BOARD OF DIRECTORS SPECIAL MEETING
KEWADIN CASINO AND CONVENTION CENTER
SAULT STE. MARIE, MICHIGAN
September 25, 2025
3:00 P.M.
(or conclusion of the KGA Meeting)

I. CALL TO ORDER

II. ROLL CALL

III. RESOLUTIONS:
- Accept 2024 Governmental Audit
- Approval of Agreement – JKLFC/SSMAPS
- Health – FY25 BEMAR Projects
- Waiver of Immunity MDHHS
- Accept State Opioid Response 4 Funds
- Auth. Chairman to Negotiate/Execute CCER Agreements
- Auth. Change Signers – Flagstar Bank
- Auth. Change Signers – Sovereign Bank
- Auth. Change Signers – Soo Coop CU
- Auth. Change Signers – Peoples State Bank
- Auth. Change Signers – Nicolet National Bank
- Auth. Change Signers – Huntington Bank
- Auth. Change Signers – Central Savings Bank
- Auth. Change Signers – PNC Bank

IV. ADJOURN TO EXECUTIVE SESSION

V. RECONVENE AND REAFFIRM

VI. ADJOURN

RESOLUTION NO: _____

ACCEPTANCE OF THE 2024 GOVERNMENTAL AUDIT

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, as amended.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians, as accepted by the Audit Committee on September 24, 2025, hereby accepts the 2024 Governmental Audit as presented by their Auditors: Dennis, Gartland, & Niergarth.

BE IT FURTHER RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians also approves the Chairman and CFO to execute any and all documents associated with the FY24 Audit including the Client Representation Letter.

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

APPROVAL OF AGREEMENT BETWEEN JKL FIDUCIARY COMMITTEE AND SAULT STE. MARIE AREA PUBLIC SCHOOLS

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians ("Tribe") is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, as amended; and

WHEREAS, the JKL Fiduciary Committee was established on May 1, 2005 subsequently reauthorized and approved in Resolution 2006-30 to be composed of Board Members of the Sault Ste. Marie Tribe of Chippewa Indians; and

WHEREAS, at the JKL Fiduciary Committee meeting on September 9, 2025 the committee approved an agreement for the 2025-2026 and 2026-2027 school years with Sault Ste. Marie Area Public Schools for education services not to exceed $200,000 per school year.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby approves the agreement between JKL Fiduciary Committee and Sault Ste. Marie Area Public Schools.

BE IT FURTHER RESOLVED, the Board of Directors hereby authorizes the Chairman or his designee to execute any and all documents to carry out the intent of this resolution.

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

HEALTH DIVISION – FY25 BEMAR PROJECTS

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, as amended; and

WHEREAS, the Health Division's mission is to provide high quality, patient-centered health care that is responsive, courteous, and sensitive to individual, family, community, and cultural needs with an emphasis on disease prevention and health promotion; and

WHEREAS, the Indian Health Service (IHS) assisted in completing Backlog of Essential Maintenance, Alteration and Repair (BEMAR) projects for the Gladstone Health Facility, Manistique Health Center, Sault Ste Marie Health Center and the Munising Health Center; and

WHEREAS, the Indian Health Service has approved $1,486,500.00 of FY2025 BEMAR funding to address architectural, electrical, and mechanical deficiencies for the Gladstone, Manistique, Munising and Sault Ste Marie Health Centers; and

WHEREAS, the project proposes improvements, replacements and or renovations to address thirty-nine (39) BEMAR items; and

WHEREAS, the Sault Tribe Health Division seeks authority to accept this funding to address the IHS identified BEMAR deficiencies.

NOW, THEREFORE, BE IT RESOLVED, the Sault Tribe Board of Directors authorizes the Health Division to accept $1,486,500 of IHS BEMAR Funds.

BE IT FURTHER RESOLVED, that the Board of Directors hereby authorizes and approves the Health Division CEO, or their designee, to execute any and all documents as may be necessary and appropriate to carry out the terms, conditions, and intent of this resolution.

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

WAIVER OF SOVEREIGN IMMUNITY AND CONSENT TO WAIVER OF TRIBAL COURT JURISDICTION MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

BE IT RESOLVED, by the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians, as follows:

Section 1 FINDINGS AND DETERMINATIONS:

The Board of Directors finds and determines that:

1.1 The Sault Ste. Marie Tribe of Chippewa Indians ("Tribe") is a federally recognized Indian Tribal Government organized under the provisions of the Indian Reorganization Act of 1934.

1.2 The Tribe wishes to enter into a Tribal Opioid Settlement Fund Grant Agreement ("Agreement") with the State of Michigan Department of Health and Human Services ("Grantor") on behalf of the Tribal Health Centers; and

1.3 The Grantor developed the Grant language for all tribe's and requires a waiver of sovereign immunity and is open to revisiting the language for future grants; and

1.4 In order to enter into the Agreement, the Tribe is required to confirm that the Tribe and all other entities claiming by, through or under the Tribe will not claim sovereign immunity or exclusive Tribal Court jurisdiction with respect to any disputes or causes of action between the Tribe and Grantor that might arise from, or relate to, in any respect, the Agreement, or object to the venue clauses found in the Agreement. All the foregoing are referred to herein as the "Waiver and Consent Obligations"; and

1.5 The Tribe and Grantor are negotiating future language to incorporate into these agreements that would not require a waiver of sovereign immunity; and

1.6 It is in the Tribe's interest to resolve as stated herein.

Section 2 WAIVER OF SOVEREIGN IMMUNITY; CONSENT TO JURISDICTION; GOVERNING LAW

2.1 The Tribe hereby waives its sovereign immunity from suit in favor of Grantor only should an action be commenced under the Agreement referenced above.

This waiver:

Shall terminate upon performance by the Tribe of all of its obligations under the Agreement; and

Is granted solely to Grantor; and

Shall extend to inter alia, any judicial or non-judicial action, including, but not limited to, any lawsuit, arbitration, and judicial or non-judicial action to resolve disputes between the Tribe and Grantor and the assertion of any claim in a court of competent jurisdiction or with any arbitrator or arbitration panel to enforce the obligations under the Agreement; and

Shall be enforceable only in a court of competent jurisdiction, including the Michigan Court of Claims located in Ingham County; and

Shall be enforceable against the assets of the Tribe to the extent necessary to satisfy the Tribe's obligation in the Agreement; and

The Agreement, and other associated documents shall be construed in accordance with and governed by all applicable laws and regulations of governmental bodies with competent jurisdiction, as set forth in such documents.

Section 3. WAIVER OF TRIBAL COURT JURISDICTION

3.1 The Board of Directors waiver the exclusive jurisdiction of the Tribal Court over any action arising under the Agreement. The Board authorized the Tribe to consent to the jurisdiction of any courts with competent jurisdiction, including any courts to which decisions may be appealed, with respect to any controversies arising from this resolution or any of the finance documents, note or Agreement.

Section 4. EFFECTIVE DATE

4.1 This waiver shall become effective upon the final execution of the Agreement executed by the Chairman or his designee. Failure or refusal of any individual to execute the Agreement shall render the waivers and consents granted in this resolution to become void immediately. Failure or refusal to execute the Agreement prior to the close of business on January 1, 2026, shall render the waivers and consents granted in this resolution to become void immediately.

Section 5. AUTHORIZATION

5.1 T The CEO of Health Services or his designee is authorized to execute any and all documents to effectuate the forgoing.

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

HEALTH DIVISION – STATE OPIOID RESPONSE 4 (SOR4)

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, as amended; and

WHEREAS, the Health Division's mission is to provide high quality, patient-centered health care that is responsive, courteous, and sensitive to individual, family, community, and cultural needs with an emphasis on disease prevention and health promotion; and

WHEREAS, the Substance Abuse and Mental Health Services (SAMSHA) through the Michigan Department of Health and Human Services (MDHHS) has provided a funding opportunity through the State Opioid Response 4 (SOR4); and

WHEREAS, the Inter-Tribal Council of Michigan (ITC) has received SOR4 funding to help support Tribal Nations improve access to treatment and recovery support services for uninsured or under-insured American Indian/Alaskan Natives (AI/AN) with an opioid use disorder (OUD) and/or stimulant use disorder; and

WHEREAS, the Sault Tribe Health Division submitted a Letter of Interest for SOR4 sub-recipient funds that will assist the MAT Clinic meet the growing needs of our community through positive community response to accessible and culturally responsive enhanced recovery support services.

NOW, THEREFORE, BE IT RESOLVED, the Sault Tribe Board of Directors authorizes the Health Division's acceptance for the SOR4 Sub-Recipient Funds in the amount of $160,000.

BE IT FURTHER RESOLVED, that the Board of Directors hereby authorizes and approves the Health Division CEO, or their designee, to execute any and all documents as may be necessary and appropriate to carry out the terms, conditions, and intent of this resolution.

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION FOR TRIBAL CHAIR TO NEGOTIATE AND EXECUTE AGREEMENTS UNDER THE CCER MOU WITH USDA

WHEREAS, the Sault Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, as amended; and

WHEREAS, the mission of the Sault Ste. Marie Tribe of Chippewa Indians is to provide for the perpetuation of our way of life and the welfare and prosperity of our people, to preserve our right to self-government, and protect our property and resources as ordained by the establishment of our constitution and bylaws; and

WHEREAS, the Sault Tribe Natural Resources Division, Gidayaangwaami'idimin Ezhi-inawendiyang, is responsible for supporting Sault Tribe stewardship of 1836 Treaty Ceded Territory lands, waters, and non-human relatives; and

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is committed to the stewardship, protection, and restoration of Anishinaabe homelands, waters, and culturally significant ecosystems for the benefit of present and future generations; and

WHEREAS, the Tribe exercises its sovereignty and inherent rights through governance, research, and co-management of natural resources, including through the Natural Resources Division (NRD), which is responsible for advancing conservation, restoration, and co-stewardship; and

WHEREAS, the NRD and the Consortium for Cooperative Ecological Resilience (CCER) have established a Memorandum of Understanding (MOU) with the U.S. Department of Agriculture (USDA), Forest Service, Northern Research Station (FS Agreement No. 25-MU-11242300-034) to strengthen government-to-government relationships, advance ecological resilience, secure research and education funding, and foster future Tribal leadership in shared stewardship; and

WHEREAS, through this MOU, funding opportunities may become available from the USDA, Forest Service, Northern Research Station to support collaborative research, ecological resilience, and shared stewardship initiatives under the described MOU.

NOW, THEREFORE, BE IT RESOLVED, that the Sault Tribe Board of Directors hereby authorizes the Tribal Chairman, or his designee, to negotiate and execute agreements related to this MOU, including any associated funding agreements,to accept funding on behalf of the Tribe and CCER.

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS
WITH FLAGSTAR BANK

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with Flagstar Bank. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Senior Accountant - Julie Hagan
Comptroller - Lisa Sawruk
Executive Assistant - Heather Weber

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS
WITH SOVEREIGN BANK

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with Sovereign Bank. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Comptroller - Lisa Sawruk
Executive Assistant- Heather Weber
Controller, DCN - Jan Lehenbauer
Accountant - Sydny Hagan

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS
WITH SOO CO-OP CREDIT UNION

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with Soo Co-Op Credit Union. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Senior Accountant- Julie Hagan
Comptroller- Lisa Sawruk
Executive Assistant- Heather Weber

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS
WITH PEOPLES STATE BANK

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with Peoples State Bank. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Senior Accountant- Julie Hagan
Comptroller- Lisa Sawruk
Executive Assistant- Heather Weber

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS
WITH NICOLET NATIONAL BANK

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with Nicolet National Bank. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Senior Accountant - Julie Hagan
Comptroller - Lisa Sawruk
Executive Assistant - Heather Weber

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS WITH HUNTINGTON BANK

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with Huntington Bank. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Senior Accountant - Julie Hagan
Comptroller - Lisa Sawruk
Executive Assistant - Heather Weber

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS
WITH CENTRAL SAVINGS BANK

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with Central Savings Bank. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Senior Accountant- Julie Hagan
Comptroller- Lisa Sawruk
Executive Assistant- Heather Weber

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

RESOLUTION NO: _____

AUTHORIZATION TO CHANGE SIGNERS
WITH PNC BANK

WHEREAS, the Sault Ste. Marie Tribe of Chippewa Indians is a federally recognized Indian Tribe organized under the Indian Reorganization Act of 1934, 25 U.S.C. 467 et seq; and

WHEREAS, it is necessary for the Tribe to amend its current bank signature card(s) to transact activities.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Sault Ste. Marie Tribe of Chippewa Indians hereby authorizes the CFO or her designee, to prepare and establish the necessary signature cards with PNC Bank. Said accounts will require the signatures of two of the signatories, listed in the attached.

BE IT FINALLY RESOLVED, that the Board of Directors grants inquiry access to these accounts for obtaining transactional information to the following Finance Department staff:

Senior Accountant- Julie Hagan
Comptroller- Lisa Sawruk
Executive Assistant- Heather Weber

C E R T I F I C A T I O N

We, the undersigned, as Chairman and Secretary of the Sault Ste. Marie Tribe of Chippewa Indians, hereby certify that the Board of Directors is composed of 13 members, of whom _____ members constituting a quorum were present at a meeting thereof duly called, noticed, convened, and held on the _____ day of _____ 2025; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of _____ members for, _____ members against, _____ members abstaining, and that said resolution has not been rescinded or amended in any way.

_____
Austin Lowes, Chairman
Sault Ste. Marie Tribe of
Chippewa Indians

_____
Kimberly Hampton, Secretary
Sault Ste. Marie Tribe of
Chippewa Indians

BOARD OF DIRECTORS SPECIAL MEETING

April 29, 2025
Sponsor's List

RESOLUTIONS:

Acceptance of the 2024 Governmental Audit – Bill Connolly
Approval of Agreement between JKL Fiduciary Committee and Sault Ste. Marie Area Public Schools – Stephanie Sprecker
Health Division – FY25 BEMAR Projects – James Benko
Waiver of Sovereign Immunity and Consent to Waiver of Tribal Court Jurisdiction Michigan Department of Health and Human Services – James Benko/Josh Elliot
Health Division – State Opioid Response 4 (SOR4) – James Benko
Authorization for the Tribal Chair to Negotiate and Execute Agreements under the CCER MOU with USDA – Dani Fegan
Authorization to Change Signers with Flagstar Bank – Holly Haapala
Authorization to Change Signers with Sovereign Bank – Holly Haapala
Authorization to Change Signers with Soo Co-Op Credit Union – Holly Haapala
Authorization to Change Signers with Peoples State Bank – Holly Haapala
Authorization to Change Signers with Nicolet National Bank – Holly Haapala
Authorization to Change Signers with Huntington Bank – Holly Haapala
Authorization to Change Signers with Central Savings Bank – Holly Haapala
Authorization to Change Signers with PNC Bank – Holly Haapala