

# GL Commitment Analysis Report

GL298 Date 08/18/08  
Time 16:33

Company 1 Cherokee Nation  
GL Commitment Analysis Report - Annual  
Periods 1 - 12  
Year 2008

USD

1012000

## Building Structures Prop Maint Budget 1 FY 2008 Approved Budget

Account	Annual Actual	Annual Encumbrances	Annual Commitments	Annual Total	Annual Budgeted	Budget Balance
600000 0000	11,518.17	0.00	0.00	11,518.17	0.00	11,518.17-
610000 0000	5,817.69	0.00	0.00	5,817.69	0.00	5,817.69-
610160 0000	596.85	0.00	0.00	596.85	0.00	596.85-
610180 0000	596.85	0.00	0.00	596.85	0.00	596.85-
610200 0000	295.55	0.00	0.00	295.55	0.00	295.55-
610210 0000	295.55	0.00	0.00	295.55	0.00	295.55-
620000 0000	50.38	0.00	0.00	50.38	0.00	50.38-
680000 0000	17,666.26	1,058.38	0.00	18,724.64	0.00	18,724.64-
700010 0000	10,287.25	0.00	0.00	10,287.25	0.00	10,287.25-
700070 0000	0.00	1,000.00	0.00	1,000.00	0.00	1,000.00-
710000 0000	1,544.04	0.00	0.00	1,544.04	0.00	1,544.04-
710090 0000	4,156.66	0.00	0.00	4,156.66	0.00	4,156.66-
730000 0000	16,540.66	8,993.15	0.00	25,533.81	256,476.00	230,942.19
730020 0000	329.31	10.50	0.00	339.81	0.00	339.81-
770030 0000	134,455.69	0.00	0.00	134,455.69	100,000.00	34,455.69-
970000 0000	9,633.68	0.00	0.00	9,633.68	43,524.00	33,890.32
Acct Unit Totals	211,999.79	11,062.03	0.00	223,061.82	400,000.00	176,938.18

Company Totals	211,999.79	11,062.03	0.00	223,061.82	400,000.00	176,938.18
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Report Totals	211,999.79	11,062.03	0.00	223,061.82	400,000.00	176,938.18
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Attachment to Memo.

**COMPREHENSIVE BUDGET  
FOR FISCAL YEAR 2008  
Including Mod 11 - As Amended**

Funding Source	Revenues	Transfers In	Total	Direct Exp.	Indir. Exp.	Transfers Out	Total	NET
Tribally Funded Funding Source	92,857,559	16,899,400	109,756,959	90,374,880	5,808,555	12,426,229	108,609,664	1,147,295
Motor Fuels Tax Funding Srce	10,141,412	8,912,265	19,053,677	10,139,675	304,508	8,609,494	19,053,677	0
Motor Vehicle Tax Funding Srce	14,859,632	0	14,859,632	13,065,206	336,232	1,458,194	14,859,632	0
Permanent Fund Funding Source	18,500	0	18,500	18,500	0	0	18,500	0
Title VI Loan Funding Source	160,586	0	160,586	0	0	160,586	160,586	0
DOI General Funding Source	14,423,115	0	14,423,115	13,358,631	1,064,484	0	14,423,115	0
DOI Self Gov Funding Source	12,436,100	79,600	12,515,700	11,183,952	1,204,286	127,462	12,515,700	0
DOI Self Gov Roads Funding Srce	39,283,338	0	39,283,338	37,703,311	380,027	1,200,000	39,283,338	0
DOI PL102-477 Funding Source	17,553,518	0	17,553,518	16,633,620	919,898	0	17,553,518	0
IHS Self Gov Health Funding Sr	88,136,427	0	88,136,427	77,554,274	7,692,723	2,889,430	88,136,427	0
IHS Self Gov TEH Funding Src	8,835,880	142,676	8,978,556	8,261,914	573,966	142,676	8,978,556	0
IHS Self Gov Offic Funding Src	474,089	0	474,089	410,998	63,091	0	474,089	0
IHS Discretionary Funding Srce	800,000	0	800,000	0	0	800,000	800,000	0
DHHS General Funding Source	37,495,108	7,000	37,502,108	34,379,589	3,037,965	84,554	37,502,108	0
USDA Funding Source	15,790,199	876,389	16,666,588	15,961,964	704,624	0	16,666,588	0
Dept of Education Funding Srce	1,391,304	67,187	1,458,491	1,327,752	130,739	0	1,458,491	0
HUD Funding Source	48,222,410	0	48,222,410	46,139,336	1,998,221	84,853	48,222,410	0
Housing Proceeds Funding Src	2,925,837	0	2,925,837	2,596,371	329,466	0	2,925,837	0
EPA Funding Source	3,434,944	0	3,434,944	3,113,014	321,930	0	3,434,944	0
Dept of Labor Funding Source	13,856,158	0	13,856,158	12,431,638	1,424,520	0	13,856,158	0
Federal Other Funding Source	1,753,389	0	1,753,389	1,711,929	41,460	0	1,753,389	0
State of Oklahoma Funding Srce	593,500	0	593,500	519,967	73,533	0	593,500	0
Private Funding Source	1,009,116	171,951	1,181,067	747,202	111,434	0	858,636	322,431
Indirect Cost Pool Funding Src	104,749	0	104,749	22,938,966	(22,834,217)	0	104,749	0
Tribal Force Acct Funding Srce	62,900	293,341	356,241	128,646	14,254	0	142,900	213,341
Fringe Pool Funding Source	0	6,500,000	6,500,000	0	0	0	6,500,000	6,500,000
Internal Lease Pool Funding Sr	1,072,470	0	1,072,470	1,072,470	0	0	1,072,470	0
Enterprise Funding Source	3,238,290	1,406,819	4,645,109	4,375,239	93,914	80,000	4,549,153	95,956
Other Funding Source	10,239,383	12,000	10,251,383	149,462	8,590	9,579,027	9,737,079	514,304
Debt Service Funding Source	0	2,789,430	2,789,430	2,789,430	0	0	2,789,430	0
Capital Projects Funding Sourc	12,088,572	0	12,088,572	11,573,019	0	515,553	12,088,572	0
<b>Total</b>	<b>\$ 453,258,485</b>	<b>\$ 38,158,058</b>	<b>\$ 491,416,543</b>	<b>\$ 440,660,955</b>	<b>\$ 3,804,203</b>	<b>\$ 38,158,058</b>	<b>\$ 482,623,216</b>	<b>\$ 8,793,327</b>

Mod-11 Amended \$ 1,516,812  
**Total w/Mod-11 as Amended \$ 484,140,028**

CHEROKEE NATION - FY2008 BUDGET REQUEST FORM

PART-1

Budget Period:	10/01 07-09/30/08	Budget Preparer	Phone 5201
Contract Number:		Name:	Kathy Cheater
Accounting Fund:	1 General Fund	Accounting Unit Director/Manager	Phone: 5112
Funding Source:	01-Cherokee Nation	Name:	Chad Smith
AU Description:	Charitable Contributions	Group Leader	Phone: 5705
Accounting Unit:	1010042	Name:	Melanie Knight
Place IDC Rate in Part 4 Below		1st Person Responsible	
Date/Time Printed	14-Aug-08 09 25 AM	Employee #:	106231

Notes: 750000 Contributions: YOUTH Special Olympics-\$25,000 Indian Rodeo-\$1200 Cherokee Youth Chow-\$5710, CN ICW Angel Tree-\$5250 Muskogee Murrow Indian Children's Home-\$10,000 Youth Achievement Celebrations-\$5000 Native American Student Association-\$25,000, Cherokee Nation Education Corporation-\$25,000, Lifelock-\$50,000 Unity-\$10,000 Reconnecting the Circle-\$10,000, HISTORICAL Five Tribes Museum, \$10,000, Will Rogers Museum-\$10,000 Friends of Libraries in OK-\$3,000 Artist's Association-\$5,000, Institute of American Indian Art-\$10,000, Int'l Cherokee Film Festival-\$33,285 Trail of Tears Association-\$10,000 Inter-Tribal Council Staff-\$50,000, CN Color Guard-\$10,000, Cherokee Choir-\$10,000

SHELTERS Cherokee City Hope House-\$5,000, Dal City Hope House-\$5,000, Rogers City Hope House-\$5,000 Domestic Violence Shelters-\$50,000, Court Appointed Special Advocates-\$52,000 Zoe Institute-\$38,000 CRISIS INTERVENTION: Red Cross-\$10,000, Oklahoma Drug & Alcohol Prof Counseling Assn-\$2,000, OTHER Green Country Gigger's Assn-\$1,500 CN Breast Cancer Survivor Camp-\$1,000 Habitat for Humanity-\$15,000, Tahl Hosp Gala-\$1,000 OK Conf for Comm & Justice-\$10,000, Cherokee Elder Care (PACE) contribution to the CN Comprehensive Care Agency-\$761,088  
Munell Home-\$10,000 and Oaks Generator-\$4,000 from 2/7/08 E&F Safe Kids-\$5,000 from Mod 6 Solid RockOutreach/Youth Camp-\$1,000 from Mod 11, UNDESIGNATED 0

PART-2

Staffing Summary:	FY 2008 REVISION 3	FY 2008 REVISION 2	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:			
# of Regular Part-Time Employee Equivalents:			
# of Temp Full-Time Employee Equivalents:			
# of Temp Part-Time Employee Equivalents:			
# of Other Employee Equivalents:			
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>			

PART-3

Revenues: (Show as positive #)	Account #	Incr \ (Decr)
Please enter a valid account number - >>>		
Please enter a valid account number - >>>		
Please enter a valid account number - >>>		
DO NOT COPY TO, COPY BELOW OR REMOVE THIS LINE		
<b>Total Revenues</b>		

PART-4

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Contributions & donations	750000		\$1,300,033		\$1,300,033	\$ -
Please enter a valid account number - >>>						\$ -
DO NOT COPY TO, COPY BELOW OR REMOVE THIS LINE						\$ -
Expenditures NOT Subject to IDC			\$1,300,033		\$1,300,033	\$ -
Expenditures SUBJECT to IDC		\$ -		\$ -		\$ -
Indirect Cost Rate (If blank or zero, must explain in Notes above)		15.71%		16.97%		
Indirect Cost Allocation	970000	\$ -		\$ -		\$ -
<b>Total Expenditures</b>			\$1,300,033		\$1,300,033	\$ -
<b>Revenues OVER \ (UNDER) Expenditures</b>			\$(1,300,033)		\$(1,300,033)	\$ -

Transfers In\Out - (Show ALL as Positive Numbers)

Operating Transfers IN						
Other financing sources	900000					\$ -
Cash in: tribally required	900010					\$ -
Cash in: grant required	900020					\$ -
Cash in: motor fuel tax	900040					\$ -
Cash in: vehicle tax	900050					\$ -
Cash in: interprogram contract	900060					\$ -
Operating Transfers OUT						
Other financing uses	900001					\$ -
Cash out: tribally required	900011					\$ -
Cash out: grant required	900021					\$ -
Cash out: motor fuel tax	900041					\$ -
Cash out: vehicle tax	900051					\$ -
Cash out: interprogram contract	900061					\$ -
<b>Transfers In\Out - Net</b>			\$ -		\$ -	\$ -
Take to Narrative ==>			\$1,300,033		\$1,300,033	
<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>			\$(1,300,033)		\$(1,300,033)	\$ -

# Solid Rock Outreach & Promotions

RECEIVED  
AUG - 5 2008  
OFFICE OF PRINCIPAL CHIEF  
PO. Box 3904  
Shiprock, NM 87420

PO. Box 371  
TeecNosPos AZ 86514



7-2-08  
CHUMBERS NATION  
CHIEF CHAIRSMAN  
TRINIDAD COUNCIL  
Ya-at-tah, (Greetings)

Director • Founder  
Ralph Dec, Jr  
(505) 324-2721

(REPAID 8/5/08)

First and foremost wishing you good health and spirit from the staff and volunteers of Solid Rock Outreach Center of Red Mesa, Arizona and Shiprock, New Mexico.

Solid Rock Outreach Center is located 15 miles southwest of the Four Corners. We have been successful in 2007 by reaching out to 585 young people through the 7 youth rallies/conferences that we sponsored and hosted since January '2007. It will be 27 years this coming July on reaching out to the youth from all walks of life and nationalities. There are many young people that received spiritual guidance and got back on the right track through our Substance Abuse Program.

Many of these youth had an interest to go back to school to receive their GED, high school diploma and/or a degree. Some went to vocational training school to be an electrician, plumber, carpenter, diesel mechanic, etc.

We are raising \$30,000 for the next 6 months of (6) youth conferences that we have scheduled throughout the New Year. We are requesting for a donation of \$500.00, \$750.00 and \$1,000 = \$ 1,500/2,500 totaled as a corporate sponsor. The money will be used for rentals of buildings, equipment, transportation, lodging, posters, flyers and brochures. We also use 10% for administrative overhead cost. Please know that the monetary assistance requested of you will be utilized in a most beneficial way.

May the Great Spirit lead you and guide you always.

As THANKS A LOT FOR WORKING WITH AND TO SERVE OUR PEOPLE AND THAT WE LOOK FORWARD TO THE LONG TERM BUSINESS WITH CHUMBERS NATION IN THE YEARS TO COME WE NEED YOUR HELP WITH OUR "INDIAN NATION YOUTH RALLY/CONFERENCE" ON AUGUST 6-10, 2008. LET'S WORK TOGETHER AND REACH OUT TO OUR YOUTH ON THE RESERVATION

Thank,

Sincerely,

Ralph Dec, Jr.  
Solid Rock Outreach Program

NOTE AS OF 8/5/08, WE ARE SHORT OF \$2,900 OF OUR GOAL OF \$30,000  
Thank,

CHEROKEE NATION - FY2008 BUDGET REQUEST FORM

PART-1

Budget Period:	10/01/07-09/30/08	Budget Preparer	Phone:
Contract Period:	10/01/07-09/30/08	Name:	Donna Potts x5668
Contract Number:	unknown at this time	Accounting Unit Director/Manager	Phone:
Accounting Fund:	1 General Fund	Name:	Tamara Copeland
Funding Source:	01-Cherokee Nation	Group Leader	Phone:
AU Description:	Emergency Management	Name:	Angela Drewes
Accounting Unit:	1010520	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	101836
Date/Time Printed:	06-Aug-08 12:20 PM		

PART-2

Staffing Summary:

Note: Received \$7,000 in expense reimbursement for participation in Pan Flu Committee, attending Tribal Pan Flu Summit, developing a tribal pandemic flu plan, and updating said tribal plan.

	FY 2008 REVISION 3	FY 2008 REVISION 2	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:	1.00	1.00	-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>1.00</b>	<b>1.00</b>	<b>-</b>

PART-3

Revenues:

(Show as positive #)

Account #	Incr \ (Decr)
Other Income	\$ 7,000
Please enter a valid account number - >>>	\$ -
Please enter a valid account number - >>>	\$ -
<b>Total Revenues</b>	<b>\$ 7,000</b>

PART-4

Expenditures:

Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
	YES	NO	YES	NO	
Salaries & wages	\$27,541		\$27,541		\$ -
Fringe benefits	\$10,879		\$10,879		\$ -
Staff development & training	\$500		\$500		\$ -
Travel-staff	\$5,000		\$5,000		\$ -
Contract services >=\$5K	\$2,500		\$2,500		\$ -
Supplies	\$21,629		\$15,579		\$ 6,050
Allocated: telephone expense	\$700		\$700		\$ -
Allocated: cell/mobile phone	\$1,750		\$1,750		\$ -
Allocated: printing/copying	\$250		\$250		\$ -
Allocated: space cost	\$4,200		\$4,200		\$ -
Allocated: auto insurance	\$625		\$625		\$ -
Employee mileage reimbursement	\$750		\$750		\$ -
R & m equipment	\$2,000		\$2,000		\$ -
Food	\$1,500		\$1,500		\$ -
Please enter a valid account number - >>>					\$ -
Please enter a valid account number - >>>					\$ -
<b>Expenditures NOT Subject to IDC</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>Expenditures SUBJECT to IDC</b>	<b>\$ 79,824</b>	<b>\$ -</b>	<b>\$ 73,774</b>	<b>\$ -</b>	<b>\$ 6,050</b>
Indirect Cost Rate (If blank or zero, must explain in Notes above)	15.71%		15.71%		
Indirect Cost Allocation 970000	\$ 12,541		\$ 11,591		\$ 950
<b>Total Expenditures</b>	<b>\$ 92,365</b>	<b>\$ -</b>	<b>\$ 85,365</b>	<b>\$ -</b>	<b>\$ 7,000</b>

Revenues OVER \ (UNDER) Expenditures

	\$ (85,365)	\$ (85,365)	\$ -
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Transfers In\Out - (Show ALL as Positive Numbers)

Operating Transfers IN

Other financing sources	900000			\$ -
Cash in: tribally required	900010			\$ -
Cash in: grant required	900020			\$ -
Cash in: motor fuel tax	900040			\$ -
Cash in: vehicle tax	900050			\$ -
Cash in: interprogram contract	900060			\$ -

Operating Transfers OUT

Other financing uses	900001			\$ -
Cash out: tribally required	900011			\$ -
Cash out: grant required	900021			\$ -
Cash out: motor fuel tax	900041			\$ -
Cash out: vehicle tax	900051			\$ -
Cash out: interprogram contract	900061			\$ -

Transfers In\Out - Net

	\$ -	\$ -	\$ -
Take to Narrative ==>	\$ 92,365	\$ 85,365	

Excess(Deficit) of Revenues, Expenditures and Net Transfers

	\$ (85,365)	\$ (85,365)	\$ -
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**PAYROLL WORKSHEET**

Accounting Unit Description: **Emergency Management** For Budget Period: **10/01/07-09/30/08** Printed Date: **06-Aug-08**  
 Accounting Unit Name: **1010520** Prepared by: **Donna Potts x5668** Printed Time: **12:20 PM**

Job Title	Position New=N Existing=E	Status: Exempt = E Non = N	Salary Range Class	Range Maximum	Emp. #	Hourly Rate	Expected Hours To Pay		Expected Wages (Gross)	Series-Status	Fringe Rate%	% Perc.	Totals For This Accounting Unit	
							Regular	Overtime					Expected Wages (Gross)	Expected Fringe Benefits
1 Loss Control Specialist	E	N	P06	\$22.72	10-7054	\$17.83	2,088	120	\$40,436	10-R-FT	39.50%	50%	\$20,208	\$7,982
2 EM Management	E	E	M8	\$36.98	10-1836	\$32.25	750	0	\$24,188	10-R-FT	39.50%	27%	\$6,531	\$2,580
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50 <b>AU 3% Merit Increase</b>														
<b>Totals</b>									<b>\$27,541</b>				<b>\$10,879</b>	

Please input these totals on  
on the Budget Request Form!

# GL Commitment Analysis Report

GL298 Date 08/08/08  
Time 15:04

Company 1 Cherokee Nation  
GL Commitment Analysis Report - Annual  
Periods 1 - 12  
Year 2008

USD

1010520

Emergency Management

Budget 1 FY 2008 Approved Budget

Account	Annual Actual	Annual Encumbrances	Annual Commitments	Annual Total	Annual Budgeted	Budget Balance
499000 0000	7,000.00	0.00	0.00	7,000.00	0.00	7,000.00
600000 0000	18,799.75	0.00	0.00	18,799.75	27,541.00	8,741.25
610000 0000	10,317.50	0.00	0.00	10,317.50	10,879.00	561.50
610160 0000	616.02	0.00	0.00	616.02	0.00	616.02
610180 0000	616.02	0.00	0.00	616.02	0.00	616.02
610200 0000	703.32	0.00	0.00	703.32	0.00	703.32
610210 0000	703.32	0.00	0.00	703.32	0.00	703.32
610260 0000	1,092.96	0.00	0.00	1,092.96	0.00	1,092.96
610270 0000	1,092.96	0.00	0.00	1,092.96	0.00	1,092.96
620000 0000	35.00	0.00	0.00	35.00	500.00	465.00
630000 0000	2,286.76	0.00	0.00	2,286.76	5,000.00	2,713.24
630050 0000	36.75	0.00	0.00	36.75	0.00	36.75
630070 0000	42.50	0.00	0.00	42.50	0.00	42.50
630090 0000	30.00	0.00	0.00	30.00	0.00	30.00
650000 0000	0.00	0.00	0.00	0.00	2,500.00	2,500.00
680000 0000	947.18	818.44	0.00	1,765.62	15,579.00	13,813.38
680060 0000	298.27	0.00	0.00	298.27	0.00	298.27
690080 0000	65.39	0.00	0.00	65.39	700.00	634.61
690090 0000	106.48	0.00	0.00	106.48	1,750.00	1,643.52
690120 0000	15.49	0.00	0.00	15.49	0.00	15.49
690130 0000	0.00	0.00	0.00	0.00	250.00	250.00
700080 0000	2,750.56	0.00	0.00	2,750.56	4,200.00	1,449.44
710100 0000	559.87	0.00	0.00	559.87	625.00	65.13
720030 0000	390.86	289.15	0.00	680.01	0.00	680.01
720040 0000	40.68	0.00	0.00	40.68	750.00	709.32
720070 0000	322.08	0.00	0.00	322.08	0.00	322.08
730040 0000	0.00	0.00	0.00	0.00	2,000.00	2,000.00
740000 0000	24.00	0.00	0.00	24.00	0.00	24.00
760010 0000	1,048.51	14.25	0.00	1,062.76	0.00	1,062.76
760012 0000	268.81	76.19	0.00	345.00	1,500.00	1,155.00
970000 0000	4,902.62	0.00	0.00	4,902.62	11,591.00	6,688.38
Acct Unit Totals	36,289.06	1,198.03	0.00	37,487.09	85,365.00	47,877.91
Company Totals	36,289.06	1,198.03	0.00	37,487.09	85,365.00	47,877.91
Report Totals	36,289.06	1,198.03	0.00	37,487.09	85,365.00	47,877.91

CHEROKEE NATION - FY2008 BUDGET REQUEST FORM

PART-1

Budget Period:	10/01/07-09/30/08	Budget Preparer	Phone: 5306
Contract Period:	10/01/07-09/30/08	Name:	Laura Adair
Contract Number:		Accounting Unit Director/Manager	Phone:
Accounting Fund:	1 General Fund	Name:	David Roberts
Funding Source:	01 Cherokee Nation	Group Leader	Phone: 5644
AU Description:	Building/Structures/Prop Maint	Name:	Todd Enlow
Accounting Unit:	1012000	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	103030
Date/Time Printed:	14-Aug-08 08:28 AM		

PART-2  
Staffing Summary:

Notes: Funds needed for the Keetoowah Street duplexes renovations and furnishings and monthly recurring expenses. Rental income budgeted in this Mod. Activities 1108009, 1108010, 1108011			
	FY 2008 REVISION 2	FY 2008 REVISION 1	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:			-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>			-

PART-3

Revenues: (Show as positive #)	Account #			Incr \ (Decr)
Other Income	499000	\$50,000	\$50,000	\$ -
Property Rentals	420000	\$2,000		\$ 2,000
Please enter a valid account number - >>>				\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!				
<b>Total Revenues</b>		<b>\$ 52,000</b>	<b>\$ 50,000</b>	<b>\$ 2,000</b>

PART-4

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Supplies	680000	\$15,087				\$ 15,087
Building maintenance	730000	\$271,476		\$256,476		\$ 15,000
Building improvements => \$5K	770030		\$100,000		\$100,000	\$ -
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!						
Expenditures NOT Subject to IDC			\$ 100,000		\$ 100,000	\$ -
Expenditures SUBJECT to IDC		\$ 286,563		\$ 256,476		\$ 30,087
Indirect Cost Rate (If blank or zero, must explain in Notes above)		15.71%		16.97%		
Indirect Cost Allocation	970000	\$ 45,019		\$ 43,524		\$ 1,495
<b>Total Expenditures</b>			<b>\$ 431,582</b>		<b>\$ 400,000</b>	<b>\$ 31,582</b>
<b>Revenues OVER \ (UNDER) Expenditures</b>			<b>\$ (379,582)</b>		<b>\$ (350,000)</b>	<b>\$ (29,582)</b>

Transfers In\Out - (Show ALL as Positive Numbers)

<b>Operating Transfers IN</b>						
Other financing sources	900000					\$ -
Cash in: tribally required	900010					\$ -
Cash in: grant required	900020					\$ -
Cash in: motor fuel tax	900040					\$ -
Cash in: vehicle tax	900050					\$ -
Cash in: interprogram contract	900060					\$ -
<b>Operating Transfers OUT</b>						
Other financing uses	900001					\$ -
Cash out: tribally required	900011					\$ -
Cash out: grant required	900021					\$ -
Cash out: motor fuel tax	900041					\$ -
Cash out: vehicle tax	900051					\$ -
Cash out: interprogram contract	900061					\$ -
<b>Transfers In\Out - Net</b>			\$ -		\$ -	\$ -
Take to Narrative ==>			\$ 431,582		\$ 400,000	
<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>			<b>\$ (379,582)</b>		<b>\$ (350,000)</b>	<b>\$ (29,582)</b>



**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/01/07-09/30/08	Budget Preparer	Phone:
Contract Period:	10/01/07-09/30/07	Name:	K. Shay Smith - 453-5534
Contract Number:		Accounting Unit Director/Manager	Phone:
Accounting Fund:	1-General Fund	Name:	
Funding Source:	01-Cherokee Nation	Group Leader	Phone:
AU Description:	Cherokee National Holiday	Name:	Anna Knight - 453-5532
Accounting Unit:	1013000	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	10-6555
Date/Time Printed:	15-Aug-08 11:03 AM		

Notes: contributions and donations significantly increased due to Holiday sponsorships received and committed

**PART-2**

Staffing Summary:	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:			-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>			

**PART-3**

Revenues: (Show as positive #)	Account #			Incr \ (Decr)
Contributions & donations	480010	\$198,000	\$110,000	\$ 88,000
CN holiday income	493000	\$107,266	\$107,266	\$ -
Please enter a valid account number - >>>				\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!				
<b>Total Revenues</b>		<b>\$ 305,266</b>	<b>\$ 217,266</b>	<b>\$ 88,000</b>

**PART-4**

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Salaries & wages	600000	\$59,087		\$59,087		\$ -
Fringe benefits	610000	\$23,340		\$23,340		\$ -
Staff development & training	620000	\$3,000		\$3,000		\$ -
Travel-staff	630000	\$4,000		\$4,000		\$ -
Contract services >=\$5K	650000		\$8,000		\$0	\$ -
Supplies	680000	\$4,868		\$4,868		\$ -
Allocated: telephone expense	690080	\$1,350		\$1,350		\$ -
Allocated: cell/mobile phone	690090	\$1,500		\$1,500		\$ -
Allocated: mailing cost	690120	\$200		\$200		\$ -
Allocated: printing/copying	690130	\$1,150		\$1,150		\$ -
Allocated: space cost	700080	\$4,846		\$4,846		\$ -
Allocated: insurance cost	710080	\$103		\$103		\$ -
Advertising	740000	\$7,000		\$7,000		\$ -
Other operational	760010	\$330,742		\$258,881		\$ 71,861
Food	760012	\$25,000		\$25,000		\$ -
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!						
<b>Expenditures NOT Subject to IDC</b>			\$ 8,000		\$ -	\$ 8,000
<b>Expenditures SUBJECT to IDC</b>		<b>\$ 466,186</b>		<b>\$ 394,325</b>		<b>\$ 71,861</b>
Indirect Cost Rate (if blank or zero, must explain in Notes above)		16.10%		16.97%		
Indirect Cost Allocation	970000	\$ 75,056		\$ 66,917		\$ 8,139
<b>Total Expenditures</b>			<b>\$ 549,242</b>		<b>\$ 461,242</b>	<b>\$ 88,000</b>

<b>Revenues OVER \ (UNDER) Expenditures</b>		<b>\$ (243,976)</b>		<b>\$ (243,976)</b>	<b>\$ -</b>
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**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>					
Other financing sources	900000				\$ -
Cash in: tribally required	900010				\$ -
Cash in: grant required	900020				\$ -
Cash in: motor fuel tax	900040				\$ -
Cash in: vehicle tax	900050				\$ -
Cash in: interprogram contract	900060				\$ -

<b>Operating Transfers OUT</b>					
Other financing uses	900001				\$ -
Cash out: tribally required	900011				\$ -
Cash out: grant required	900021				\$ -
Cash out: motor fuel tax	900041				\$ -
Cash out: vehicle tax	900051				\$ -
Cash out: interprogram contract	900061				\$ -

<b>Transfers In\Out - Net</b>		<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>
Take to Narrative ==>		<b>\$ 549,242</b>		<b>\$ 461,242</b>	

<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>		<b>\$ (243,976)</b>		<b>\$ (243,976)</b>	<b>\$ -</b>
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**PAYROLL WORKSHEET**

Accounting Unit Description: Cherokee National Holiday For Budget Period 10/01/07-09/30/08 Printed Date 15-Aug-08  
 Accounting Unit Name 1013000 Prepared By: K. Shay Smith - 453-5534 Printed Time 11:03 AM

Job Title	Position Vacant=V New=N Existing=E	Status: Exempt = E Non = N	Salary Range Class	Range Maximum	Emp. #	TOTAL PERSONNEL COST FOR EMPLOYEE			Totals For This Accounting Unit				
						Hourly Rate	Expected Hours To Pay Regular	Expected Wages (Gross)	Series-Status	Fringe Rate%	% Perc.	Expected Wages (Gross)	Expected Fringe Benefits
1 Holiday Director	E	E	P10	\$30.64	10-7068	\$27.58	2,080	\$57,366	10-R-FT	39.50%	100%	\$57,366	\$22,660
2												\$0	\$0
3												\$0	\$0
4												\$0	\$0
47												\$0	\$0
48												\$0	\$0
49												\$0	\$0
50 AU 3% Merit Increase								\$1,721				\$1,721	\$680
<b>Totals</b>											\$59,087	\$23,340	

Please input these totals on the Budget Request Form!

**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/1/07-9/30/08	Budget Preparer	Phone:
Contract Period:		Name:	Anthony Barrow
Contract Number:		Accounting Unit Director/Manager	Phone:
Accounting Fund:	1-General Fund	Name:	Anita Smith
Funding Source:	08-Housing Proceeds	Group Leader	Phone:
AU Description:	Mutual Help Receipts	Name:	David Southerland
Accounting Unit:	1082000	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	Gary Cooper
Date/Time Printed:	26-Aug-08 09:50 AM		

Notes: This budget revision is to include the receipt of insurance proceeds since May 1, 2008.

**PART-2**

**Staffing Summary:**

	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:	7.25	7.25	-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>7.25</b>	<b>7.25</b>	<b>-</b>

**PART-3**

**Revenues:**

(Show as positive #)

Account #			Incr \ (Decr)
496000	Inter-program revenue	\$550,021	\$406,149 \$ 143,872
499000	Other Income	\$300,000	\$300,000 \$ -
	Please enter a valid account number - >>>		\$ -
<b>Total Revenues</b>			
		<b>\$ 850,021</b>	<b>\$ 706,149 \$ 143,872</b>

**PART-4**

**Expenditures:**

Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
	YES	NO	YES	NO	
600000	\$213,971		\$213,971		\$ -
610000	\$83,555		\$83,555		\$ -
620000	\$2,500		\$2,500		\$ -
630000	\$2,500		\$2,500		\$ -
650000		\$295,740		\$150,000	\$ 145,740
670000	\$100,000		\$100,000		\$ -
680000	\$5,000		\$5,000		\$ -
690080	\$15,000		\$15,000		\$ -
690090	\$10,000		\$10,000		\$ -
690120	\$4,000		\$4,000		\$ -
700010	\$5,000		\$5,000		\$ -
720020	\$37,500		\$37,500		\$ -
Please enter a valid account number - >>>					
Please enter a valid account number - >>>					
<b>Expenditures NOT Subject to IDC</b>					
		\$ 295,740		\$ 150,000	\$ 145,740
<b>Expenditures SUBJECT to IDC</b>					
	\$ 479,026		\$ 479,026		\$ -
Indirect Cost Rate (If blank or zero, must explain in Notes above)					
	15.71%		16.10%		
Indirect Cost Allocation 970000					
	\$ 75,255		\$ 77,123		\$ (1,868)
<b>Total Expenditures</b>					
		\$ 850,021		\$ 706,149	\$ 143,872

<b>Revenues OVER \ (UNDER) Expenditures</b>	\$ -	\$ -	\$ -
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**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>					
900000	Other financing sources				\$ -
900010	Cash in: tribally required				\$ -
900020	Cash in: grant required				\$ -
900040	Cash in: motor fuel tax				\$ -
900050	Cash in: vehicle tax				\$ -
900060	Cash in: interprogram contract				\$ -
<b>Operating Transfers OUT</b>					
900001	Other financing uses				\$ -
900011	Cash out: tribally required				\$ -
900021	Cash out: grant required				\$ -
900041	Cash out: motor fuel tax				\$ -
900051	Cash out: vehicle tax				\$ -
900061	Cash out: interprogram contract				\$ -
<b>Transfers In\Out - Net</b>					
		\$ -		\$ -	\$ -

<b>Take to Narrative ==&gt;</b>	\$ 850,021	\$ 706,149	
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<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>	\$ -	\$ -	\$ -
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**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/1/07-9/30/08	Budget Preparer	Phone:
Contract Period:		Name:	Anthony Barrow
Contract Number:		Accounting Unit Director/Manager	Phone:
Accounting Fund:	1-General Fund	Name:	Anita Smith
Funding Source:	08-Housing Proceeds	Group Leader	Phone:
AU Description:	Rural Rental Operating	Name:	David Southerland
Accounting Unit:	1082100	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	Gary Cooper
Date/Time Printed:	26-Aug-08 09:51 AM		

Notes: This budget revision is to include the receipt of insurance proceeds since May 1, 2008.

**PART-2**

Staffing Summary:	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:	4.35	4.35	-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>4.35</b>	<b>4.35</b>	<b>-</b>

**PART-3**

Revenues: (Show as positive #)	Account #			Incr \ (Decr)
Inter-program revenue	496000	\$618,775	\$500,000	\$ 118,775
Please enter a valid account number - >>>				\$ -
Please enter a valid account number - >>>				\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!				
<b>Total Revenues</b>		<b>\$ 618,775</b>	<b>\$ 500,000</b>	<b>\$ 118,775</b>

**PART-4**

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Salaries & wages	600000	\$136,188		\$136,188		\$ -
Fringe benefits	610000	\$53,799		\$53,799		\$ -
Staff development & training	620000	\$3,500		\$3,500		\$ -
Travel-staff	630000	\$3,500		\$3,500		\$ -
Contract services >=\$5K	650000		\$120,455			\$ 120,455
Client services	670000	\$144,034		\$144,034		\$ -
Supplies	680000	\$23,893		\$23,893		\$ -
Allocated: telephone expense	690080	\$8,249		\$8,249		\$ -
Allocated: cell/mobile phone	690090	\$8,000		\$8,000		\$ -
Allocated: mailing cost	690120	\$4,000		\$4,000		\$ -
Utilities	700010	\$8,000		\$8,000		\$ -
Fuel, oil	720020	\$37,500		\$37,500		\$ -
Please enter a valid account number - >>>						\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!						
<b>Expenditures NOT Subject to IDC</b>			\$ 120,455		\$ -	\$ 120,455
<b>Expenditures SUBJECT to IDC</b>		\$ 430,663		\$ 430,663		\$ -
Indirect Cost Rate (If blank or zero, must explain in Notes above)		15.71%		16.10%		
Indirect Cost Allocation	970000	\$ 67,657		\$ 69,337		\$ (1,680)
<b>Total Expenditures</b>			<b>\$ 618,775</b>		<b>\$ 500,000</b>	<b>\$ 118,775</b>

<b>Revenues OVER \ (UNDER) Expenditures</b>		\$ -		\$ -	\$ -
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**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>						
Other financing sources	900000					\$ -
Cash in: tribally required	900010					\$ -
Cash in: grant required	900020					\$ -
Cash in: motor fuel tax	900040					\$ -
Cash in: vehicle tax	900050					\$ -
Cash in: interprogram contract	900060					\$ -
<b>Operating Transfers OUT</b>						
Other financing uses	900001					\$ -
Cash out: tribally required	900011					\$ -
Cash out: grant required	900021					\$ -
Cash out: motor fuel tax	900041					\$ -
Cash out: vehicle tax	900051					\$ -
Cash out: interprogram contract	900061					\$ -
<b>Transfers In\Out - Net</b>			\$ -		\$ -	\$ -
<b>Take to Narrative ==&gt;</b>		\$ 618,775		\$ 500,000		
<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>		\$ -		\$ -		\$ -

**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/1/07-9/30/08	Budget Preparer	Phone:
Contract Period:		Name:	Anthony Barrow
Contract Number:		Accounting Unit Director/Manager	Phone:
Accounting Fund:	1-General Fund	Name:	Leona Allen
Funding Source:	08-Housing Proceeds	Group Leader	Phone:
AU Description:	Low Rent Income	Name:	David Southerland
Accounting Unit:	1082200	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	Shirley Blackfox
Date/Time Printed:	26-Aug-08 09:51 AM		

Notes: This budget revision is to include the receipt of insurance proceeds since May 1, 2008.

**PART-2**

Staffing Summary:	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:	15.78	15.78	-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>15.78</b>	<b>15.78</b>	<b>-</b>

**PART-3**

Revenues: (Show as positive #)	Account #			Incr \ (Decr)
Other Income	499000	\$446,060	\$421,485	\$ 24,575
Please enter a valid account number - >>>				\$ -
Please enter a valid account number - >>>				\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>				
<b>Total Revenues</b>		<b>\$ 446,060</b>	<b>\$ 421,485</b>	<b>\$ 24,575</b>

**PART-4**

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Salaries & wages	600000	\$235,151		\$235,151		\$ -
Fringe benefits	610000	\$92,885		\$92,885		\$ -
Contract services >=\$5K	650000		\$25,991			\$ 25,991
Building maintenance	730000	\$35,000		\$35,000		\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>						
<b>Expenditures NOT Subject to IDC</b>			<b>\$ 25,991</b>		<b>\$ -</b>	<b>\$ 25,991</b>
<b>Expenditures SUBJECT to IDC</b>		<b>\$ 363,036</b>		<b>\$ 363,036</b>		<b>\$ -</b>
Indirect Cost Rate (If blank or zero, must explain in Notes above)		15.71%		16.10%		
Indirect Cost Allocation	970000	\$ 57,033		\$ 58,449		\$ (1,416)
<b>Total Expenditures</b>			<b>\$ 446,060</b>		<b>\$ 421,485</b>	<b>\$ 24,575</b>

<b>Revenues OVER \ (UNDER) Expenditures</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
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**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>						
Other financing sources	900000					\$ -
Cash in: tribally required	900010					\$ -
Cash in: grant required	900020					\$ -
Cash in: motor fuel tax	900040					\$ -
Cash in: vehicle tax	900050					\$ -
Cash in: interprogram contract	900060					\$ -

<b>Operating Transfers OUT</b>						
Other financing uses	900001					\$ -
Cash out: tribally required	900011					\$ -
Cash out: grant required	900021					\$ -
Cash out: motor fuel tax	900041					\$ -
Cash out: vehicle tax	900051					\$ -
Cash out: interprogram contract	900061					\$ -

<b>Transfers In\Out - Net</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
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<b>Take to Narrative ==&gt;</b>	<b>\$ 446,060</b>	<b>\$ 421,485</b>	
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<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
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**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10-1-07-09:30/2008	Budget Preparer	Phone: 5671
Contract Period:		Name:	Kathy Nelson
Contract Number:		Accounting Unit Director/Manager	Phone: 5340
Accounting Fund:	3-Special Revenue	Name:	Angela Drewes
Funding Source:	22-DOI-Self Governance	Group Leader	Phone: 5340
AU Description:	Noxious weed	Name:	Angela Drewes
Accounting Unit:	3221070	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #	106591
Date/Time Printed:	12-Aug-08 11:33 AM		

Notes: Awarded amount over amount previously budgeted by \$384.00. Funding agreement attached - Request No: OSG633. Updated IDC rate.

**PART-2**

**Staffing Summary:**

	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:			-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	-	-	-

**PART-3**

**Revenues:**

(Show as positive #)

Account #	Incr \ (Decr)
Grants / contracts revenue 400000	\$ 384
Carryover: "unappropriated" PY 490010	\$ -
Please enter a valid account number - >>>	\$ -
<b>Total Revenues</b>	<b>\$ 384</b>

**PART-4**

**Expenditures:**

Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
	YES	NO	YES	NO	
Supplies 680000	\$26,259		\$25,648		\$ 611
Please enter a valid account number - >>>					\$ -
<b>Expenditures NOT Subject to IDC</b>		\$ -	\$ -		\$ -
<b>Expenditures SUBJECT to IDC</b>	<b>\$ 26,259</b>		<b>\$ 25,648</b>		<b>\$ 611</b>
Indirect Cost Rate (If blank or zero, must explain in Notes above)	15.71%		16.97%		
Indirect Cost Allocation 970000	\$ 4,125		\$ 4,352		\$ (227)
<b>Total Expenditures</b>		<b>\$ 30,384</b>		<b>\$ 30,000</b>	<b>\$ 384</b>

**Revenues OVER \ (UNDER) Expenditures**

\$ -	\$ -	\$ -
------	------	------

**Transfers In\Out - (Show ALL as Positive Numbers)**

**Operating Transfers IN**

Other financing sources 900000	\$ -
Cash in: tribally required 900010	\$ -
Cash in: grant required 900020	\$ -
Cash in: motor fuel tax 900040	\$ -
Cash in: vehicle tax 900050	\$ -
Cash in: interprogram contract 900060	\$ -

**Operating Transfers OUT**

Other financing uses 900001	\$ -
Cash out: tribally required 900011	\$ -
Cash out: grant required 900021	\$ -
Cash out: motor fuel tax 900041	\$ -
Cash out: vehicle tax 900051	\$ -
Cash out: interprogram contract 900061	\$ -

**Transfers In\Out - Net**

\$ -	\$ -	\$ -
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Take to Narrative ==>

\$ 30,384	\$ 30,000
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**Excess\ (Deficit) of Revenues, Expenditures and Net Transfers**

\$ -	\$ -	\$ -
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REQUEST NO.: OSG633

DEPARTMENT OF THE INTERIOR  
 SELF-GOVERNANCE COMPACT/FUNDING AGREEMENT AND AMENDMENTS  
 AUTHORITY TO OBLIGATE

DATE: May 05, 2008  
 COMPACT NO.: GT-OSGT905-08  
 COMPACT TRIBE/TRIBAL CONSORTIUM: CHEROKEE NATION  
 COMPACT PERIOD: Fiscal Year 2008

DOC REQUEST NO.: 1

ACCT Line	BFY	Program	Description	Current Authority	Increase Decrease	Total Authority
1	08-09	T9240	S/G OIP (2 Year)	\$0	\$9,789,669	\$9,789,669
2	08-09	T9A40	S/G OIP - UTB (2 Year)	\$0	\$30,384	\$30,384
3	2008	F3100	S/G INDIAN RESERVATION ROADS PROGRAM	\$0	\$11,166,383	\$11,166,383
4	2008	F3600	S/G TRIBAL TRANSPORTATION PLANNING	\$0	\$277,961	\$277,961
5	2008	18000	S/G CONSTRUCTION	\$0	\$0	\$0
6	2008	95400	S/G HHS-CHILDCARE DEVELOP	\$0	\$6,671,621	\$6,671,621
7	2008	95500	S/G HHS-N.E.W. AND TANF	\$0	\$0	\$0
8	2008	95700	S/G LABOR-JTFA IV-A, II-B	\$0	\$0	\$0
9	2008	95800	S/G HHS-CHILDCARE BLOCK	\$0	\$3,625,825	\$3,625,825
10	2008	92900	S/G DLM-FIRE MANAGEMENT	\$0	\$49,000	\$49,000
11	08-09	95070	S/G TANF-HHS 2YR	\$0	\$0	\$0
12	08-09	95060	S/G LABOR-WWG (2 YEAR)	\$0	\$0	\$0
13	2008	90210	S/G OST-TRUST IMPROVEMENT	\$0	\$0	\$0
14	2008	90710	S/G OST-TRUST IMPROVEMENT - APPRATSALS	\$0	\$0	\$0
15	2008	22900	S/C MISC. PAYMENTS	\$0	\$0	\$0
Total				\$0	\$31,610,843	\$31,610,843

Authority to Obligate: All conditions and restrictions contained in 12 BIAW Supplement 4 apply to this agreement. You may not exceed this limitation without additional authority signed by the allottee of these funds.

*Marie M. Thomas*  
 Signature of Authorizing Official  
 Director, Office of Self-Governance

MAY 05 2008  
 Date

This Funding Agreement/Amendment is offered under authority of Title IV, P.L. 100-472, P.L. 102-184, and P.L. 93-638 as amended, the Indian Self-Determination and Education Assistance Act.

Listing of Increases/Decreases

Cost Code	Description	Amount
92120 NON TPA	Preparedness 2008 Wildland Fire Preparedness - FIR-001. ROLLUP 92900 TOTAL: \$49,000	\$49,000 ✓
95300 NON TPA	Child Care Development Fund - HHS 2008 Child Care Development Fund (Mandatory) HHS4-002.	\$555 ✓
95300 NON TPA	Child Care Development Fund - HHS 2008 Child Care Development Fund (Mandatory). HHS4-001 ROLLUP 95400 TOTAL: \$6,671,621	\$6,671,066 ✓
95200 NON TPA	Child Care Block Grants - HHS 2008 2nd quarter distribution of CCDF Discretionary funds. HHS1-002	\$601,849 ✓
95200 NON TPA	Child Care Block Grants - HHS 2008 Child Care Development Fund (Discretionary) Final Distribution HHS1-003. ROLLUP 95800 TOTAL: \$3,625,825	\$3,023,976 ✓
F3100 NON TPA	Indian Reservation Road Program 2008 IRR funds - 90% of allocation amount. IRR003 ROLLUP F3100 TOTAL: \$11,166,383	\$11,166,383 ✓
F3600 NON TPA	Tribal Transportation Planning 2008 Planning funds 90% of allocation amount. TTPOC3 ROLLUP F3600 TOTAL: \$277,961	\$277,961 ✓

E9040 TPA/Tribal	Johnson O'Malley 2008 JOM restoration into the E9040 JOM line item. OIP010.	\$1,664,100
H9130 TPA/Tribal	Welfare Assistance 2008 reduction for Welfare Assistance paid in TPA Base. Welfare Assistance will be paid separately in accordance with the BIA distribution methodology.	(\$733,635)
H9130 TPA/Tribal	Welfare Assistance 2008 Welfare Assistance 1st Distribution.	5496,198
J3300 NON TPA	Law Enforcement Projects 2008 Reprogramming to restore Law Enforcement 1.56% rescission OIP094.	56,237
J3300 NON TPA	Law Enforcement Projects 2008 Law Enforcement final Distribution OIP034.	\$393,539
T9130 TPA/Region	Consolidated Tribal Government Program 2008 Other SG transfers to base from Delaware Tribe. OIP010.	\$241,073 ✓
T9240 TPA/Tribal	Self-Governance Compacts 2008 TPA base final OIP010.	\$6,265,693
T9370 TPA/Region	Contract Support 2008 Contract Support Funding OIP024.	\$1,220,855 ✓
T9902 TPA/Tribal	638 Pay Costs 2007 base eligible pay cost @50% balance owed from 2008 appropriations to T9902 Pay cost line item.	\$39,196 ✓
T9902 TPA/Tribal	638 Pay Costs 2008 Pay Cost final.	\$157,217 ✓
T9902 TPA/Tribal	638 Pay Costs 2007 base pay costs @50% from 2007 appropriations to T9902 Pay cost line item.	\$39,196 ✓
	ROLLUP T9240 TOTAL: \$9,789,669	
N3C00 NON TPA	Noxious Weed Eradication 2008 Noxious Weed funds. UTB018	\$30,384 ✓
	ROLLUP T9A40 TOTAL: \$30,304	
	COMPACT TOTAL: \$31,610,843	





**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/01/07 - 09/30/08	Budget Preparer	Phone: 453-5091
Contract Period:	10/01/07 - 09/30/09	Name:	Pat Bark
Contract Number:		Accounting Unit Director/Manager	Phone: 453-5102/5089
Accounting Fund:	3 Special Revenue	Name:	Nancy John
Funding Source:	22-DOI-Self Governance	Group Leader/ Acting Administrator	Phone: 453-5237
AU Description:	Competitive Projects	Name:	Tom Elkins
Accounting Unit:	3221900	<b>1st Person Responsible</b>	
<b>Place IDC Rate in Part 4 Below</b>		Employee #:	
Date/Time Printed:	08-Aug-08 02:21 PM		

Notes: Budget Mod. reflects funding for Water Management (\$5,009) & Tar Creek (\$8,736) in addition to new funding for Tar Creek (\$17,230). Tar Creek total (\$25,966). Budget also reflects IDC Rate change.

**PART-2**

**Staffing Summary:**

	FY 2008 REVISION 2	FY 2008 REVISION 1	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:	0.12	0.11	0.01
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>0.12</b>	<b>0.11</b>	<b>0.01</b>

**PART-3**

**Revenues:**

(Show as positive #)

Account #			Incr \ (Decr)
400000	Grants / contracts revenue	\$30,975	\$13,745
	Please enter a valid account number - >>>		\$ -
	DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!		
	<b>Total Revenues</b>	<b>\$ 30,975</b>	<b>\$ 13,745</b>

**PART-4**

**Expenditures:**

Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
	YES	NO	YES	NO	
600000	\$6,012		\$5,419		\$ 593
610000	\$2,374		\$2,140		\$ 234
630000	\$6,391		\$3,535		\$ 2,856
650000		\$13,009	\$685		\$ 12,324
680000	\$416				\$ 416
690120	\$50		\$60		\$ (10)
710100	\$80				\$ 80
720050	\$204				\$ 204
					\$ -
					\$ -
		\$ 13,009		\$ -	\$ 13,009
	\$ 15,527		\$ 11,839		\$ 3,688
	15.71%		16.10%		
970000	\$ 2,439		\$ 1,906		\$ 533
		\$ 30,975	\$ 13,745		\$ 17,230

**Revenues OVER \ (UNDER) Expenditures**

	\$ -		\$ -	\$ -
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**Transfers In\Out - (Show ALL as Positive Numbers)**

**Operating Transfers IN**

900000	Other financing sources			\$ -
900010	Cash in: tribally required			\$ -
900020	Cash in: grant required			\$ -
900040	Cash in: motor fuel tax			\$ -
900050	Cash in: vehicle tax			\$ -
900060	Cash in: interprogram contract			\$ -

**Operating Transfers OUT**

900001	Other financing uses			\$ -
900011	Cash out: tribally required			\$ -
900021	Cash out: grant required			\$ -
900041	Cash out: motor fuel tax			\$ -
900051	Cash out: vehicle tax			\$ -
900061	Cash out: interprogram contract			\$ -

**Transfers In\Out - Net**

	\$ -		\$ -	\$ -
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**Take to Narrative ==>**

	\$ 30,975		\$ 13,745	
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**Excess\ (Deficit) of Revenues, Expenditures and Net Transfers**

	\$ -		\$ -	\$ -
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**PAYROLL WORKSHEET**

Accounting Unit Description: Competitive Projects For Budget Period: 10/01/07 - 09/30/08 Printed Date: 08-Aug-08  
 Accounting Unit Name: 3221900 Prepared by: Pat Bark Printed Time: 02:21 PM

Job Title	Position Vacant=V New=N Existing=E	Status: Exempt = E Non = N	Salary Range Class	Range Maximum	Emp. #	Hourly Rate		Expected Hours To Pay		Expected Wages (Gross)	Series-Status	Fringe Rate%	Fringe Rate%	Expected Wages (Gross)	Expected Fringe Benefits
						Regular	Overtime	Regular	Overtime						
3 DIRECTOR	E	E	MO7	\$34,96	10-4126	\$27.70		2,080		\$57,616	11-R-FT	39.50%	4%	\$2,305	\$910
5 ENVIRONMENTAL SPECIALIST II	E	E	EVZ	\$25.34	10-5355	\$22.28		2,080		\$46,342	11-R-FT	39.50%	8%	\$3,707	\$1,464
Totals															
Please input these totals on the Budget Request Form!															
Totals															
\$6,012															
\$2,374															

3  
5  
6

OFFICE OF SELF-GOVERNANCE  
1951 CONSTITUTION AVENUE, NW  
WASHINGTON, D.C. 20240  
TELEPHONE 202-219-0245  
FAX 202-219-4246

FACSIMILE TRANSMITTAL SHEET

*From* TO: Vickie Hanvey  
*TO* FROM: John Verwiel

COMPANY: Cherokee Nation DATE: 5/14/2008

FAX NUMBER: 918-458-6157 TOTAL NO. OF PAGES INCLUDING COVER: 4

PHONE NUMBER: 918-453-5391 SENDER'S REFERENCE NUMBER:

RR: DRAWDOWN YOUR REFERENCE NUMBER:

- URGENT     FOR REVIEW     PLEASE COMMENT     PLEASE REPLY     PLEASE RECYCLE

NOTES/COMMENTS:

This drawdown includes 2008 funds for Pay Costs. Please sign and return for processing. Thank you.

*Damage Assessment*  
*veh*

14:01:07 Thu May 15, 2008

ACTION: R SCREEN: RQPM USERID: VFOK  
P638 REQUEST FOR PAYMENT FORM

LAST DATE: 05 15 2008  
VENDOR CODE: OSGT905 C/G: G AGREEMENT NUMBER: 08  
VENDOR NAME: CHEROKEE NATION  
BANK NAME: BANK IV TAHLEQUAH, OK  
LAST ACT:

\* \* \* \* \*  
\* REQUEST NO: 05 \*  
\* PAGE OF \*  
\* NO. AGREEMENTS \*  
\* TOTAL \*  
\* \* \* \* \*

A-L	BUOBT	FYS	PRGRM	JOB NO	DESCRIPTION	AWARDS + MODS	PAYMENTS TO DATE	OUTSTAND OBLIG	PAYMENT REQUEST
009	2008		95800		SG-CCBC	3625825	3625825	0	CLOSED
010	2008		92900		SELF GOVER	49000	49000	0	CLOSED
016	2008		94120		SELF GOV	17230	0	17230	

*Vickie Harvey*

VENDOR \_\_\_\_\_ DATE \_\_\_\_\_ VENDOR \_\_\_\_\_ DATE \_\_\_\_\_  
BIA APPROVING OFFICIAL \_\_\_\_\_ DATE \_\_\_\_\_

\* \* \* \* \*  
\* AGREEMENT TOTAL \*  
\* \$17,230 \*  
\* PAGE 02 OF 02 \*  
\* \* \* \* \*

ENTER <PRT SCR> TO PRINT, ACTION E TO RETURN, ACTION R FOR NEXT PAGE  
ENTER ACTION S AND LAST ACT = Y TO SEE LAST ACTION  
01-LO08E END OF FILE

REQUEST NO.: CSG694

DEPARTMENT OF THE INTERIOR  
 SELF-GOVERNANCE COMPACT/FUNDING AGREEMENT AND AMENDMENTS  
 AUTHORITY TO OBLIGATE

DATE: May 13, 2008

COMPACT NO.: GT-OSGT905-08

DOC REQUEST NO.: 2

COMPACT TRIBE/TRIBAL CONSORTIUM: CHEROKEE NATION

COMPACT PERIOD: Fiscal Year 2008

ACCT Line	BFY	Program	Description	Current Authority	Increase/Decrease	Total Authority
1	08-09	T9240	S/G CIP (2 Year)	\$9,789,669	\$0	\$9,789,669
2	08-09	T9A40	S/G CIP - UIB (2 Year)	\$30,384	\$0	\$30,384
3	2008	F3100	S/G INDIAN RESERVATION ROADS PROGRAM	\$11,166,383	\$0	\$11,166,383
4	2008	F3600	S/G TRIBAL TRANSPORTATION PLANNING	\$277,961	\$0	\$277,961
5	2008	18000	S/G CONSTRUCTION	\$0	\$0	\$0
6	2008	95400	S/G HHS-CHILDCARE DEVELOP	\$6,671,621	\$0	\$6,671,621
7	2008	95500	S/G HHS-N.E.W. AND TANF	\$0	\$0	\$0
8	2008	95700	S/G LABOR-JTFA IV-A, II-B	\$0	\$0	\$0
9	2008	95800	S/G HHS-CHILDCARE BLOCK	\$3,625,825	\$0	\$3,625,825
10	2008	92900	S/G BLM-FIRE MANAGEMENT	\$49,000	\$0	\$49,000
11	08-09	95070	S/G TANF-HHS 2YR	\$0	\$0	\$0
12	08-09	95060	S/G LABOR-WWG (2 YEAR)	\$0	\$0	\$0
13	2008	90210	S/G OST-TRUST IMPROVEMENT	\$0	\$0	\$0
14	2008	90710	S/G OST-TRUST IMPROVEMENT - APPRAISALS	\$0	\$0	\$0
15	2008	22900	S/G MISC. PAYMENTS	\$0	\$0	\$0
16	2008	94120	S/G DAMAGE ASSESSMENT	\$0	\$17,230	\$17,230
Total				\$31,610,843	\$17,230	\$31,628,073

Authority to Obligate: All conditions and restrictions contained in 42 BIA M Supplement 4 apply to this agreement. You may not exceed this limitation without additional authority signed by the allottee of these funds.

*Thomas M. Truman*  
 Signature of Authorizing Official  
 Director, Office of Self-Governance

MAY 14 2008

Date

This Funding Agreement/Amendment is offered under authority of Title V, P.L. 100-472, P.L. 102-184, and P.L. 93-638 as amended, the Indian Self-Determination and Education Assistance Act.

Listing of Increases/Decreases

Post Code	Description	Amount
94100 NON TPA	Damage Assessment	\$17,230
	FY08 NRDAR branch to perform BIA Restoration Program Management activities DAF-001.	
	ROLLUP 94120 TOTAL: \$17,230	
	COMPACT TOTAL: \$17,230	



**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/1/2007 - 9/30/2008	Budget Preparer	Phone: 5290
Contract Period:	10/1/2007 - 9/30/2008	Name:	Bret Hayes
Contract Number:		Accounting Unit Director/Manager	Phone: 5290
Accounting Fund:	3-Special Revenue	Name:	Bret Hayes
Funding Source:	32 IHS-Self Governance-Health	Group Leader	Phone: 5450
AU Description:	Contract Health	Name:	Melissa Gower
Accounting Unit:	3324200	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	
Date/Time Printed:	08-Aug-08 11:24 AM		

Notes: Amendment adds funding received in amendment 11 \$315,464 CHEF funding and amendment 13 \$764,073 CHS increase.

**PART-2**

Staffing Summary:	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:	25.10	25.10	-
# of Regular Part-Time Employee Equivalents:	1.00	1.00	-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>26.10</b>	<b>26.10</b>	<b>-</b>

**PART-3**

Revenues: (Show as positive #)	Account #			Incr \ (Decr)
Grants / contracts revenue	400000	\$12,245,317	\$11,165,780	\$ 1,079,537
Please enter a valid account number - >>>				\$ -
Please enter a valid account number - >>>				\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>				
<b>Total Revenues</b>		<b>\$ 12,245,317</b>	<b>\$ 11,165,780</b>	<b>\$ 1,079,537</b>

**PART-4**

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Salaries & wages	600000	\$742,603		\$742,603		\$ -
Fringe benefits	610000	\$291,374		\$291,374		\$ -
Staff development & training	620000	\$2,500		\$2,500		\$ -
Travel-staff	630000	\$5,000		\$5,000		\$ -
Contract health services >=\$5k	650050		\$10,958,301		\$9,864,750	\$ 1,093,551
Supplies	680000	\$20,000		\$20,000		\$ -
Allocated: telephone expense	690080	\$2,000		\$2,000		\$ -
Allocated: cell/mobile phone	690090	\$6,000		\$6,000		\$ -
Allocated: mailing cost	690120	\$5,000		\$5,000		\$ -
Allocated: printing/copying	690130	\$1,000		\$1,000		\$ -
Lease/rent: furniture & equip	690500	\$2,000		\$2,000		\$ -
Allocated: space cost	700080	\$20,000		\$20,000		\$ -
Allocated: property insurance	710090	\$200		\$200		\$ -
Allocated: auto insurance	710100	\$1,200		\$1,200		\$ -
Employee mileage reimbursement	720040	\$1,400		\$1,400		\$ -
Allocated: GSA vehicle	720050	\$12,000		\$12,000		\$ -
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>						
<b>Expenditures NOT Subject to IDC</b>			<b>\$ 10,958,301</b>		<b>\$ 9,864,750</b>	<b>\$ 1,093,551</b>
<b>Expenditures SUBJECT to IDC</b>		<b>\$ 1,112,277</b>		<b>\$ 1,112,277</b>		<b>\$ -</b>
Indirect Cost Rate (If blank or zero, must explain in Notes above)		15.71%		16.97%		
Indirect Cost Allocation	970000	\$ 174,739		\$ 188,753		\$ (14,014)
<b>Total Expenditures</b>		<b>\$ 12,245,317</b>		<b>\$ 11,165,780</b>		<b>\$ 1,079,537</b>

Revenues OVER \ (UNDER) Expenditures	\$ -	\$ -	\$ -
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**Transfers In\Out - (Show ALL as Positive Numbers)**

Operating Transfers IN			
Other financing sources	900000		\$ -
Cash in: tribally required	900010		\$ -
Cash in: grant required	900020		\$ -
Cash in: motor fuel tax	300040		\$ -
Cash in: vehicle tax	300050		\$ -
Cash in: interprogram contract	900060		\$ -

Operating Transfers OUT			
Other financing uses	900001		\$ -
Cash out: tribally required	900011		\$ -
Cash out: grant required	300021		\$ -
Cash out: motor fuel tax	300041		\$ -
Cash out: vehicle tax	900051		\$ -
Cash out: interprogram contract	900061		\$ -

<b>Transfers In\Out - Net</b>	\$ -	\$ -	\$ -
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Take to Narrative ==>	\$ 12,245,317	\$ 11,165,780	
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<b>Excess(Deficit) of Revenues, Expenditures and Net Transfers</b>	\$ -	\$ -	\$ -
--------------------------------------------------------------------	------	------	------

PAYROLL WORKSHEET

Accounting Unit Description: Contract Health For Budget Period: FY 2008  
 Accounting Unit Name: 3324200 Prepared by: Briet Hayes Printed Date: 08-Aug-08  
 11:28 AM

Job Title	Position Vacant=V New=NE Existing=E	Status: Exempt = E Non = N	Salary Range Class	Emp. #	Employee Name	Hourly Rate		Expected Hours To Pay		Expected Wages (Gross)	Series-Status	Fringe Rate%	% Perc.	Totals For This Accounting Unit	
						Rate	Regular	Overtime	Wages (Gross)					Fringe Benefits	
1 Director	E	E	\$32.87	M7	Hayes, Briet	\$30.83	1,920		\$59,184	10-R-FT	39.50%	100%	\$59,184	\$2,482	
2 Manager	E	E	\$29.87	M5	Cowden, Diana	\$20.51	1,920		\$39,379	10-R-FT	39.50%	100%	\$39,379	\$1,595	
3 Health Lead Claims Auditor	V	N	\$20.15	A07	Vacant	\$12.21	1,920		\$23,443	10-R-FT	39.50%	100%	\$23,443	\$1,260	
4 Health Claims Auditor	E	N	\$17.18	A5	Cain, Kim	\$10.62	1,920		\$20,390	10-R-FT	39.50%	100%	\$20,390	\$4,054	
5 Health Claims Auditor	E	N	\$17.18	A5	Adams, Loreta	\$10.60	1,920		\$20,352	10-R-FT	39.50%	100%	\$20,352	\$4,038	
6 Data Entry Tech	E	N	\$15.68	A4	Hale, Krista	\$10.24	1,920		\$19,661	10-R-FT	22.86%	100%	\$19,661	\$1,766	
7 Claims Clerk	E	N	\$14.16	A3	Johnson, Amanda	\$9.50	1,200		\$11,400	10-R-FT	22.86%	100%	\$11,400	\$2,606	
8 Claims Clerk	E	N	\$14.16	A3	Berry, Vida	\$8.94	1,920		\$16,973	10-R-FT	39.50%	100%	\$16,973	\$6,704	
9 Claims Clerk	E	N	\$14.16	A3	Bear, Blanch	\$8.58	1,920		\$16,474	10-R-FT	39.50%	100%	\$16,474	\$6,507	
10 Health Claims Auditor	V	N	\$17.18	A5	Vacant	\$10.41	1,920		\$19,987	10-R-FT	39.50%	100%	\$19,987	\$7,895	
11 File Clerk	E	N	\$10.82	A1	Wyman, Eva	\$7.53	1,920		\$14,458	10-R-FT	39.50%	100%	\$14,458	\$5,711	
12 Medical Case Manager	E	E	\$29.83	HP26	Scott, Mary	\$26.36	1,920		\$50,611	10-R-FT	39.50%	100%	\$50,611	\$19,991	
13 Medical Case Manager	E	E	\$29.83	HP26	Morgan, Kathy	\$19.62	1,920		\$37,670	10-R-FT	39.50%	100%	\$37,670	\$14,880	
14 Administrative Officer	E	E	\$23.82	M3	Mosler, Lisa	\$11.58	1,920		\$22,234	10-R-FT	39.50%	100%	\$22,234	\$8,782	
15 Managed Care Coordinator	E	N	\$20.15	A7	Gunter, Laura	\$13.25	1,920		\$25,440	10-R-FT	39.50%	100%	\$25,440	\$10,049	
16 Managed Care Coordinator	E	N	\$20.15	A7	Burns, Evie	\$12.86	1,920		\$24,691	10-R-FT	39.50%	100%	\$24,691	\$9,753	
17 Managed Care Coordinator	E	N	\$20.15	A7	Hendrickson, Altrivah	\$13.02	1,920		\$24,998	10-R-FT	39.50%	100%	\$24,998	\$9,874	
18 Managed Care Coordinator	E	N	\$20.15	A7	Gry, Monica	\$13.77	1,920		\$26,438	10-R-FT	39.50%	100%	\$26,438	\$10,441	
19 Health Receptionist Clerk	E	N	\$12.14	A2	Blue, Dorothy	\$7.53	1,920		\$14,458	10-R-FT	39.50%	100%	\$14,458	\$5,711	
20 Health Receptionist Clerk	E	N	\$24.63	P7	Montgomery, Malcolm	\$23.78	1,920		\$45,658	10-R-FT	39.50%	100%	\$45,658	\$18,035	
21 Medical Social Worker-CHH	E	E	\$24.63	P7	Guy, Robert	\$18.39	1,920		\$35,309	10-R-FT	39.50%	100%	\$35,309	\$13,947	
22 Medical Social Worker Asst.	E	N	\$19.86	T5	Andrzej, Kelley	\$14.12	1,920		\$27,110	10-R-FT	39.50%	100%	\$27,110	\$10,708	
23 Administrative Assistant	E	N	\$17.18	A5	Sparks, Kalle	\$10.41	1,920		\$19,987	10-R-FT	39.50%	100%	\$19,987	\$7,895	
24 Health Claims Auditor	V	N	\$20.15	A7	Vacant	\$12.21	1,920		\$23,443	10-R-FT	39.50%	100%	\$23,443	\$9,260	
25 Managed Care Coordinator WWH	N	N	\$17.18	A5	Vacant	\$12.21	1,920		\$23,443	10-R-FT	39.50%	100%	\$23,443	\$9,260	
26 Managed Care Coordinator WWH	N	N	\$17.18	A5	Vacant	\$12.21	1,920		\$23,443	10-R-FT	39.50%	100%	\$23,443	\$9,260	
27 Medical Director	E	N	\$144,23	HO4	Steelberg, Schuyler	\$81.00	1,920		\$155,520	11 R-FT	39.50%	10%	\$155,520	\$6,143	
28									\$0				\$0	\$0	
29									\$0				\$0	\$0	
30									\$0				\$0	\$0	
31									\$0				\$0	\$0	
32									\$0				\$0	\$0	
33									\$0				\$0	\$0	
34									\$0				\$0	\$0	
35									\$0				\$0	\$0	
36									\$0				\$0	\$0	
37									\$0				\$0	\$0	
38									\$0				\$0	\$0	
39									\$0				\$0	\$0	
40									\$0				\$0	\$0	
41									\$0				\$0	\$0	
42									\$0				\$0	\$0	
43									\$0				\$0	\$0	
44									\$0				\$0	\$0	
45									\$0				\$0	\$0	
46									\$0				\$0	\$0	
47									\$0				\$0	\$0	
48									\$0				\$0	\$0	
49									\$0				\$0	\$0	
50									\$0				\$0	\$0	
Totals										\$742,603	\$791,374				

Please input these totals on the Budget Request Form

AMENDMENT NUMBER 13  
to the FY 2008 Annual Funding Agreement  
between the  
Cherokee Nation  
and the  
United States of America  
Department of Health and Human Services

The Funding Agreement, 60G930002 made and entered into on October 1, 2007, by and between the Cherokee Nation and the United States of America, Department of Health and Human Services, is hereby amended as follows:

SUB-SUB ACTIVITY	Previous AFA Total	Increase (Decrease)	Amended AFA Total
Hospitals & Clinics	\$ 32,716,702	\$ 1,082,217	\$ 33,798,919
Dental	\$ 5,398,181	\$ 148,780	\$ 5,546,961
Mental Health	\$ 2,502,651	\$ 70,748	\$ 2,573,399
Alcohol & Substance Abuse	\$ 2,508,213	\$ 185,978	\$ 2,694,221
Public Health Nursing	\$ 2,156,907	\$ 64,300	\$ 2,521,207
Health Education	\$ 491,838	\$ 16,422	\$ 508,260
Community Health Repts	\$ 2,053,464	\$ 12,920	\$ 2,066,384
Direct Operations	\$ 766,297	\$ 12,674	\$ 778,971
Contract Supp Costs - Indirect	\$ 4,475,336	\$ (245)	\$ 4,475,091
OTAL Contract Hill Svs	\$ 10,794,828	\$ 34,073	\$ 11,558,901
Facilities Support	\$ 1,564,306	\$ 1,483	\$ 1,565,798

EFFECT ON AFA AMOUNT/PAYMENTS

Total, FA Amount	\$ 73,324,503	\$ 2,359,360	\$ 75,683,863
Total, FA Retained Services	\$ 0	\$ 0	\$ 0
Total, Amount to be Rec'd	\$ 73,324,503	\$ 2,359,360	\$ 75,683,863

Remarks: This Funding Agreement is amended to add recurring FY 2008 Mandatory increases, rescission and Adj for President's Budget for program and Area.

Effective Date: July 29, 2008

Cherokee Nation

By: Tribal signature not required for this action per AFA Section 10(b).

Principal Chief

Date

United States of America

Department of Health and Human Services

By:

*[Signature]*

Director, Division Health Service

*[Signature]*

Date



AMENDMENT NUMBER 11  
to the FY 2008 Annual Funding Agreement  
between the  
Cherokee Nation  
and the  
United States of America  
Department of Health and Human Services

The Funding Agreement, 60G930002 made and entered into on October 1, 2007, by and between the Cherokee Nation and the United States of America, Department of Health and Human Services, is hereby amended as follows:

SUB-SUB ACTIVITY	Previous AFA Total	Increase (Decrease)	Amended AFA Total
Catastrophic	\$ 0	\$ 315,464	\$ 315,464

EFFECT ON AFA AMOUNT/PAYMENTS

Total FA Amount	\$ 71,919,554	\$ 315,464	\$ 72,235,018
Total FA Retained Services	\$ 0	\$ 0	\$ 0
Total Amount to be Rec'd	\$ 71,919,554	\$ 315,464	\$ 72,235,018

Remarks: This Funding Agreement is amended to add non-recurring FY 2008 CHEF funding.

Effective Date: July 16, 2008

Cherokee Nation

By: Tribal signature not required for this action per AFA Section 10(b).  
Principal Chief

Date

United States of America  
Department of Health and Human Services

By: *[Signature]*  
Director, Indian Health Service

*[Signature]*  
Date

**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/01/07 - 09/30/08	Budget Preparer	Phone:
Contract Period:	10/01/07 - 09/30/08	Name:	Teresa Chaudoin 453-5473
Contract Number:		Accounting Unit Director/Manager	Phone:
Accounting Fund:	3-Special Revenue	Name:	Teresa Chaudoin (IC) 453-5473
Funding Source:	32-IHS-Self Governance-Health	Group Leader	Phone:
AU Description:	Chronic Care Pilot Project	Name:	Melissa Gower (08) 453-5450
Accounting Unit:	3325600	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	107460 Teresa Chaudoin
Date/Time Printed:	08-Aug-08 02:52 PM		

Notes:

**PART-2**

**Staffing Summary:**

	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:			-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>-</b>	<b>-</b>	<b>-</b>

**PART-3**

**Revenues: (Show as positive #)**

Account #	Incr \ (Decr)
Grants / contracts revenue 400000	\$ 5,000
Please enter a valid account number - >>>	\$ -
Please enter a valid account number - >>>	\$ -
<b>Total Revenues</b>	<b>\$ 5,000</b>

**PART-4**

**Expenditures:**

Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
	YES	NO	YES	NO	
Staff development & training 620000	\$6,397		\$4,000		\$ 2,397
Travel-staff 630000	\$2,000				\$ 2,000
Fixtures < \$5K 680060	\$2,922		\$2,922		\$ -
Please enter a valid account number - >>>					\$ -
Please enter a valid account number - >>>					\$ -
<b>Expenditures NOT Subject to IDC</b>		\$ -		\$ -	\$ -
<b>Expenditures SUBJECT to IDC</b>	<b>\$ 11,319</b>		<b>\$ 6,922</b>		<b>\$ 4,397</b>
Indirect Cost Rate (if blank or zero, must explain in Notes above)	15.71%		16.97%		
Indirect Cost Allocation 970000	\$ 1,778		\$ 1,175		\$ 603
<b>Total Expenditures</b>		<b>\$ 13,097</b>		<b>\$ 8,097</b>	<b>\$ 5,000</b>

**Revenues OVER \ (UNDER) Expenditures**

	\$ -	\$ -	\$ -
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**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>					
Other financing sources 900000					\$ -
Cash in: tribally required 900010					\$ -
Cash in: grant required 900020					\$ -
Cash in: motor fuel tax 900040					\$ -
Cash in: vehicle tax 900050					\$ -
Cash in: interprogram contract 900060					\$ -
<b>Operating Transfers OUT</b>					
Other financing uses 900001					\$ -
Cash out: tribally required 900011					\$ -
Cash out: grant required 900021					\$ -
Cash out: motor fuel tax 900041					\$ -
Cash out: vehicle tax 900051					\$ -
Cash out interprogram contract 900061					\$ -
<b>Transfers In\Out - Net</b>		\$ -		\$ -	\$ -
<b>Take to Narrative ==&gt;</b>		\$ 13,097		\$ 8,097	
<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>		\$ -		\$ -	\$ -

INDIAN HEALTH SERVICE  
 Office of Tribal Self-Governance  
 801 Thompson Avenue, Suite 240  
 Rockville, Maryland 20852  
 T/ 301.443.7821 F/ 301.443.1050

OTSG OTSG OTSG OTSG OTSG OTSG OTSG OTSG OTSG OTSG OTSG

*Scan & email  
V. Haney*

TO: Ms. Melanie Knight

ORGANIZATION: Cherokee Nation

FAX #: (918) 458-6157

TELEPHONE #: (918) 456-0671

PAGES: 5 DATE: MAY 28 2008

FROM: M. L. (Susie) Guardipee, Financial Analyst

NOTE: The forms indicated below are attached to document payments being processed to your organization under FYK.Y 08 FA.

- o Amendment (OTSG -870/other)
- o Obligation/Payment Authorization (OTSG-871)
- o Self Governance AFA Table - Cumulative Funding report

**SENSITIVE/CONFIDENTIAL INFORMATION**

The attached information may be confidential. It is intended only for the addressee(s) identified above. If you are not the addressee(s), or an employee or agent of the addressee(s), please note that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this fax in error, please destroy the document and notify the sender of the error.

Should you have trouble receiving this fax, please call 301.443.7821. Thank you!

*Amend 9 Payment 14*

**AMENDMENT NUMBER 9**  
**to the FY 2008 Annual Funding Agreement**  
**between the**  
**Cherokee Nation**  
**and the**  
**United States of America**  
**Department of Health and Human Services**

The Annual Funding Agreement, 60G930002 made and entered into on October 1, 2007, by and between the Cherokee Nation and the United States of America, Department of Health and Human Services, is hereby amended as follows:

SUB-SUB ACTIVITY	Previous AFA Total	Increase (Decrease)	Amended AFA Total
Hospitals & Clinics	\$ 32,710,803	\$ 5,000	\$ 32,715,803

**EFFECT ON AFA AMOUNT/PAYMENTS**

Total, AFA Amount	\$ 71,907,047	\$ 5,000	\$ 71,912,047
Total, AFA Retained Services	\$ 0	\$ 0	\$ 0
Total, Amount to be Rec'd	\$ 71,907,047	\$ 5,000	\$ 71,912,047

Remarks: This Funding Agreement is amended to add non-recurring FY 2008 H&C funds for a Chronic Care Pilot Site.

Effective Date: May 23, 2008

**Cherokee Nation**

By: Tribal signature not required for this action per AFA Section 10(b).  
 Principal Chief

\_\_\_\_\_  
 Date

**United States of America**  
**Department of Health and Human Services**

By: [Signature]  
 Director, Indian Health Service

5/23/08  
 Date

**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/1/06-09/30/2007	Budget Preparer	Phone	5671
Contract Period:		Name:	Kathy Nelson	
Contract Number:		Accounting Unit Director/Manager	Phone:	5340
Accounting Fund:	3-Special Revenue	Name:	Angela Drewes	PE
Funding Source:	45-USDA	Group Leader	Phone:	5340
AU Description:	EQIP	Name:	Angela Drewes	
Accounting Unit:	3453100	1st Person Responsible	Employee #:	106591
Place IDC Rate in Part 4 Below				
Date/Time Printed:	12-Aug-08	11:37 AM		

Notes: This mod request is to increase revenue to process more EQIP practices than the original revenue estimate.

**PART-2**

Staffing Summary:	FY 2008 REVISION 1	FY 2008 ORIG REQUEST	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:			-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	-	-	-

**PART-3**

Revenues: (Show as positive #)	Account #			Incr \ (Decr)
Grants / contracts revenue	400000	\$ 6,370	\$ 5,513	\$ 857
Please enter a valid account number - >>>				\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>				
<b>Total Revenues</b>		<b>\$ 6,370</b>	<b>\$ 5,513</b>	<b>\$ 857</b>

**PART-4**

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Land Management	730030		\$ 6,370		\$ 5,513	\$ 857
Please enter a valid account number - >>>						\$ -
Please enter a valid account number - >>>						\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>						
<b>Expenditures NOT Subject to IDC</b>			\$ 6,370		\$ 5,513	\$ 857
<b>Expenditures SUBJECT to IDC</b>		\$ -		\$ -		\$ -
Indirect Cost Rate (If blank or zero, must explain in Notes above)		15.71%		16.97%		
Indirect Cost Allocation	970000	\$ -		\$ -		\$ -
<b>Total Expenditures</b>			<b>\$ 6,370</b>		<b>\$ 5,513</b>	<b>\$ 857</b>

<b>Revenues OVER \ (UNDER) Expenditures</b>	\$ -	\$ -	\$ -
---------------------------------------------	------	------	------

**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>					
Other financing sources	900000				\$ -
Cash in: tribally required	900010				\$ -
Cash in: grant required	900020				\$ -
Cash in: motor fuel tax	900040				\$ -
Cash in: vehicle tax	900050				\$ -
Cash in: interprogram contract	900060				\$ -

<b>Operating Transfers OUT</b>					
Other financing uses	900001				\$ -
Cash out: tribally required	900011				\$ -
Cash out: grant required	900021				\$ -
Cash out: motor fuel tax	900041				\$ -
Cash out: vehicle tax	900051				\$ -
Cash out: interprogram contract	900061				\$ -

<b>Transfers In\Out - Net</b>	\$ -	\$ -	\$ -
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<b>Take to Narrative ==&gt;</b>	\$ 6,370	\$ 5,513	
---------------------------------	----------	----------	--

<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>	\$ -	\$ -	\$ -
----------------------------------------------------------------------	------	------	------

**Gaylon Thompson**

**From:** Kathy Nelson  
**Sent:** Thursday, August 14, 2008 8:50 AM  
**To:** Gaylon Thompson; Laura Adair  
**Cc:** Angela Drewes; Trent Holland  
**Subject:** EQIP Information

## Environmental Quality Incentives Program (EQIP)

CN was awarded 10 year contracts with the US Department of Agriculture Natural Resource Conservation Service. These contracts are for improvement of tribal grazing units for practices like spraying, fencing, seedbed preparation, fertilizing, pond development, improving timber production, etc. The program is fronted by the Agriculture and Land Development programs until each practice is completed, at which time the CN receives a 50 to 75% cost share return on the practice and at which time a journal entry is completed moving the funds from the EQIP budget to the appropriate budget the work was completed from. Each year NR looks at the scheduled contracts for what practices will be performed that year to get the estimate for the budgets. This year NR had more time to complete additional practices than what was estimated for the year and even did one practice that was not completed last year that changed the estimated amounts from \$5513 to \$6370.

 **Angela E. Drewes**  
 Natural Resources Director  
 453-5340 or 822-2988

*"A good leader is a person who isn't worried about their own career but rather the careers of those who work for them. My advice: Don't worry about yourself. Take care of those who work for you and you'll float to greatness on their achievements."*

-H.S. M. Burns

**From:** Kathy Nelson  
**Sent:** Thursday, August 14, 2008 8:04 AM  
**To:** Angela Drewes  
**Subject:** PLEASE REVIEW ASAP

**From:** Kathy Nelson  
**Sent:** Thursday, August 14, 2008 7:49 AM  
**To:** Trent Holland  
**Subject:** HELP

 **Laura Adair**  
**Sent:** Thursday, August 14, 2008 7:30 AM

8/14/2008

**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/01/07 - 09/30/08	Budget Preparer	Phone: 5375
Contract Period:	10/01/07 - 09/30/08	Name:	Penny Norseworthy/Stephen Walker
Contract Number:		Accounting Unit Director/Manager	Phone: 5346
Accounting Fund:	3-Special Revenue	Name:	Jerry Snell
Funding Source:	56-NAHASDA	Group Leader	Phone: 5787
AU Description:	Rental Assistance Program	Name:	Norma Merriman
Accounting Unit:	3560773	1st Person Responsible	
Place IDC Rate in Part 4 Below		Employee #:	100167
Date/Time Printed:	26-Aug-08 09:52 AM		

**PART-2**

**Staffing Summary:** Notes: Budget reduced by \$75,001.00 cover the expenses of R.A.P. client services due to the dorm assistance payments having to be made for August & September for that program.

	FY 2008 REVISION 2	FY 2008 REVISION 1	Incr \ (Decr)
# of Regular Full-Time Employee Equivalents:	17.00	17.00	-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	<b>17.00</b>	<b>17.00</b>	<b>-</b>

**PART-3**

Revenues: (Show as positive #)	Account #			Incr \ (Decr)
Grants / contracts revenue	400000	\$549,610	\$624,611	\$ (75,001)
Please enter a valid account number - >>>				\$ -
Please enter a valid account number - >>>				\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>				
<b>Total Revenues</b>		<b>\$ 549,610</b>	<b>\$ 624,611</b>	<b>\$ (75,001)</b>

**PART-4**

Expenditures:	Account #	Subject to IDC ?		Subject to IDC ?		Incr \ (Decr)
		YES	NO	YES	NO	
Salaries & wages	600000	\$169,107		\$254,543		\$ (85,436)
Fringe benefits	610000	\$58,965		\$88,760		\$ (29,795)
Staff development & training	620000	\$20,000		\$20,000		\$ -
Supplies	680000	\$70,000		\$27,480		\$ 42,520
Allocated: telephone expense	690080	\$4,000		\$2,877		\$ 1,123
Allocated: cell/mobile phone	690090	\$6,500		\$5,923		\$ 577
Allocated: space cost	700080	\$10,069		\$10,069		\$ -
Allocated: auto insurance	710100	\$6,000		\$4,800		\$ 1,200
Vehicle lease	720000	\$16,000		\$15,900		\$ 100
Allocated: GSA vehicle	720050	\$25,000		\$21,929		\$ 3,071
Building maintenance	730000	\$15,889		\$12,500		\$ 3,389
Capital acquisitions >= \$5K	770000		\$85,000		\$85,000	\$ -
<b>DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!</b>						
<b>Expenditures NOT Subject to IDC</b>			\$ 85,000		\$ 85,000	\$ -
<b>Expenditures SUBJECT to IDC</b>		\$ 401,530		\$ 464,781		\$ (63,251)
Indirect Cost Rate (if blank or zero, must explain in Notes above)		15.71%		16.10%		
Indirect Cost Allocation	970000	\$ 63,080		\$ 74,830		\$ (11,750)
<b>Total Expenditures</b>		<b>\$ 549,610</b>		<b>\$ 624,611</b>		<b>\$ (75,001)</b>

<b>Revenues OVER \ (UNDER) Expenditures</b>		\$ -		\$ -	\$ -
---------------------------------------------	--	------	--	------	------

**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>					
Other financing sources	900000				\$ -
Cash in: tribally required	900010				\$ -
Cash in: grant required	900020				\$ -
Cash in: motor fuel tax	900040				\$ -
Cash in: vehicle tax	900050				\$ -
Cash in: interprogram contract	900060				\$ -

<b>Operating Transfers OUT</b>					
Other financing uses	900001				\$ -
Cash out: tribally required	900011				\$ -
Cash out: grant required	900021				\$ -
Cash out: motor fuel tax	900041				\$ -
Cash out: vehicle tax	900051				\$ -
Cash out: interprogram contract	900061				\$ -

<b>Transfers In\Out - Net</b>		\$ -		\$ -	\$ -
-------------------------------	--	------	--	------	------

<b>Take to Narrative ==&gt;</b>		\$ 549,610		\$ 624,611	
---------------------------------	--	------------	--	------------	--

<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>		\$ -		\$ -	\$ -
----------------------------------------------------------------------	--	------	--	------	------

**CHEROKEE NATION - FY2008 BUDGET REQUEST FORM**

**PART-1**

Budget Period:	10/01/07 - 09/30/08	Budget Preparer	Phone: 5375
Contract Period:	10/01/07 - 09/30/08	Name:	Penny Norseworthy/Stephen Walker
Contract Number:		Accounting Unit Director/Manager	Phone: 5346
Accounting Fund:	3-Special Revenue	Name:	Jerry Snell
Funding Source:	56-NAHASDA	Group Leader	Phone: 5787
AU Description:	R.A.P. - Client Services	Name:	Norma Merriman
Accounting Unit:	3560776	1st Person Responsible	Employee #: 100167
Place IDC Rate in Part 4 Below			
Date/Time Printed:	26-Aug-08 09:52 AM		

**PART-2**

Notes: Funding increased by \$75,001.00 to cover client services dorm expenses for August & September. Funds received from R.A.P.-Admin.			
<b>Staffing Summary:</b>	<b>FY 2008 REVISION 3</b>	<b>FY 2008 REVISION 2</b>	<b>Incr \ (Decr)</b>
# of Regular Full-Time Employee Equivalents:			-
# of Regular Part-Time Employee Equivalents:			-
# of Temp. Full-Time Employee Equivalents:			-
# of Temp. Part-Time Employee Equivalents:			-
# of Other Employee Equivalents:			-
<b>TOTAL NUMBER OF EMPLOYEE-EQUIVALENTS</b>	-	-	-

**PART-3**

<b>Revenues:</b> (Show as positive #)	<b>Account #</b>			<b>Incr \ (Decr)</b>
Grants / contracts revenue	400000	\$3,575,001	\$3,500,000	\$ 75,001
Please enter a valid account number - >>>				\$ -
Please enter a valid account number - >>>				\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!				\$ -
<b>Total Revenues</b>		<b>\$ 3,575,001</b>	<b>\$ 3,500,000</b>	<b>\$ 75,001</b>

**PART-4**

<b>Expenditures:</b>	<b>Account #</b>	<b>Subject to IDC ?</b>		<b>Subject to IDC ?</b>		<b>Incr \ (Decr)</b>
		<b>YES</b>	<b>NO</b>	<b>YES</b>	<b>NO</b>	
Sub-Grants => 5K	660050		\$1,750,000		\$1,750,000	\$ -
Client Services (non-subject to I.D.C.)	670005		\$1,825,001		\$1,750,000	\$ 75,001
Please enter a valid account number - >>>						\$ -
DO NOT COPY TO, COPY BELOW, OR REMOVE THIS LINE!						\$ -
<b>Expenditures NOT Subject to IDC</b>			<b>\$ 3,575,001</b>		<b>\$ 3,500,000</b>	<b>\$ 75,001</b>
<b>Expenditures SUBJECT to IDC</b>			<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>
Indirect Cost Rate (If blank or zero, must explain in Notes above)		15.71%		16.10%		
Indirect Cost Allocation	970000		\$ -		\$ -	\$ -
<b>Total Expenditures</b>			<b>\$ 3,575,001</b>		<b>\$ 3,500,000</b>	<b>\$ 75,001</b>

<b>Revenues OVER \ (UNDER) Expenditures</b>		\$ -	\$ -	\$ -
---------------------------------------------	--	------	------	------

**Transfers In\Out - (Show ALL as Positive Numbers)**

<b>Operating Transfers IN</b>						
Other financing sources	900000					\$ -
Cash in: tribally required	900010					\$ -
Cash in: grant required	900020					\$ -
Cash in: motor fuel tax	900040					\$ -
Cash in: vehicle tax	900050					\$ -
Cash in: interprogram contract	900060					\$ -

<b>Operating Transfers OUT</b>						
Other financing uses	900001					\$ -
Cash out: tribally required	900011					\$ -
Cash out: grant required	900021					\$ -
Cash out: motor fuel tax	900041					\$ -
Cash out: vehicle tax	900051					\$ -
Cash out: interprogram contract	900061					\$ -

<b>Transfers In\Out - Net</b>		\$ -	\$ -	\$ -
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<b>Take to Narrative ==&gt;</b>		\$ 3,575,001	\$ 3,500,000	
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<b>Excess\ (Deficit) of Revenues, Expenditures and Net Transfers</b>		\$ -	\$ -	\$ -
----------------------------------------------------------------------	--	------	------	------



# Cherokee Nation Act/Resolution Proposal Form

Act       Resolution

AN ACT AMENDING LEGISLATIVE ACT #37-07  
AUTHORIZING THE COMPREHENSIVE BUDGET FOR  
FISCAL YEAR 2008 – Mod. 11

**TITLE:** ; AND DECLARING AN EMERGENCY

**DEPARTMENT CONTACT:** Tamsye Dreadfulwater-Leake

**RESOLUTION PRESENTER:** \_\_\_\_\_

**SPONSOR:** \_\_\_\_\_

**NARRATIVE:** (See Attached Outline for Information If Outline is Required)

03-14-08P02:51 RCVD

**ADMINISTRATIVE  
CLEARANCE**

**Program/Project Manager:**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**Department Director:**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**Executive Director:**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**Controller: (if needed)**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**Government Resources:**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**Administration Approval:**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**LEGISLATIVE CLEARANCE:**

**Legislative Aide:**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**Standing Committee & Date:**

**Chairperson:**

Signature/Initial \_\_\_\_\_ Date \_\_\_\_\_

**Returned to Presenter:**

Date \_\_\_\_\_

*[Handwritten signatures and dates in the Administrative Clearance section:]*  
 Controller: *[Signature]*  
 Administration Approval: *[Signature]* 8/18/08

*[Handwritten signatures and dates in the Legislative Clearance section:]*  
 Legislative Aide: *[Signature]* 8/18/08  
 Standing Committee & Date: *Executive + Finance*  
 Chairperson: *[Signature]* 8/28/08