

State, Tribe or Territory (and grant official):
MaChis Lower Creek Indian Tribe of Alabama
Nancy Carnley, LIHEAP Coordinator

Date: August 12, 2010
Fiscal Year: 2011

- **RECENT AUDIT FINDINGS**

1. Forging checks by a tribal member with mental illness.

RESLOVED OR CORRECTION

1. Money was replaced by the tribal government.
2. Money is being repaid to the tribal government by the person, and community service.
3. Checkbooks are locked in a box and kept in the vault.
4. Paperwork was filed with the bank regarding unauthorized use, forgery. Complaint was filed with the local law enforcement agency.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

1. No unauthorized use of checks.

RELEVANT POLICY DOCUMENTS – PREVENTION OF FORGERY

All checks are to be locked up in a lock box, kept in the second part of the vault.

The keys to the vault and lock box are to be kept in the filling cabinet that is to stay locked at all times.

Checks are to be written when no clients are present.

File police report, forgery paperwork with the bank.

Seek prosecution.

NOTE: These federal expenditures are then combined to determine the total amount expended during the year. Any recipient whose total federal expenditures during a year equal or exceed \$500,000 requires a Single Audit. If the recipient does not meet this threshold, a Single Audit is not required, although the recipient may elect to have a program-specific audit (an audit of a single federal program, without auditing the entire entity).

- **COMPLIANCE MONITORING**

1. Verifying all household members.
2. Verifying legal U. S. Citizen status
3. Verifying income for all household members.
4. Verifying incarnation status of household members.
5. Verifying separation status of household members.
6. Verifying vendor status.

7. Verifying the living status of an individual.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

1. The households members will be verified; therefore preventing nonhousehold members from being used.
2. The legal status of the household members will be verified. Preventing non U. S. Citizens from obtaining assistance.
3. Verifying all income from clients.
 - A. Social Security: The letter that is provided to the client from United States Department of Social Security.
 - B. Unemployment: The letter that is provided by the Alabama Department of Employment.
 - C. Employer: A form that will be provided to the Employer to be completed for gross wages for the year.
 - D. Self Employed: The tax return for the year that was recently filled.
 - E. No income: This person will have to provide proof how household expenses are being taken care of. Food stamps, Medicaid, TANF, Family, friends, etc.
 - F. Workman Compensation: A letter from the Workman compensation insurance company, or employer stating the amount that is received.
 - G. Disability Insurance: A letter from the Disability Insurance Company stating the amount.
 - H. Other income will be verified from a letter from the source.
4. The incarnation status can be verified by using the Alabama Department of Corrections. The incarnation of city, county, inmates cannot be verified.
5. The verification of separation status the client will require that the spouse must provide proof of residency which would require lease agreement, utilities e.g. water, electricity, gas in the nonresident spouse.
6.
 - A. The vendor will be verified through the Chamber of Commerce, listing with the Alabama Secretary of State. Note All Vendors that we work with are known. We do not use any non commercial vendors.
 - B. If a vendor that provide wood, such as an individual. This person would have to give a copy of the business license. The business license would be verified with the issuing agency.
7. The living status of the household members can be verified by checking the Social Security web site for deaths the website is as follows: Also, the local obituaries of the

newspapers can be checked and some of the funeral homes are on line, and the list of deaths is given.

RELEVANT POLICY DOCUMENTS HOUSEHOLD MEMBERS

The Ma-Chis Lower Creek Indian Tribe of Alabama only serves tribal members.

The member must have a tribal citizen roll number. Must have an id. If client does not have an id, the person will be verified on the tribal citizen by the enrollment office. The enrollment office will be responsible for issuing a new tribal id.

All applicants will be verified as a tribal citizen.

All applicants must reside in Alabama. Provide a current state id, with correct address and name.

No illegal immigrants will be served.

The verification of separation status the client will require that the spouse must provide proof of residency which would require lease agreement, utilities e.g. water, electricity, gas in the nonresident spouse.

The living status of the household members can be verified by checking the Social Security web site for deaths the website is as follows: <http://www.deathindexes.com/ssdi.html>. Also, the local obituaries of the newspapers can be checked and some of the funeral homes are on line, and the list of deaths are given.

NOTE: Social Security Death Index (fee-based - part of an Ancestry subscription) has over 86 million records - updated to July 2010 (updated weekly)

RELEVANT POLICY DOCUMENTS INCOME VERIFICATION

All income must be verified.

A. Social Security: The letter that is provided to the client from United States Department of Social Security.

B. Unemployment: The letter that is provided by the Alabama Department of Employment.

C. Employer: A form that will be provided to the Employer to be completed for gross wages for the year.

D. Self Employed: The tax return for the year that was recently filled.

E. No income: This person will have to provide proof how household expenses are being taken care of. Food stamps, Medicaid, TANF, Family, friends, etc.

F. Workman Compensation: A letter from the Workman compensation insurance company, or employer stating the amount that is received.

G. Disability Insurance: A letter from the Disability Insurance Company stating the amount.

H. Other income will be verified from a letter from the source.

RELEVANT POLICY DOCUMENTS INCARATION

The incarnation status can be verified by using the Alabama Department of Corrections.

The incarnation of city, county, inmates cannot be verified.

RELEVANT POLICY DOCUMENTS

A. The vendor will be verified through the Chamber of Commerce, listing with the Alabama Secretary of State. Note All Vendors that we work with are known. We do not use any non commercial vendors.

B. If a vendor that provide wood, such as an individual. This person would have to give a copy of the business license. The business license would be verified with the issuing agency.

- **FRAUD REPORTING MECHANISMS**

Any tribal citizen or interested individual, vendor may contact the tribal office and file a complaint. These complaints maybe taken either verbal or written. This will be announced at the tribal meetings, and on the applications.

MaChis Lower Creek Indian Tribe of Alabama

202 North Main Street

Kinston, Alabama 36453

(334)565-3207

Cell number for Chief James Wright (334)449-0607

Fax number (334)565-3059

Email machis@centurytel.net

chiefjames@centurytel.net

NECESSARY OUTCOMES OF THESE STRATEGIES AND SYSTEMS

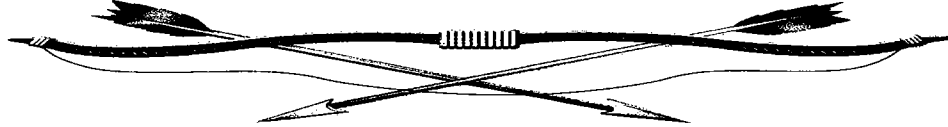
This will allow an individual, vendor, or concerned citizen the opportunity to come forward and file a complaint. This will prevent clients from making false statements on the application.

RELEVANT POLICY DOCUMENTS FRAUD REPORTING MECHANISMS

An individual may file a complaint regarding an individual receiving Low Income Home Energy Assistance from the MaChis Low Income Home Energy Assistance Program. A verbal complaint or a written complaint may be taken. The following form must be completed.

Upon completion of the form the incident will be reviewed by the LIHEAP Director. Then forward to the Chief and Tribal Council. If fraud occurred the proper authorities will be notified, and appropriate action will be taken.

Ma-Chis Lower Creek Indian Tribe of Alabama



202 N. Main Street
Telephone :(334)565-3207
machis@centurytel.net

Kinston, Alabama 36453
Fax (334)565-3059
www.machis tribe.net

FRAUD REPORTING OF MA-CHIS LOWER CREEK INDIAN TRIBE OF ALABAMA LOW INCOME HOME ENERGY ASSISTANCE PROGRAM

Date: _____

Name of individual, household, vendor that is believed to have committed fraud.

Address of the above if known

Telephone Number for the above if known:

(_____) _____

Briefly describe the alleged fraud that you believed to have occurred, include documents if available, dates and time.

Your name: _____

Your address:

Your telephone number:
(____) _____

Intake worker name _____

Date: _____

Time: _____

- **VERIFYING APPLICANT IDENTITIES**

1. The household's members will be verified; therefore preventing nonhousehold members from being used.
2. The legal status of the household members will be verified. Preventing non U. S. Citizens from obtaining assistance.
3. The Ma-Chis Lower Creek Indian Tribe of Alabama only serves tribal members.
4. The member must have a tribal citizen roll number. Must have an id.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

1. The household's members will be verified; therefore preventing nonhousehold members from being used.
2. The legal status of the household members will be verified. Preventing non U. S. Citizens and tribal citizens from obtaining assistance.

RELEVANT POLICY DOCUMENTS HOUSEHOLD MEMBERS

1. The Ma-Chis Lower Creek Indian Tribe of Alabama only serves tribal members.
2. The member must have a tribal citizen roll number. Must have an id. If client does not have an id, the person will be verified on the tribal citizen by the enrollment office. The enrollment office will be responsible for issuing a new tribal id.
3. All applicants will be verified as a tribal citizen.
4. All applicants must reside in Alabama. Provide a current state id, with correct address and name.
5. No illegal immigrants will be served.
6. The verification of separation status the client will require that the spouse must provide proof of residency which would require lease agreement, utilities e.g. water, electricity, gas in the nonresident spouse.
7. All household members that are tribal members must have a tribal id. Non tribal household members must have a current Alabama state issued id.

- **SOCIAL SECURITY NUMBER REQUESTS**

1. A copy of the client social security card will be made.
2. Age one (1) and above must have a social security number.
3. The client must also provide their tribal id and tribal ids for all tribal household members.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

1. All valid household members are reported for correct benefit determination.
2. The household's members will be verified; therefore preventing nonhousehold members from being used.
3. The legal status of the household members will be verified. Preventing non U. S. Citizens and tribal citizens from obtaining assistance.

CROSS-CHECKING SOCIAL SECURITY NUMBERS AGAINST GOVERNMENT SYSTEMS/DATABASES

1. The living status of the household members can be verified by checking the Social Security web site for deaths the website is as follows: <http://www.deathindexes.com/ssdi.html>. Also, the local obituaries of the newspapers can be checked and some of the funeral homes are on line, and the list of deaths are given.
2. The incarnation status can be verified by using the Alabama Department of Corrections. The incarnation of city, county, inmates cannot be verified.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

The use of database systems available to the tribe to make sound eligibility determination.

RELEVANT POLICY DOCUMENTS CROSS-CHECKING SOCIAL SECURITY NUMBERS AGAINST GOVERNMENT SYSTEMS/DATABASES

1. Make a copy of the social security cards.
2. Keep in a vault.
3. Verify the living status of the clients with Social Security Death Index.

NOTE: Social Security Death Index (fee-based - part of an Ancestry subscription) has over 86 million records - updated to July 2010 (updated weekly).

Presently the tribe does not have the means/sources to verify a social security card that has been issued to an individual.

VERIFYING APPLICANT INCOME

All income must be verified.

A. Social Security: The letter that is provided to the client from United States Department of Social Security.

B. Unemployment: The letter that is provided by the Alabama Department of Employment.

C. Employer: A form that will be provided to the Employer to be completed for gross wages for the year.

D. Self Employed: The tax return for the year that was recently filled.

E. No income: This person will have to provide proof how household expenses are being taken care of. Food stamps, Medicaid, TANF, Family, friends, etc.

F. Workman Compensation: A letter from the Workman compensation insurance company, or employer stating the amount that is received.

G. Disability Insurance: A letter from the Disability Insurance Company stating the amount.

H. Other income will be verified from a letter from the source.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

Effective income determination achieved through coordination across program lines

RELEVANT POLICY DOCUMENTS INCOME VERIFICATION

All income must be verified.

A. Social Security: The letter that is provided to the client from United States Department of Social Security.

B. Unemployment: The letter that is provided by the Alabama Department of Employment.

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F. Workman Compensation: A letter from the Workman compensation insurance company, or employer stating the amount that is received.

G. Disability Insurance: A letter from the Disability Insurance Company stating the amount.

H. Other income will be verified from a letter from the source.

NOTE: Presently the tribe does not have the means/sources to verify an income by using the Alabama Department of Industrial Labor Relations.

PRIVACY-PROTECTION AND CONFIDENTIALITY

The collection Social Security Number as required or allowed by law, inform the client of the purpose of the collection, the intended use, whether the law requires the number to be provided or not, and the consequences of not providing the number.

If required by law, notify individuals the reason for the collection and purpose of their Social Security Number annually of their right to request that you do not post or publicly display their SSN

Do not put Social Security Number on documents that are widely seen by others, such as identification bulletin board postings, and other materials.

Do not send documents with Social Security Number on them through the mail, except on applications or forms or when required by law.

When sending applications, forms or other documents required by law to carry Social Security Number through the mail, places the Social Security Number where it will not be revealed by an envelope window. Where possible, leave the Social Security Number field on forms and applications blank and ask the individual to fill it in before returning the form or application.

Do not send Social Security Number by email unless the connection is secure or the SSN is encrypted.

Do not require an individual to send his or her Social Security Number over the Internet or by email, unless the connection is secure or the Social Security Number s encrypted.

Do not require individuals to use Social Security Number as passwords or codes for access to Internet web sites or other services.

Only the household being served will be in the interview area.

Only one (1) client or household will complete the application at the pre interview table, prior to the interview.

The applications are kept in a filing cabinet behind two locked doors.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

Secure methods that maintain confidentiality and safeguard the private information of clients

RELEVANT POLICY DOCUMENTS PRIVACY-PROTECTION AND CONFIDENTIALITY

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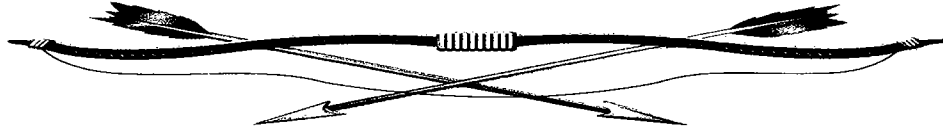
Do not require individuals to use Social Security Number as passwords or codes for access to Internet web sites or other services.

Only the household being served will be in the interview area.

Only one (1) client or household will complete the application at the pre interview table, prior to the interview.

The client must sign the Confidentiality Statement.(See enclosed copy).

Ma-Chis Lower Creek Indian Tribe of Alabama



202 N. Main Street
Telephone :(334)565-3207
machis@centurytel.net

Kinston, Alabama 36453
Fax (334)565-3059
www.machistribe.net

AUTHORIZATION

I understand that this is an application for Energy Assistance and it will be treated as an application for and used to determine my eligibility for the benefits of One (1) program: **Energy Assistance** which helps pay the cost of home heating or cooling energy; which makes homes more energy efficient and comfortable and **Heating Assistance** which helps to pay the energy provider for heating either gas (natural, propane), wood, coal, electricity. **Cooling Assistance** which helps to pay the energy provider for cooling.

I understand that if this is an application filed only for Heating or Cooling Assistance programs either during or after the energy assistance enrollment period. I also understand that the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** may share information concerning my application and benefits with the Alabama Department of Community Action Programs for program purposes.

Assistance programs since eligibility requirements are not on a continuous basis, only a one time service for emergency heating, cooling, or assistance with nonemergency energy payment to heating or cooling energy vendor.

I understand that due to demand, the timing of receipt of Heating or Cooling Assistance benefits for which I am eligible, and which I accept, cannot be guaranteed. I also understand that my eligibility for Energy Assistance does not guarantee the receipt of Heating or Cooling Assistance benefits, since the funds allocated are not sufficient to serve all eligible households.

I certify under the penalties of perjury that all statements contained in this application are true to the best of my knowledge and that there is no understatement or misstatement of income or any other information on this application. I authorize the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** to contact any and all pertinent individuals, agencies and companies to verify the information contained in this application and to determine my household's eligibility. I understand that **I will be subject to criminal prosecution as a result of any fraudulent statements in this application or associated documents.** The helps to pay the energy provider for may refer information concerning my application, including personal information indicating a violation of law, to the District Attorney for investigation and enforcement. I further understand that all adult household members' income may be verified.

I understand that the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** shall use and hold personal information in its records relating to me, including my social security number, only for the program purposes described in this application, unless the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** otherwise obtains my consent. The **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** shall keep this information confidential. Only employees of the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** and the other agencies or entities described herein may see this information or keep it in their records for the purposes described herein. These other agencies or entities shall also keep this information confidential.

If the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** receives an order pursuant to legal process to release personal information to anyone else, it shall notify me. If I ask, the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** shall answer my questions about how it keeps and uses this information. If I ask, I, or my authorized representative, shall have the right to inspect and copy information collected about me.

I may object to the collection, maintenance, dissemination, use, accuracy, completeness or type of information the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** holds about me. If I object, the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** shall investigate my objections and will either correct a problem or make my objection part of the file. If I am dissatisfied, I may appeal to the Chief and Tribal Council of the MaChis Lower Creek Indian Tribe of Alabama. I understand in the event I receive Energy Assistance and I am later determined to be ineligible, I shall be fully liable for the value of assistance received and that future benefits for which I become eligible may be reduced by any amount that I do not repay. I understand that I shall be fully liable for repayment for any Energy Assistance benefits and/or the full value of any heating assistance labor and materials that I incorrectly receive as a result of any inaccurate, incomplete or fraudulent statements.

I declare that I am the only person living in the household who has submitted this application for benefits, and that neither I nor any other member of my household has previously applied for assistance this program year. I authorize the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** to transfer any and all of this information to the appropriate agency in the event that I move to another agency's service area and request assistance at a new address.

I authorize the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** to obtain a record of my annual energy consumption and cost from my energy vendor company for purposes of program evaluation or operation.

I understand that I have a right to file an appeal of the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** decision on my eligibility or benefits in accordance with the procedures of the program.

I have read the above and agree to the conditions set forth therein.

AUTHORIZATION - INFORMATION SHARING FOR HEATING AND UTILITY DISCOUNTS AND BENEFITS

I authorize the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** to provide my heating company/utility and my secondary energy company/utility with information concerning my Energy Assistance application if this could result in a discounted energy bill.

I further authorize the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** to share my name and address, identifying me as an Energy Assistance recipient, with my telephone and other supplier/company/utility information if this could result in a discount or other benefit from the supplier/company/utility. The **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** may also request that I supply account number information for this purpose.

I understand that this authorization is for my benefit and I do not have to agree in order to receive assistance under this application. I have read the above authorization and agree to its terms; however, if I do not agree, I shall so indicate on the front of this application (under the Applicant Signature section) in accordance with instructions from the which helps to pay the energy provider for

We are asking you to provide or verify your social security number. We are also asking all members of your household to provide their social security numbers.

If your household is included in the Wage Match, shall provide social security numbers, along with the names of the head of household and all adult household members, age eighteen (18) and above, to **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program**. The income information you have reported to us for the energy assistance, shall be matched with wage/income information reported by employers. to information from its records regarding your income and the income of other members of your household.

If the income information you reported to us does not match the information reported by employers to, **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** we shall contact you as the head of household. We shall meet and work with you and any adult household member whose income information is in question to try to resolve a "mismatch". However, if we cannot resolve a "mismatch", and we determine that the household has incorrectly underreported income to us, we may take one or more of the following actions: (1) adjust the household benefit level; (2) terminate benefits or assistance to the household; (3) seek repayment of payments incorrectly made to or on behalf of the household; and/or (4) reduce any future benefits by amounts not repaid.

If we take any of these actions, you as head of household shall have the right to dispute our decision through this **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** Appeals Process and in court. Any "mismatch" that cannot be resolved by the **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program**. Information concerning you and adult household members may also be referred to the Kinston Police Department, a District Attorney, and may result in further investigation, action, and/or criminal prosecution.

If you or adult household members do not or cannot provide or verify social security numbers for this **Ma-Chis Lower Creek Indian Tribe of Alabama Low Income Home Energy Program** your name and the names of all adult household members shall still be verified.

Clients Signature

Print Name	Signature	Date
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Intake Worker Signature

Print Name	Signature	Date
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- **LOW INCOME HOME ENERGY ASSISTANCE PROGRAM BENEFITS POLICY**

1. The payments are made directly to the vendor supplier.
2. The amount due is verified with the energy supplier.
3. The client may receive one (1) payment for heating emergency with cut off notice.
4. The client may receive one (1) payment for cooling emergency with cut off notice.
5. The client may receive one (1) payment for heating assistance.
6. The client may receive one (1) payment for cooling assistance.
7. The client must meet the requirements of income eligibility.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

Payments to authorized energy vendors for approved clients

RELEVANT POLICY DOCUMENTS LOW INCOME HOME ENERGY ASSISTANCE PROGRAM BENEFITS POLICY

All checks are to be locked up in a lock box, kept in the second part of the vault.

The keys to the vault and lock box are to be kept in the filing cabinet that is to stay locked at all times.

Checks are to be written when no clients are present.

File police report, forgery paperwork with the bank.

Seek prosecution

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The member must have a tribal citizen roll number. Must have an id. If client does not have an id, the person will be verified on the tribal citizen by the enrollment office. The enrollment office will be responsible for issuing a new tribal id.

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All applicants must reside in Alabama. Provide a current state id, with correct address and name.

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D. Self Employed: The tax return for the year that was recently filled.

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F. Workman Compensation: A letter from the Workman compensation insurance company, or employer stating the amount that is received.

G. Disability Insurance: A letter from the Disability Insurance Company stating the amount.

H. Other income will be verified from a letter from the source.

• **PROCEDURES FOR UNREGULATED ENERGY VENDORS**

1. Contact the propane company for the price of gas per gallon and give the client enough for a tank that usually holds between two hundred (200) gallons to three hundred (300) gallons.

2. Verify with Alabama Propane Gas association that they are licensed in Alabama to do business.

3. Natural gas the bill is paid for heating only.

4. The vendor will be verified through the Chamber of Commerce, listing with the Alabama Secretary of State. Note All Vendors that we work with are known. We do not use any non commercial vendors.

5. If a vendor that provide wood, such as an individual. This person would have to give a copy of the business license. The business license would be verified with the issuing agency.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

Only authorized non regulated vendors are paid.

NOTE: THE UNREGULATED VENDORS THAT WE PAY ARE VERY FEW. THESE VENDORS HAVE BEEN IN BUSINESS FOR OVER 20 YEARS.

RELEVANT POLICY DOCUMENTS FOR UNREGULATED ENERGY VENDORS

1. Copy of the energy bill.
2. Pay the vendor directly.
3. Pay only the companies that can be verified by the Alabama Propane Gas Association.
4. Verify with Alabama Propane Gas association that they are licensed in Alabama to do business.
5. Natural gas the bill is paid for heating only.
6. The vendor will be verified through the Chamber of Commerce, listing with the Alabama Secretary of State. Note All Vendors that we work with are known. We do not use any non commercial vendors.
7. If a vendor that provide wood, such as an individual. This person would have to give a copy of the business license. The business license would be verified with the issuing agency.

- **VERIFYING THE AUTHENTICITY OF ENERGY VENDORS**

- 1 The Alabama Rural Electric Association of Cooperatives (AREA) is a member-owned federation of 22 electric distribution cooperatives. The Tennessee Valley Authority

(TVA) is a member of AREA and serves as wholesale power supplier to eight member cooperatives located in the northern part of Alabama. Power South Energy Cooperative, also a member of AREA, provides wholesale power to 12 member cooperatives in the central and southern sections of Alabama. Southern Power also supplies wholesale power to Alabama cooperatives.

2. Alabama Public Utilities Alliance (APUA) is a legislative information service provided to public and municipal utilities of the State of Alabama. This state legislative monitoring alliance includes municipal water systems, municipal gas systems, gas districts and municipally-owned electric utilities.
3. Alabama Secretary of State
4. Alabama Public Service Commission.
5. Local Chamber of Commerce.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

Payments to authorized energy vendors for approved clients.

RELEVANT POLICY DOCUMENTS FOR VERIFYING THE AUTHENTICITY ENERGY VENDORS

1. Copy of the energy bill.
2. Pay the vendor directly.
3. Pay only the companies that can be verified by the Alabama Propane Gas Association.
4. Verify with Alabama Propane Gas association that they are licensed in Alabama to do business.
5. Natural gas the bill is paid for heating only.
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7. If a vendor that provide wood, such as an individual. This person would have to give a copy of the business license. The business license would be verified with the issuing agency. 1 The Alabama Rural Electric Association of Cooperatives (AREA) is a member-owned federation of 22 electric distribution cooperatives. The Tennessee Valley Authority (TVA) is a member of AREA and serves as wholesale power supplier to eight member cooperatives located in the northern part of Alabama. Power South Energy Cooperative, also a member of AREA, provides wholesale power to 12 member cooperatives in the central and southern sections of Alabama. Southern Power also supplies wholesale power to Alabama cooperatives.

List of current vendors are as follows from this organization:



Arab Electric Cooperative Arab Electric Cooperative

(256) 586-3196 • (866) 868-5032 • Fax (256) 586-4943
331 South Brindlee Mtn. Parkway, Arab, AL 35016
P. O. Box 770, Arab, AL 35016
arabelectric@otelco.net

GENERAL MANAGER
Joe Van Bunch



BALDWIN EMC Baldwin EMC
Your Touchstone Energy
Cooperative

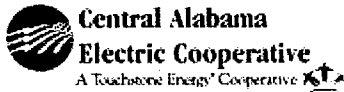
(251) 989-6247 • (800) 837-3374 • Fax (251) 989-0133
19600 State Highway 59, Summerdale, AL 36580
P. O. Box 220, Summerdale, AL 36580
www.baldwinemc.com

GENERAL MANAGER
E.A. "Bucky" Jakins, Jr. Executive Vice President/General
Manager
bemcmgr@baldwinemc.com

Black Warrior EMC Black Warrior EMC

(334) 289-0845 • (800) 242-2580 • Fax (334) 289-4502
1410 Hwy. 43 South, Demopolis, AL 36732
P. O. Box 779, Demopolis, AL 36732

GENERAL MANAGER
Daryl Jones



Central Alabama Electric Cooperative

(334) 365-6762 • (800) 545-5735 • Fax (334) 365-6148
1802 U. S. Highway 31 North • Prattville, AL 36066
P. O. Box 681570 • Prattville, AL 36068
info@coop.caec.com • www.caec.com

GENERAL MANAGER
Tom Stackhouse, President/CEO
tstackhouse@coop.caec.com



Cherokee Electric Cooperative

(256) 927-5524 • (800) 952-2667 • Fax (256) 927-2278
1550 Chesnut ByPass • Centre, AL 35960
P. O. Drawer O • Centre, AL 35960
jballenger@powernet.org • www.cherokee-electric.org

GENERAL MANAGER
Randal Wilkie, CEO/Manager
rwilkie@powernet.org



Clarke-Washington EMC

(251) 246-9081 • 1-800-323-9081 • Fax (251) 246-9822
1307 College Avenue, Jackson, AL 36545
P. O. Box 398 • Jackson, AL 36545
www.cwemc.com

GENERAL MANAGER
J. Stanley Wilson
jswcwemc@aol.com



CoosaValley Electric Cooperative

(256) 362-4180 • 1-800-273-7210 • Fax (256) 761-2615

69220 AL Hwy 77 • Talladega, AL 35160
P. O. Box 837 • Talladega, AL 35161
info@coosavalleyec.com • www.coosavalleyec.com

GENERAL MANAGER
Leland Fuller



**Covington Electric
Cooperative, Inc.**

A Traditional Energy Cooperative

Covington Electric Cooperative

(334) 222-4121 • 1-800-239-4121 • Fax (334) 222-1546
18836 US 84 East, Andalusia, AL 36420
P. O. Box 1357 • Andalusia, AL 36420
cec@covington.coop • www.covington.coop

CEO & GENERAL MANAGER
Charles E. (Ed) Short, President
eshort@covington.coop



Cullman Electric Cooperative
providing energy with care

A Traditional Energy Cooperative

Cullman Electric Cooperative

(256) 737-3200 • 1-800-242-1806 • Fax (256) 737-3218
1749 Eva Road NE, Cullman, AL 35055
P. O. Box 1168 • Cullman, AL 35056
info@cullmanec.com • www.cullmanec.com

GENERAL MANAGER
Grady Smith
gradys@cullmanec.com



Dixie Electric Cooperative

(334) 738-2500 • 1-888-349-4332 • Fax (334) 738-2527
402 East Blackmon Street, Union Springs, AL 36089
P. O. Box 30, Union Springs, AL 36089
dixieec@dixieec.com • www.dixieec.com

GENERAL MANAGER

Gary Harrison

rgaryh@dixieec.com



Franklin Electric Cooperative

Franklin Electric Cooperative

(256) 332-2730 • 1-800-451-1505 • (256) 332-2753

225 West Franklin Street, Russellville, AL 35653

P. O. Box 10, Russellville, AL 35653

smalone@fecoop.com

GENERAL MANAGER

A. H. Akins



Joe Wheeler EMC
A Electric Cooperative

Joe Wheeler EMC

(256) 552-2300 • 1-800-239-6518 • Fax (256) 552-2386

25700 Alabama Hwy. 24, Trinity, AL 35673

P. O. Box 460, Trinity, AL 35673

www.jwemc.org

GENERAL MANAGER

George B. Kitchens

gkitchens@jwemc.org



Marshall-DeKalb Electric Cooperative

(256) 593-4262 • 1-800-239-3692 • (256) 840-2211 (fax)

10025 Highway 168, Boaz, AL 35957

P. O. Box 724, Boaz, AL 35957

www.mdec.org

GENERAL MANAGER

James W. Stewart

jstewart@mdec.org



**North Alabama
Electric Cooperative**

North Alabama Electric Cooperative

(256) 437-2281 • 1-800-572-2900 • Fax (256) 437-2286
41103 U. S. Highway 72, Stevenson, AL 35772
P. O. Box 628, Stevenson, AL 35772

GENERAL MANAGER

Bruce Purdy

bpurdy@naecoop.com



Pea River Electric Cooperative

(334) 774-2545 • (800)264-7732 • Fax (334) 774-2548
1311 West Roy Parker Road, Ozark, AL 36360
P. O. Box 969, Ozark, AL 36361-0969
prec@peariver.com • www.peariver.com

GENERAL MANAGER

J. Randy Brannon

randy.brannon@peariver.com



Pioneer
ELECTRIC COOPERATIVE, INC.

Pioneer Electric Cooperative, Inc.

(334) 382-6636 • 1-800-239-3092 • Fax (334) 382-4933
300 Herbert Street, Greenville, AL 36037
P. O. Box 468, Greenville, AL 36037
www.pioneerelectric.com

GENERAL MANAGER

Steven A. Harmon



Sand Mountain Electric Cooperative

(256) 638-2153 • Fax (256) 638-4957
402 Main Street West, Rainsville, AL 35986
P. O. Box 277, Rainsville, AL 35986
smec@smec.coop • www.smec.coop

GENERAL MANAGER

Mike Simpson
msimpson@smec.coop



South Alabama Electric Cooperative

(334) 566-2060 • Alabama Only: 1-800-556-2060 Fax (334) 566-8949
Highway 231 South, Troy, AL 36081-0449
P. O. Box 449, Troy, AL 36081-0449
saec@southaec.com • www.southaec.com

GENERAL MANAGER

Max Davis
maxd@southaec.com



Southern Pine Electric Cooperative

(251) 867-5415 • Fax (251) 867-5219
2134 South Boulevard, Brewton, AL 36426
P. O. Box 528, Brewton, AL 36427
www.southernpine.org

GENERAL MANAGER

Vince Johnson
vjohnson@southernpine.org



Tallapoosa River Electric Cooperative

(334) 864-9331 • 1-800-332-8732 • Fax (334) 864-0817

15163 U.S. Highway 431 South, LaFayette, AL 36862
P. O. Box 675, LaFayette, AL 36862
www.trec.coop

GENERAL MANAGER
Louie Ward
lward@trec.coop



Tombigbee Electric Cooperative

(205) 468-3325 • (205) 468-3338
7686 U.S. Hwy. 43, Guin, AL 35563
P. O. Box 610, Guin, AL 35563
info@tombigbee.net • www.tombigbee.net

GENERAL MANAGER
Steve Foshee
sfoshee@tombigbee.net

Anything sent to Tombigbee needs to be addressed exactly as follows,

or the Post Office will return it postage due:

Name of Recipient
Tombigbee EC
7686 U.S. Highway 43
P.O. Box 610
Guin, AL 35563



Wiregrass Electric Cooperative
A Traditional Electric Cooperative

Wiregrass Electric Cooperative

(334) 588-2223 • 1-800-239-4602 • FAX (334) 588-6192
509 N. State Hwy.167, Hartford, AL 36344
P. O. Box 158, Hartford, AL 36344
wec@wiregrass.coop • www.wiregrass.coop

GENERAL MANAGER
Michael S. McWaters

mmcwaters@wiregrass.Coop



POWERSOUTH
ENERGY COOPERATIVE

Power South Energy Cooperative

(334) 427-3000 • 1-800-264-2571 • Fax (334) 222-3860
2027 East Three Notch Street • Andalusia, AL 36421-2427
P.O. Box 550 • Andalusia, AL 36420-1299
www.powersouth.com

GENERAL MANAGER

Gary Smith, President and CEO
gary.smith@powersouth.com



Tennessee Valley Authority

Huntsville Customer Service Center
4960 Corporate Drive, Suite 125F Huntsville, AL 35805
(256) 430-4800 / Fax: (256) 430-4801
www.tva.gov

GENERAL MANAGER

Charles (Butch) Massey
Customer Service-Alabama
cemassey@tva.gov

8. Alabama Public Utilities Alliance (APUA) is a legislative information service provided to public and municipal utilities of the State of Alabama. This state legislative monitoring alliance includes municipal water systems, municipal gas systems, gas districts and municipally-owned electric utilities.

The current list may be obtained at the following website:

<http://www.apua.us/index.php>

9. Alabama Secretary of State

10. Alabama Public Service Commission.
11. Local Chamber of Commerce.

- **TRAINING AND TECHNICAL ASSISTANCE**

1. Notify the Tribal Citizens the requirements at a general tribal meeting.
2. Send out letters regarding the criteria for energy assistance including how to apply, dates, and required documentation.
3. Review confidentiality statements with clients, staff.
4. Make sure that the vendors credit the correct accounts with correct amounts.
5. Attend on line training provided by OCS.
6. Training provided by agencies that will allow the tribe to attend.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

The timely and thorough resolution of weaknesses or reportable conditions as revealed by the audit

RELEVANT POLICY DOCUMENTS TRAINING AND TECHNICAL ASSISTANCE

1. Notify the Tribal Citizens the requirements at a general tribal meeting.
2. Send out letters regarding the criteria for energy assistance including how to apply, dates, and required documentation.
3. Review confidentiality statements with clients, staff.
4. Make sure that the vendors credit the correct accounts with correct amounts.
5. Attend on line training provided by OCS.
Training provided by agencies that will allow the tribe to attend

- **AUDITS OF LOCAL ADMINISTERING AGENCIES**

NOTE: These federal expenditures are then combined to determine the total amount expended during the year. Any recipient whose total federal expenditures during a year equal or exceed \$500,000 requires a Single Audit. If the recipient does not meet this threshold, a Single Audit is not required, although the recipient may elect to have a program-specific audit (an audit of a single federal program, without auditing the entire entity).

1. Review the applicants make sure that they were in the guidelines for receiving assistance.
2. The benefits were paid directly to the vendors.
3. The client's accounts were credited.

NECESSARY OUTCOMES FROM THESE SYSTEMS AND STRATEGIES

Reduce improper payments; maintain local agency integrity, and benefits awarded to eligible households

RELEVANT POLICY DOCUMENTS

4. Review the applicants make sure that they were in the guidelines for receiving assistance.
5. The benefits were paid directly to the vendors.
6. The client's accounts were credited.