



3075 Vintage Blvd, Suite 200, Juneau, Alaska 99801 (907) 790-4990; Fax (907) 790-4999

REQUEST FOR INFORMATION OF A MINOR SHAREHOLDER

CHILD'S NAME: _____

CUSTODIAN'S NAME: _____

ADDRESS: _____

PHONE (1): (Home) _____

PHONE (2): (Home) _____

EMAIL: _____

SEX: MALE FEMALE

SOCIAL SECURITY NUMBER

DATE OF BIRTH

IS THE CHILD *LESS* THAN 1/4 ALASKA NATIVE? YES NO
(If "NO" then include proof of Alaska Native Blood Quantum)

BLOOD QUANTUM AND TRIBE: _____

BIA or T&H ENROLLMENT NUMBER: _____

PERSON RECEIVING SHARES FROM: _____

**PLEASE ATTACH A COPY OF THE CHILD'S
BIRTH CERTIFICATE and SOCIAL SECURITY CARD**