance for 401 N. McKinley Ave., Shawnee, OK. 74801 in the amount of Nine Thousand Eight Hundred Seventy-Nine Dollars (\$9,879.00). Don W. Abney-2nd. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 14) Lana J. Butler motion to approve to rescind the Tribal Emergency Water Repair (T.E.W.R.) Assistance for 409 Butler, Shawnee, OK. 74804 in the amount of Four Thousand Nine Hundred Forty Dollars and Seventy-Five Cents (\$4,940.75). Tribal Member to upgrade the previous estimate. Don W. Abney-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 15) Robert E. Williamson motion to approve the Tribal Emergency Water Repair (T.E.W.R.) Assistance for 409 Butler, Shawnee, OK. 74804 in the amount of Six Thousand Three Hundred Sixty-Two Dollars and Fifty-Five Cents (\$6,362.55). Carla J. Wallace-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 16) Don W. Abney motion to approve the Tribal Emergency Water Repair (T.E.W.R.) Assistance for 353122 E. 850 Rd., Stroud, OK. 74079 in the amount of Nine Thousand Eight Hundred Twenty-Five Dollars (\$9,825.00). Robert E. Williamson-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 17) **Resolution SF-22-105**, a resolution approving and authorizing the submission of an application to the United States Department of Justice Office on Violence Against Women for Fiscal Year 2022 Rural Domestic Violence, Dating Violence, Sexual Assault and Stalking Program. Don W. Abney-motion. Carla J. Wallace-2nd. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 18) **Resolution SF-22-106**, a resolution approving and authorizing the submission of an application to the United States Department of Justice Office on Violence Against Women for Fiscal Year 2022 Transitional Housing Assistance Grants for Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking Program. Don W. Abney-motion. Carla J. Wallace-2nd. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 19) Robert E. Williamson motion to approve two (2) Sac and Fox Nation Rodeo Committee Interest to Serve requests. Don W. Abney-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 20) Carla J. Wallace motion to approve and reappoint Lottie Coody to Position #2 for the Sac and Fox Nation Gaming Commission Interest to Serve request. Robert E. Williamson-2<sup>nd</sup>. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 21) Lana J. Butler motion to approve the following Local/Government Donations: Cushing Public School Title VI-Native American Education \$1801.42 for the total amount of One Thousand Eight Hundred One Dollars Forty-Two Cents (\$1801.42). Carla J. Wallace-2nd. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.
- 22) Carla J. Wallace motion to approve the following Charitable Donations: National Fire Safety Council, Inc. \$1,000.00, The American Indian Alumni Society of the University of Oklahoma \$800.00 for a total amount of One Thousand Eight Hundred Dollars (\$1,800.00). Robert E. Williamson-2nd. VOTE: Justin-Yes, Don-Yes, Lana-Yes, Carla-Yes, Robert-Yes. Motion carried.

SAVE THE DATE



57TH ANNUAL

SAC & FOX NATION

POWWOW

(Covid guidelines)

Free admission, open to the public

July 7-10, 2022

Jim Thorpe Memorial Park Sac and Fox Nation

5.5 miles south of Stroud, OK

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FOR NATIVE AMERICAN LITERATURE

FIRST MEETING: MAY 2, 2022

12:00-12:50

FEEL FREE TO BRING YOUR LUNCH

FIRST BOOK: BOARDING SCHOOL

BLUES: REVISITING AMERICAN INDIAN EDUCATION EXPERIENCES

(AVAILABLE TO CHECK OUT)

SAC AND FOX NATION

FOOD SOVEREIGNTY

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LOOKING FOR

TEAM

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IMPROVEMENT AND LAND MANAGEMENT

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OR YOU CAN SUBMIT INQUIRIES VIA FACEBOOK TO THE

SAC AND FOX NATION REALTY DEPARTMENT PAGE

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784-8669 OKhelpline.com



As an Easter Bunny (Zane Talton) looks on, Employee Committee officer Anthony Ramirez prepares to draw the name of a lucky winner in one of the prize drawings conducted during Easter festivities and lunch hosted April 14 by the committee on tribal grounds. (All Photos by Mike Brown)

Employee Committee Easter Festivities



Some of those attending the Easter festivities are off and running in one of the egg hunts conducted April 14 by the Employee Committee.



Wendi Mahtapene is pictured in action during egg toss competition held during the Easter festivities.




Joyce Miller enjoys decorating Easter eggs during the festivities hosted by the Employee Committee.



Employee Committee volunteers Dustin Rolette, right, and Tim Leetka make preparations for the sandwich lunch made available to those attending the Easter egg hunt and festivities hosted April 14 by the committee.

RAP Department Application Forms



SAC AND FOX NATION  
RAP ASSISTANCE APPLICATION  
EMERGENCY APPLIANCE

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: 920963 S. Hwy 99  
Stroud, OK 74079  
RAP APP  
Form#2011-01  
BC Approved on  
04/20/2021

NAME \_\_\_\_\_ PHONE# ( \_\_\_\_\_ ) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY# xxx-xx-( \_\_\_\_\_ ) SFN ROLL# \_\_\_\_\_

**Sac and Fox Nation tribal membership will be verified by the Sac and Fox Nation RAP Department**

Please List Statement of Need: \_\_\_\_\_  
\_\_\_\_\_

**Please Provide the Following:**

(3) Estimates from appliance vendor with a manager’s signature and the Tribal member’s name clearly stated.

**\*\*NOTE\*\***

Upon approval of your application and should you have a balance due, you have ONLY ten (10) business days to pay the remaining balance.

**CLIENT’S STATEMENT OF RIGHTS AND RESPONSIBILITIES**

**I hereby authorize the Sac and Fox Nation RAP Department to make any necessary inquiries relating to my account’s which the RAP Department may be considering making payment on my behalf.** I understand that I have the right to a hearing of any action of the Sac and Fox Nation, which I consider improper, and also any unreasonable delay in decision. (Request for fair hearings may be made in writing to the Business Committee of the Sac and Fox Nation, 920963 S. Hwy. 99 Stroud, OK 74079) I understand that any person who knowingly, willfully and fraudulently provides false information for the purpose of obtaining benefits which he/she is otherwise ineligible to receive; may be subject to prosecution to the fullest extent to the appropriate Tribal statutes.

DATE \_\_\_\_\_ SIGNATURE OF APPLICANT OR GUARDIAN \_\_\_\_\_ GUARDIAN FOR \_\_\_\_\_

PERSON ASSISTING WITH APPLICATION \_\_\_\_\_ RELATIONSHIP TO APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_ RAP SPECIALIST \_\_\_\_\_

RAP Department Application Forms



SAC AND FOX NATION  
RAP ASSISTANCE APPLICATION  
DENTAL

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: 920963 S. Hwy 99  
Stroud, OK 74079  
RAP APP  
Form#2011-01  
BC Approved on  
10/06/2020

NAME \_\_\_\_\_ PHONE# ( \_\_\_\_\_ ) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY# xxx-xx-( \_\_\_\_\_ ) SFN ROLL# \_\_\_\_\_

Sac and Fox Nation tribal membership will be verified by the Sac and Fox Nation RAP Department

Please List Statement of Need: \_\_\_\_\_

\_\_\_\_\_

**\*\*NOTE\*\***  
You must receive an award letter **PRIOR** to receiving any Health services requested above. If you receive services prior to an award letter being issued, you are responsible for the charges.

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|            |                                          |                                 |
|------------|------------------------------------------|---------------------------------|
| DATE _____ | SIGNATURE OF APPLICANT OR GUARDIAN _____ | GUARDIAN FOR _____              |
|            | PERSON ASSISTING WITH APPLICATION _____  | RELATIONSHIP TO APPLICANT _____ |
| DATE _____ | RAP SPECIALIST _____                     |                                 |



SAC AND FOX NATION  
RAP ASSISTANCE APPLICATION  
VISION

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: 920963 S. Hwy 99  
Stroud, OK 74079  
RAP APP  
Form#2011-01  
BC Approved on  
10/06/2020

NAME \_\_\_\_\_ PHONE# ( \_\_\_\_\_ ) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY# xxx-xx-( \_\_\_\_\_ ) SFN ROLL# \_\_\_\_\_

Sac and Fox Nation tribal membership will be verified by the Sac and Fox Nation RAP Department

Please List Statement of Need: \_\_\_\_\_

\_\_\_\_\_


**\*\*NOTE\*\***  
You must receive an award letter **PRIOR** to receiving any Health services requested above. If you receive services prior to an award letter being issued, you are responsible for the charges.

CLIENT’S STATEMENT OF RIGHTS AND RESPONSIBILITIES

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|            |                                          |                                 |
|------------|------------------------------------------|---------------------------------|
| DATE _____ | SIGNATURE OF APPLICANT OR GUARDIAN _____ | GUARDIAN FOR _____              |
|            | PERSON ASSISTING WITH APPLICATION _____  | RELATIONSHIP TO APPLICANT _____ |
| DATE _____ | RAP SPECIALIST _____                     |                                 |

RAP Department Application Forms



SAC AND FOX NATION  
RAP ASSISTANCE APPLICATION

DENTURES

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: 920963 S. Hwy 99  
Stroud, OK 74079  
RAP APP  
Form#2011-01  
BC Approved on  
10/06/2020

NAME\_\_\_\_\_PHONE# (\_\_\_\_\_)\_\_\_\_\_

ADDRESS\_\_\_\_\_

CITY\_\_\_\_\_STATE\_\_\_\_\_ZIP CODE\_\_\_\_\_

BIRTHDATE\_\_\_/\_\_\_/\_\_\_SOCIAL SECURITY# xxx-xx-(\_\_\_\_\_)SFN ROLL#\_\_\_\_\_

Sac and Fox Nation tribal membership will be verified by the Sac and Fox Nation RAP Department

Please List Statement of Need:\_\_\_\_\_

\_\_\_\_\_

\*\*NOTE\*\*

You must receive an award letter **PRIOR** to receiving any Health services requested above. If you receive services prior to an award letter being issued, you are responsible for the charges.


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I hereby authorize the Sac and Fox Nation RAP Department to make any necessary inquiries relating to my account’s which the RAP Department may be considering making payment on my behalf. I understand that I have the right to a hearing of any action of the Sac and Fox Nation, which I consider improper, and also any unreasonable delay in decision. (Request for fair hearings may be made in writing to the Business Committee of the Sac and Fox Nation, 920963 S. Hwy. 99 Stroud, OK 74079) I understand that any person who knowingly, willfully and fraudulently provides false information for the purpose of obtaining benefits which he/she is otherwise ineligible to receive; may be subject to prosecution to the fullest extent to the appropriate Tribal statutes.

DATE\_\_\_\_\_SIGNATURE OF APPLICANT OR GUARDIAN\_\_\_\_\_GUARDIAN FOR\_\_\_\_\_

PERSON ASSISTING WITH APPLICATION\_\_\_\_\_RELATIONSHIP TO APPLICANT\_\_\_\_\_

DATE\_\_\_\_\_RAP SPECIALIST\_\_\_\_\_



SAC AND FOX NATION  
RAP ASSISTANCE APPLICATION

ORTHODONTIC

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: 920963 S. Hwy 99  
Stroud, OK 74079  
RAP APP  
Form#2011-01  
BC Approved on  
10/06/2020

NAME\_\_\_\_\_PHONE# (\_\_\_\_\_)\_\_\_\_\_

ADDRESS\_\_\_\_\_

CITY\_\_\_\_\_STATE\_\_\_\_\_ZIP CODE\_\_\_\_\_

BIRTHDATE\_\_\_/\_\_\_/\_\_\_SOCIAL SECURITY# xxx-xx-(\_\_\_\_\_)SFN ROLL#\_\_\_\_\_

Sac and Fox Nation tribal membership will be verified by the Sac and Fox Nation RAP Department

Please List Statement of Need:\_\_\_\_\_

\_\_\_\_\_

\*\*NOTE\*\*

You must receive an award letter **PRIOR** to receiving any Health services requested above. If you receive services prior to an award letter being issued, you are responsible for the charges.

CLIENT’S STATEMENT OF RIGHTS AND RESPONSIBILITIES

I hereby authorize the Sac and Fox Nation RAP Department to make any necessary inquiries relating to my account’s which the RAP Department may be considering making payment on my behalf. I understand that I have the right to a hearing of any action of the Sac and Fox Nation, which I consider improper, and also any unreasonable delay in decision. (Request for fair hearings may be made in writing to the Business Committee of the Sac and Fox Nation, 920963 S. Hwy. 99 Stroud, OK 74079) I understand that any person who knowingly, willfully and fraudulently provides false information for the purpose of obtaining benefits which he/she is otherwise ineligible to receive; may be subject to prosecution to the fullest extent to the appropriate Tribal statutes.

DATE\_\_\_\_\_SIGNATURE OF APPLICANT OR GUARDIAN\_\_\_\_\_GUARDIAN FOR\_\_\_\_\_

PERSON ASSISTING WITH APPLICATION\_\_\_\_\_RELATIONSHIP TO APPLICANT\_\_\_\_\_

DATE\_\_\_\_\_RAP SPECIALIST\_\_\_\_\_

# Sac and Fox Nation Lawn Services Applications Now Being Accepted

Sac and Fox Nation  
Elders Lawn Care Services  
Program  
920883 S Highway 99  
Stroud OK 74079  
Phone: (918) 968-3526, ext.  
2012 \*Fax: (918) 968-0142

Aho Tribal Elders~  
The Sac and Fox Na-  
tion Title VI Department is  
starting to take applications  
for the 2022 Lawn Mowing  
Season. The Lawn Services  
Program are for ALL Tribal  
Member Elders or Disabled  
individuals regardless of  
where you live. The Services  
will start on April 15, 2022  
and end on September 15,  
2022. \*\* First Come, First  
Serve \*\*  
If you have any ques-  
tions, please do not hesitate  
to reach out to Carrie R.  
LaDeaux, Title VI Elder Co-  
ordinator at 918 968-3526  
ext. 2012  
or Carrie.Ladeaux@sacand-  
foxnation-nsn.gov.  
Ketepi


## Elders Lawn Care Services Program Guidelines

This program is designed to  
provide Lawn Care services  
for the safety and healthy dai-  
ly living needs of all our eligi-  
ble Sac and Fox Nation Trib-  
al Member Elders, Members  
who are physically disabled  
and cannot safely perform  
Lawn Care themselves, re-  
gardless of location/residency.

- Applicant(s) must be an  
enrolled member of the Sac  
and Fox Nation age 55 or old-  
er, or who is physically dis-  
abled and residing within or  
out of jurisdiction.
- Participants will have their  
lawns cut Two (2) times per  
month for Five (5) months,  
based on available funding  
and number of participants  
served.
- Funding for this program  
is limited and each application  
will be processed in the order  
in which it was received. This  
program will fund as many  
Tribal Member requests as  
funding will permit. Howev-  
er, preference may be given to  
emergency situations.
- Applicants claiming a phys-  
ical disability must provide a  
physician's statement.

Business Committee Meeting  
Minutes are now  
accessible on the Website  
sacandfoxnation-nsn.gov  
and Facebook

Sac and Fox Nation  
Elders Lawn Care Services Program  
920883 S Highway 99 Stroud OK 74079  
Phone: (918) 968-3526 ext. 2012 \* Fax: (918) 968-0142



Tribal Elder/Disables Lawn Care Services Program

APPLICANT INFORMATION

Date: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip

Phone: \_\_\_\_\_ Tribal Roll#: \_\_\_\_\_ Tribal Elder: \_\_\_\_\_ Disabled: \_\_\_\_\_

Directions to Home: \_\_\_\_\_

PROOF OF RESIDENCE

You must provide one of the following:

1. Utility bill in eligible Sac and Fox Tribal Members name with corresponding address.

2. Property Rental/Lease Agreement in Sac and Fox Tribal Members names with corresponding address.

3. Notarized Letter from spouse/guardian of tribal members affirming residence of the client and a utility bill in their name with corresponding address of the home receiving benefits.

Failure to provide verification will cause application to be incomplete and pending. Services will be approved once completion of application is received.

Disabled Tribal Member:

Must provide a Benefit Award Letter or State/Tribal Vocational Rehabilitation Agency Letter

I hereby authorize the Sac & Fox Nation Elders Title VI Lawn Program to make any necessary inquiries relating to my account's which the Department may be considering making payment on my behalf. I understand that I have a right to request a fair hearing of any action which I do not agree with by submitting the request in writing within Ten (10) days to the Business Committee. I understand that any person who knowingly, willfully and fraudulently provides false information for the purpose of obtaining benefits which he/she is otherwise ineligible to receive, may be subject to prosecuting to the fullest extent to the appropriate Tribal Statutes.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

(FOR OFFICE USE ONLY)

Supporting Documents Received: ☐ Yes ☐ No If yes, what type: \_\_\_\_\_

Human Services Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Cc: file

Business Committee Approved 3/3/2022

ELDERS/DISABLED LAWN CARE SERVICES  
RESPONSIBILITY LETTER

2022 Mowing Season will begin April 15, 2022 through September 15, 2022

1. Home and Property must be occupied by the eligible Sac and Fox Tribal Member.

2. This Program is a **Supplemental** Lawn Service to the eligible Sac and Fox Tribal Member. There will be a guarantee of Ten (10) cuts per mowing season, to occur bi-weekly during the 2022 mowing season.

3. Property must be cleared of any and all debris before lawn can be mowed. This includes all trash receptacle's, trash, toys, etc. Failure to remove any and all items large and small that may interfere with the lawn care will result in your Service Provider/Contractor not mowing/weed eating that specific area.

4. The Sac and Fox Tribal Member is responsible for notifying the Service Provider/Contractor of any hazards i.e. pipes, boards, tress stumps, etc. (This information helps protect the Service Provider/Contractor from harm and also allows him/her to protect their equipment).

5. Up to One (1) acre will be mowed. A lawn is considered to be less than an acre in size & in proportion with a normal sized urban lot.

6. If you, as the Sac and Fox Tribal Member, request the Service Provider/Contractor to mow and or weed eat more, it will be **your responsibility** to pay for that portion serviced. The Elders Title VI Lawn Care Program is only responsible for payment of \$60.00 for Two (2) mows a month for the above mentioned sizes.

7. If you or our Service Provider/Contractors have any issues regarding the safety of a lawn or the size of a lawn that cannot be resolved between yourself and the Service Provider/Contractor; Services will be suspended until the Elders Title VI Program assesses the situation and reaches a mutual resolution with both parties.

8. It will be at the discretion of the Elders Title VI Lawn Care Services Program who will be your Service Provider/Contractor for the 2022 Lawn Care season.

9. **DO NOT** sign the Service Provider/Contractor invoice until **AFTER** services are completed.

For questions or concerns contact


Elders Title VI Program at 918-968-3526, ext. 2012

**\*\*OFFICE ONLY\*\***

Service Provider/Contractor Name: \_\_\_\_\_

Service Provider/Contractor Number: \_\_\_\_\_

RAP Department Application Form



SAC AND FOX NATION  
RAP ASSISTANCE APPLICATION

**HARDSHIP**

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: 920963 S. Hwy 99  
Stroud, OK 74079  
RAP APP  
Form#2011-01  
BC Approved on  
10/06/2020

NAME \_\_\_\_\_ PHONE# (\_\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY# xxx-xx-(\_\_\_\_\_) SFN ROLL# \_\_\_\_\_

Sac and Fox Nation tribal membership will be verified by the Sac and Fox Nation RAP Department

Please List Statement of Need: \_\_\_\_\_

\_\_\_\_\_


**Please Provide the Following:**  
Completed W-9 form and proof of residency.

**CLIENT’S STATEMENT OF RIGHTS AND RESPONSIBILITIES**

I hereby authorize the Sac and Fox Nation RAP Department to make any necessary inquiries relating to my account’s which the RAP Department may be considering making payment on my behalf. I understand that I have the right to a hearing of any action of the Sac and Fox Nation, which I consider improper, and also any unreasonable delay in decision. (Request for fair hearings may be made in writing to the Business Committee of the Sac and Fox Nation, 920963 S. Hwy. 99 Stroud, OK 74079) I understand that any person who knowingly, willfully and fraudulently provides false information for the purpose of obtaining benefits which he/she is otherwise ineligible to receive; may be subject to prosecution to the fullest extent to the appropriate Tribal statutes.

|            |                                          |                                 |
|------------|------------------------------------------|---------------------------------|
| DATE _____ | SIGNATURE OF APPLICANT OR GUARDIAN _____ | GUARDIAN FOR _____              |
|            | PERSON ASSISTING WITH APPLICATION _____  | RELATIONSHIP TO APPLICANT _____ |
| DATE _____ | RAP SPECIALIST _____                     |                                 |

The W-9 FORM CAN BE FOUND IN THIS EDITION ON PAGE 5



SAC AND FOX NATION  
RAP ASSISTANCE APPLICATION

**TRIBAL ENERGY**

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: 920963 S. Hwy 99  
Stroud, OK 74079  
RAP APP  
Form#2011-01  
BC Approved on  
10/06/2020

NAME \_\_\_\_\_ PHONE# (\_\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY# xxx-xx-(\_\_\_\_\_) SFN ROLL# \_\_\_\_\_

Sac and Fox Nation tribal membership will be verified by the Sac and Fox Nation RAP Department

Please List Statement of Need: \_\_\_\_\_

\_\_\_\_\_

**Please Provide the Following:**  
The most current bill you are requesting assistance with & proof of residency if the bill is not in your name.

**CLIENT’S STATEMENT OF RIGHTS AND RESPONSIBILITIES**

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|            |                                          |                                 |
|------------|------------------------------------------|---------------------------------|
| DATE _____ | SIGNATURE OF APPLICANT OR GUARDIAN _____ | GUARDIAN FOR _____              |
|            | PERSON ASSISTING WITH APPLICATION _____  | RELATIONSHIP TO APPLICANT _____ |
| DATE _____ | RAP SPECIALIST _____                     |                                 |



2022-2023 Sac and Fox Nation Tribal Princess Application

Mail to: Activity Committee      OR      E-mail to: [carrieladeaux@gmail.com](mailto:carrieladeaux@gmail.com)  
920883 S. Hwy. 99      [courtcozad89@gmail.com](mailto:courtcozad89@gmail.com)  
Stroud, OK 74079

**Pageant Competition: June 10th, 2022 @ 7:00 p.m. in SFN Community Building**

Candidate Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone No.: (\_\_\_\_) \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

Sac & Fox Roll No.: \_\_\_\_\_

OR

Check Box If Descendant: ☐

Describe descendency:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Father's Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

CANDIDATES MUST MEET THE FOLLOWING:

- ❖ Role model, etiquette & participation within SFN tribal events
- ❖ Must be able to dance, willingness to learn more about Sac and Fox history and customs
  - ❖ Must be able to attend SFN Activity Committee events
  - ❖ Must not be married, cohabitate, nor have significant other

| COMPETITION REQUIREMENTS:       |                                    |                                    |
|---------------------------------|------------------------------------|------------------------------------|
| LITTLE MISS<br>(6-10 years old) | JR. MISS<br>(11-15 years old)      | MISS<br>(16-21 years old)          |
| Tribal greeting & translation   | Tribal greeting & translation      | Tribal greeting & translation      |
| Describe & model tribal dress   | Describe & model tribal dress      | Describe & model tribal dress      |
|                                 | Traditional or contemporary talent | Traditional or contemporary talent |

\*\*\* Candidates must submit (1) 4X6 profile photo \*\*\*

List your hobbies, goals, subjects, achievements & titles: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you want to be a Sac & Fox Nation tribal princess? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SELECT YOUR CANDIDACY:

☐ MISS

☐ JR. MISS

☐ LITTLE MISS

\_\_\_\_\_

Candidate signature & date

\_\_\_\_\_

Parent signature & date

If you have any questions, feel free to contact (918) 908-3996 or (405) 788-2559

**APPLICATION DEADLINE: MAY 31st, 2022 - NO EXCEPTIONS**



SAC AND FOX NATION  
AMERICAN RESCUE PLAN ACT  
TRIBAL EMERGENCY WATER REPAIR PROGRAM  
APPLICATION

REFERENCE PROPERTY LOCATION:

Street Address City State Zip

DESCRIBE THE EMERGENCY ASSISTANCE BEING REQUESTED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I the undersigned do certify that I am authorized to make application, grant all authorizations, and to authorize all release from liability and responsibility regarding the above referenced tribal emergency water repair assistance being provided by the Sac and Fox Nation.

I hereby request assistance from the Sac and Fox Nation as described above.

I hereby authorize the Sac and Fox Nation officials, agents, employees, material men, laborers, and contractors to enter the property with any equipment and vehicles and to perform such work or inspections as is necessary to provide and complete this tribal assistance.

I hereby release the Sac and Fox Nation, its officials, agents, employees, material men, laborers, and contractors from all liability for loss, damage, or injury of any kind whatsoever as a result of participation in this emergency tribal assistance program.

|                          |  |                       |                    |              |
|--------------------------|--|-----------------------|--------------------|--------------|
| _____<br>Signature       |  | _____<br>Date         |                    |              |
| _____<br>Printed Name    |  | _____<br>Roll Number  | _____<br>Birthdate |              |
| _____<br>Mailing Address |  | _____<br>City         | _____<br>State     | _____<br>Zip |
|                          |  | _____<br>Phone Number |                    |              |



SAC AND FOX NATION  
TRIBAL EMERGENCY HOME REPAIR PROGRAM  
(TEHR)  
APPLICATION, AUTHORIZATION AND RELEASE

FAX: 918-968-4207  
PH: 918-968-3526  
EXT: 2001  
EMAIL: [sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)  
ADDRESS: RAP Department  
920963 S. Hwy 99  
Stroud, OK 74079  
BC Approved on  
10/06/2020

REFERENCE PROPERTY LOCATION:

Street Address City State Zip

DESCRIBE THE ASSISTANCE BEING REQUESTED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I the undersigned do certify that I am authorized to make application, grant all authorizations, and to authorize all releases from liability and responsibility regarding the above referenced housing assistance being provided by the Sac and Fox Nation.

I hereby request assistance from the Sac and Fox Nation as described above.

I hereby authorize the Sac and Fox Nation officials, agents, employees, material men, laborers, and contractors to enter the property with any equipment and vehicles and to perform such work or inspections as is necessary to provide and complete this tribal assistance.

I hereby release the Sac and Fox Nation, its officials, agents, employees, material men, laborers, and contractors from all liability for loss, damage, or injury of any kind whatsoever as a result of participation in this tribal assistance program.

|                          |  |                       |                    |                                                                                        |
|--------------------------|--|-----------------------|--------------------|----------------------------------------------------------------------------------------|
| _____<br>Signature       |  | _____<br>Date         |                    |                                                                                        |
| _____<br>Printed Name    |  | _____<br>Roll Number  | _____<br>Birthdate |                                                                                        |
| _____<br>Mailing Address |  | _____<br>Phone Number |                    |                                                                                        |
| _____<br>City            |  | _____<br>State        | _____<br>Zip       | _____<br>Handicap Preference: Yes <input type="checkbox"/> No <input type="checkbox"/> |

FNS HANDBOOK 501  
EXHIBIT M

FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS (FDFPIR)  
FY 2022 NET MONTHLY INCOME STANDARDS  
(Effective October 1, 2021 to September 30, 2022)

The net monthly income standard for each household size is the sum of the applicable Supplemental Nutrition Assistance Program (SNAP) net monthly income standard and the applicable SNAP standard deduction.

| 48 Contiguous United States: |                                  |   |                         |   | Use this Amount                    |
|------------------------------|----------------------------------|---|-------------------------|---|------------------------------------|
| Household Size               | SNAP Net Monthly Income Standard |   | SNAP Standard Deduction |   | FDFPIR Net Monthly Income Standard |
| 1                            | \$1,074                          | + | \$177                   | = | \$1,251                            |
| 2                            | \$1,452                          | + | \$177                   | = | \$1,629                            |
| 3                            | \$1,830                          | + | \$177                   | = | \$2,007                            |
| 4                            | \$2,209                          | + | \$184                   | = | \$2,393                            |
| 5                            | \$2,587                          | + | \$215                   | = | \$2,802                            |
| 6                            | \$2,965                          | + | \$246                   | = | \$3,211                            |
| 7                            | \$3,344                          | + | \$246                   | = | \$3,590                            |
| 8                            | \$3,722                          | + | \$246                   | = | \$3,968                            |
| each additional member       |                                  |   |                         |   | \$379                              |

| Alaska:                |                                  |   |                         |   | Use this Amount                    |
|------------------------|----------------------------------|---|-------------------------|---|------------------------------------|
| Household Size         | SNAP Net Monthly Income Standard |   | SNAP Standard Deduction |   | FDFPIR Net Monthly Income Standard |
| 1                      | \$1,341                          | + | \$303                   | = | \$1,644                            |
| 2                      | \$1,815                          | + | \$303                   | = | \$2,118                            |
| 3                      | \$2,288                          | + | \$303                   | = | \$2,591                            |
| 4                      | \$2,761                          | + | \$303                   | = | \$3,064                            |
| 5                      | \$3,235                          | + | \$303                   | = | \$3,538                            |
| 6                      | \$3,708                          | + | \$308                   | = | \$4,016                            |
| 7                      | \$4,181                          | + | \$308                   | = | \$4,489                            |
| 8                      | \$4,655                          | + | \$308                   | = | \$4,963                            |
| each additional member |                                  |   |                         |   | \$474                              |

FNS HANDBOOK 501  
EXHIBIT M

FY 2022 FDFPIR Income Deductions (see 7 CFR 253.6(e))  
Effective October 1, 2021 to September 30, 2022

|                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Earned Income Deduction                    | Households with earned income are allowed a deduction of 20 percent of their earned income.                                                                                                                                                                                                                                                                                                                                                                                        |
| Dependent Care Deduction                   | Households that qualify for the dependent care deduction are allowed a deduction of actual dependent care costs paid monthly to a non-household member.                                                                                                                                                                                                                                                                                                                            |
| Child Support Deduction                    | Households that incur the cost of legally required child support to or for a non-household member are allowed a deduction for the amount of monthly child support paid.                                                                                                                                                                                                                                                                                                            |
| Medical Expense Deduction                  | Households that incur monthly medical expenses by any household member who is elderly or disabled are allowed a deduction in the amount of out-of-pocket medical expenses paid in excess of \$35 per month. Allowable medical expenses are provided at 7 CFR 273.9(d)(3).                                                                                                                                                                                                          |
| Home Care Meal-Related Deduction           | Households who furnish the majority of meals for a home care attendant are allowed an income deduction equal to the maximum SNAP benefit for a one-person household. The home care meal-related deduction amounts are as follows:<br><br>48 Contiguous U.S. States = \$250<br><br>Alaska by Area Designations <ul style="list-style-type: none"><li>Urban = \$322</li><li>Rural 1 = \$411</li><li>Rural 2 = \$500</li></ul><br>See 7 CFR 272.7(b) for area designations in Alaska. |
| Standard Shelter/Utility Expense Deduction | Households that incur at least one monthly shelter or utility expense are allowed a standard income deduction (see chart below). Allowable shelter/utility expenses are provided at 7 CFR 273.9(d)(6)(ii).                                                                                                                                                                                                                                                                         |

FNS HANDBOOK 501  
EXHIBIT M

FY 2022 FDFPIR Standard Shelter/Utility Expense Deductions  
Effective October 1, 2021 to September 30, 2022

| Baseline by Region* |                                                                          |                           |
|---------------------|--------------------------------------------------------------------------|---------------------------|
| Region              | States Currently with FDFPIR Programs                                    | Shelter/Utility Deduction |
| Northeast/Midwest   | Michigan, Minnesota, New York, Wisconsin                                 | \$450                     |
| Southeast/Southwest | Arizona, Mississippi, New Mexico, North Carolina, Oklahoma, Texas, Utah  | \$350                     |
| Mountain Plains     | Colorado, Kansas, Montana, Nebraska, North Dakota, South Dakota, Wyoming | \$500                     |
| West                | Alaska, California, Idaho, Nevada, Oregon, Washington                    | \$450                     |

\*If the geographic boundaries of an Indian reservation extend to more than one region per the identified regional groupings above, then a qualifying household has the option to receive the appropriate shelter/utility expense deduction amount for the State in which the household resides or the State in which the State agency’s central administrative office is located.



# WE ARE HIRING

LET'S JOIN OUR TEAM NOW!

APPLY NOW!

For more information please call  
918-968-3526 ext 1013

## JOB VACANCY OPEN POSITIONS

Executive Director-Gaming (Shawnee)  
Licensing Investigator-Gaming (Shawnee)  
IT Assistant - (Stroud)  
Medical Coder - BHHHC (Stroud)  
Maintenance Director - (Stroud)  
Pool Operator Manager - (Seasonal, Stroud)  
Lifeguard - (Seasonal, Stroud)  
Landscapers/Laborers - (Seasonal, Stroud)  
ARPA Specialist - (Stroud)  
Transportation Driver - BHHHC (Stroud)  
Appointment Clerk - BHHHC (Stroud)  
Meal Delivery Driver - Part-Time (Stroud)

Accounts Payable Technician - (Stroud)  
Information Clerk - BHHHC (Stroud)  
Laborer - (Stroud)  
Shipping & Receiving & Filing Clerk - Temporary (Stroud)  
Assistant Cook - Part-Time (Stroud)  
Economic Development Director - (Stroud)  
Community Health Nurse - BHHHC (Stroud)  
Policy Analyst - (Stroud)  
Grant Writer/Planner - (Stroud)  
Maintenance Technician - (Stroud)  
Chief Financial Officer - (Stroud)  
Resident Advisor - JDC (Stroud)

Log on to [www.sacandfoxnation-nsn.gov](http://www.sacandfoxnation-nsn.gov) under the Human Resources tab on instructions how to fill out and submit your application.

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| SAC AND FOX TAX COMMISSION REVENUE |              |
|------------------------------------|--------------|
| August 2021                        |              |
| Beer and Liquor.....               | \$337.69     |
| State Tobacco Rebate.....          | \$261,110.60 |
| Motor Vehicle.....                 | \$9,125.30   |
| Sales Tax.....                     | \$16,642.14  |
| Treasury.....                      | \$11,405.00  |
| Oil and Gas.....                   | \$0.00       |
| Gaming.....                        | \$196,688.84 |
| TOTAL.....                         | \$495,309.57 |

May 2022

SAC AND FOX NATION FOOD DISTRIBUTION PROGRAM

STROUD WAREHOUSE  
918-968-3030 • 1-800-256-3398

SHAWNEE OFFICE  
405-395-0063 • 1-886-622-2310

| MON                                                                 | TUE                            | WED            | THU             | FRI                           |
|---------------------------------------------------------------------|--------------------------------|----------------|-----------------|-------------------------------|
| 2                                                                   | 3<br>Elders Day                | 4<br>Shipment  | 5<br>Elders Day | 6<br>Stroud HD                |
| 9<br>Late Night<br>Shawnee<br>8 am - 6 pm                           | 10<br>Elders Day               | 11             | 12              | 13<br>Shawnee HD              |
| 16                                                                  | 17<br>CLOSED<br>SF Victory Day | 18<br>Shipment | 19              | 20<br>Stroud HD<br>Shawnee HD |
| 23<br>LATE NIGHT<br>Stroud<br>8 am - 6 pm<br>Shawnee<br>8 am - 6 pm | 24                             | 25             | 26              | 27<br>CLOSED FOR INVENTORY    |
| 30<br>CLOSED<br>Memorial Day                                        | 31<br>CLOSED FOR INVENTORY     |                |                 |                               |

ALL FOOD DISTRIBUTIONS ARE BY APPOINTMENT ONLY! THANK YOU!!

HOURS

MONDAY - FRIDAY

CERTIFICATION 8:00 am - 4:30 pm

STORE 8:30 am - 2:30 pm

STORE AM INVENTORY 8:00 am - 8:30 am

STORE PM INVENTORY 2:30 pm - 4:30 pm

HOME DELIVERIES ARE FOR HOMEBOUND AND/OR DISABLED ELDERS. CALL OUR STROUD OFFICE TO SEE IF YOU QUALIFY.

This institution is an equal opportunity provider.



## Sac and Fox Nation Food Distribution Program



OVER 100 ITEMS!!!

If at least 1 in your household has a CDIB, you reside within our 5 tribe Service Area, & you meet USDA Income Guidelines...  
**YOU MAY QUALIFY!!!**

# CALL TODAY!!! 1-800-256-3398

This institution is an equal opportunity provider.



