



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

SHAREHOLDER INFORMATION FORM

NAME: _____

ADDRESS: _____

PHONE 1: (HOME) _____

PHONE 2: (CELL) _____

E-MAIL: _____

SEX: ___ MALE ___ FEMALE

SOCIAL SECURITY NUMBER

DATE OF BIRTH

NAME OF PERSON RECEIVING SHARES FROM:

ARE YOU 1/8 OR MORE ALASKA NATIVE? ___ YES ___ NO
(If "YES" please include proof of Alaska Native Blood Quantum)

**YOU MUST INCLUDE A COPY OF YOUR
BIRTH CERTIFICATE, SOCIAL SECURITY CARD, AND
PROOF OF BLOOD QUANTUM (i.e. BIA Enrollment or
T&H card) FOR TRANSFER TO BE PROCESSED.**