



Tribal Chief

# The Saginaw Chippewa Indian Tribe Of Michigan

7070 EAST BROADWAY

MT. PLEASANT, MICHIGAN 48858

(989) 775-4005

FAX (989) 775-4131

## Child Per Capita Payment Notice

June 22, 2015

Dear: Parents and/or Guardians of Tribal Member Children:

The Tribe's Per Capital Plan requires that all parents or guardians of Tribal member children who receive child per capita payments have an agreement on file with the Tribal Clerk's Office. The agreement is intended to ensure that child per capita payments are expended for the Tribal member child; that affidavits are timely filed; and that payments used in violation of the Plan will be repaid to the Tribe. Anyone who is currently listed as a parent or guardian receiving child per capita payments who does not have an agreement on file, must complete the attached agreement and return it to the Clerk's Office. If an agreement is not on file before the next child per capita payment period deadline of August 7, 2015, the parent or guardian will not be permitted to receive the next child per capita payment.

Once received, the Agreement will not need to be submitted again unless any relevant information on the Agreement has changed. This does not change the requirement that the custodial parent or guardian also file a Tribal Child Welfare Affidavit. Child Welfare Affidavits must still be timely filed to be eligible for the child per capita payment. Please contact the Tribal Clerk's Office with any questions.

Miigwetch,

Steven Pego  
Tribal Chief

Attachment



# The Saginaw Chippewa Indian Tribe Of Michigan

7070 EAST BROADWAY

MT. PLEASANT, MICHIGAN 48858

(989) 775-4000  
FAX (989) 772-3508

## The Saginaw Chippewa Indian Tribe of Michigan Tribal Children's Welfare Program Agreement Tribal Clerk's Office, 7070 East Broadway, Mt. Pleasant, Michigan 48858, Phone: (989) 775-4054

I, \_\_\_\_\_, \_\_\_\_\_ of \_\_\_\_\_  
(Print Name of Custodial Parent or Guardian) (Social Security Number) (Physical Address and Phone Number)

\_\_\_\_\_, warrant that I qualify as the **Custodial Parent or Guardian** of the  
Physical Address and Phone Number, cont.)

minor listed below, as that term is defined in Subsection II.C.2.a of the Saginaw Chippewa Indian Tribe of Michigan Tribal Gaming Revenue Allocation Plan.

**(a) Definition. "Custodial Parent or Guardian"** shall mean the parent(s) or guardian(s) with whom the minor child has physically resided for at least 51% of the time during the three months prior to any per capita payment and who provided at least 51% of the support of the Minor during the same period.

Furthermore, I covenant that I will comply with all requirements of the Saginaw Chippewa Indian Tribe of Michigan Tribal Gaming Revenue Allocation Plan relating to the Minor's per capita payments, including, but not limited to the requirement that:

1. All such payments will be expended solely for the benefit of the Minor; and
2. I will provide such affidavits, reports and documentation as the Tribe, in its discretion, may require to prove such compliance; and
3. I will repay any amounts deemed by the Tribe to have been expended in violation of said requirements; and
4. If I am a member of the Saginaw Chippewa Indian Tribe of Michigan, I consent to the deduction of any amounts deemed by the Tribe to have been expended in violation of these requirements from any per capita payments to which I may be entitled.

\_\_\_\_\_  
Minor's Full Name                      / /                      - -                      **M** \_\_\_\_\_  
Birthdate                      Social Security #                      SCIT Membership #

\_\_\_\_\_  
Signature of Custodial Parent/Guardian of the Minor

\_\_\_\_\_  
Date