



# OSAGE NATION CONGRESS

## Committee Meeting Request Form

Osage Nation Congressional Committee: Check one of the following:

- |  |   |
|--|---|
| <input type="checkbox"/> Appropriations                    | <input type="checkbox"/> Education                  |
| <input type="checkbox"/> Commerce and Economic Development | <input type="checkbox"/> Governmental Operations    |
| <input type="checkbox"/> Congressional Affairs             | <input type="checkbox"/> Health and Social Services |
| <input checked="" type="checkbox"/> Cultural               | <input type="checkbox"/> Rules & Ethics             |
|  | <input type="checkbox"/> Membership                 |

Date of Meeting:	9/7 12:30-1:30	Meeting Type: Check One.	9/13-12:30-1:30
	9/8 12:30-1:30	<input checked="" type="checkbox"/> Regular	9/14 12:30-1:30
	9/9 12:30-1:30	<input type="checkbox"/> Emergency	9/15 12:30-1:30
	9/12 12:30-1:30	<input type="checkbox"/> Cancellation	9/19 12:30-1:30
Time: _____ am/pm to _____ am/pm			9/20 12:30-1:30
			9/26 12:30-1:30
			9/27 12:30- <del>1:30</del>
			9/28 12:30-1:30

Please provide the agenda to be set in the space provided below.

1. Call to Order
2. Roll Call
3. Prayer
4. Approval of Minutes
5. Consideration of Legislation
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. Adjournment

*[Signature]*  
 Committee Chair's Signature

07/22/16 *[Signature]*  
 Committee Staff

- Speaker's Approval
- Emergency Meeting
  - Executive Session

7/22/16 4:25p  
 Date Time