

Stockbridge-Munsee Community

FY-2021 Per Capita

Application Instructions

The Stockbridge-Munsee Community Enrollment Department is required to keep complete and accurate records for purposes relating to individual tribal members and their per capita distributions. It is important that you update your mailing address with the tribe on a regular basis.

ELIGIBILITY

- Adult enrolled members (age 18 yrs. by October 30th, 2021)
- Enrolled by June 1st, 2021 with the Stockbridge-Munsee Community
- Deceased members alive as of June 1st, 2021 (Payable to the estate of the member)

CHANGE OF INFORMATION

- Name Changes
 - Submit a copy of legal documentation, marriage license, or I.D. to verify the change
- Guardianship or Power of Attorney
 - Submit a copy of legal documentation verifying guardian or power of attorney status
- Address changes OR Payment changes (after Per Capita Application is submitted)
 - Resubmit a new Per Capita Application

SUBMIT PER CAPITA APPLICATIONS

- Submit COMPLETE Per Capita Applications

BY-MAIL or deliver IN-PERSON to: *Stockbridge-Munsee Community*
Enrollment Department

Hours of Operation
Monday to Friday
8:00 AM – 4:30 PM

P.O. Box 70
Bowler, WI 54416

PER CAPITA APPLICATION DEADLINE

- Applications MUST be received by the Enrollment Department ON or BEFORE:
Friday, August 27th, 2021 at 4:30 p.m. to receive payment AFTER October 30th, 2021
NO EXCEPTIONS!

NOTARIZATION OR SIGNATURE OF ENROLLMENT OFFICIAL

- Per Capita Applications may be submitted:
 - **IN-PERSON:** WITHOUT notarization if delivered IN-PERSON to the Enrollment Department
 - **BY-MAIL:** MUST be notarized if submitted BY-MAIL

INCOMPLETE PER CAPITA APPLICATIONS

- Incomplete applications will not be processed & will be returned BY-MAIL
- Faxes or copies will not be processed (MUST submit original application)

PER CAPITA PAYMENT AMOUNT

- Payment amount (before taxes) for FY-2021: **\$1,000**
- **Payments will be issued AFTER:** **October 30th, 2021**
- **DIRECT DEPOSIT**
 - If you do not receive your Per Capita payment after October 30, 2021, the funds may have been rejected by your bank
 - If the bank rejects the payment, a check will be mailed to the address listed on the application
- **CHECK BY MAIL**
 - If you are receiving a check BY-MAIL, please allow time for delivery
 - You may request a stop payment or check re-issue after November 20, 2021
 - If you have not received your Per Capita payment by November 20, 2021, please contact:
Enrollment Department at (715) 793-4677; (715)793-4671;(715) 793-3049

PER CAPITA INCOME

- Need-based benefit programs may be affected by per capita distributions. Please consult with your caseworker or the appropriate agency if you have any questions or concerns



Stockbridge-Munsee Community

FY-2021 PER CAPITA APPLICATION

DEADLINE: FRIDAY, AUGUST 27th, 2021 at 4:30 p.m.

PRINT CLEARLY

Return **ORIGINAL** completed form to:
Stockbridge-Munsee Community
Enrollment Department
P.O. Box 70, N8476 MohHeConNuck Rd.
Bowler, WI 54416

Section 1: Member Information

Enrollment No.: _____ DOB (MM/DD/YYYY): _____ Last 4-Digits of SSN: XXX-XX-_____

Full Legal Name: _____
First Middle Last Suffix/Maiden (if any)

Contact Info: Primary Phone: () _____ Mobil Phone: () _____

Email Address (required for direct deposit): _____

List address for all tribal mail/correspondence below:

Mailing Address: _____
Street or P.O. Box / Apt. # City / State / Zip Code

DIFFERENT Address for Check: Complete if you would like your Per Capita check sent to a different address than your mailing address.

Address: _____
Street / P.O. Box / Apt. # City / State / Zip Code

Section 2: Payment Type

I choose to **DENY** the FY-2021 Per Capita Payment

I choose to **ACCEPT** the FY-2021 Per Capita Payment:

SEND CHECK BY MAIL (Payments will be mailed out AFTER October 30th, 2021)

DIRECT DEPOSIT (Payments will be Direct Deposited AFTER October 30th, 2021)

Action Type (check one):

Use Existing Direct Deposit

New OR Change Direct Deposit

Account Type (check one):

Checking

Savings

Other (specify): _____

Bank Information

Bank Name: _____

Bank Routing Number: _____

Bank Account Number: _____

NOTE: If NEW Direct Deposit, you MUST attach a voided check/bank document verifying routing/account numbers.

Section 3: Member Signature & Notarization

- I have read and understand the FY-2021 Per Capita Application Instructions that accompany this form.
- If my Per Capita Payment is being disbursed by direct deposit and the bank rejects the payment, I understand that a check will be sent by mail to the address listed on this form.
- I, the undersigned, do hereby certify under penalty of perjury, that all the information on this form is true and correct.

MEMBER SIGNATURE: _____ DATE: _____

Signature by Power of Attorney (POA) or Guardian (include documentation).

(SEAL/STAMP)

**CERTIFICATE OF NOTARY PUBLIC OR
Stockbridge-Munsee Enrollment Official**

The above-named person came before me

This _____ day of _____, 20_____

NOTARY PUBLIC OR Enrollment Official Signature: _____

My commission expires: _____