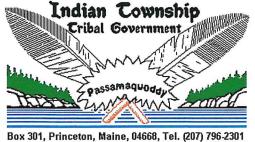
TO RECEIVE DIRECT DEPOSIT THIS FORM NEEDS TO BE RETURNED NO LATER THAN JULY 31STHANDWRITING MUST BE LEGIBLE***



Census Department
P.O. Box 301

<u>Princeton, ME. 04668</u> <u>Phone: (207) 796-2301 ext.6114 Fax: (207) 796-2578</u>

Address Certification

Date Commission Expires

Last Name	First Name		Middle Suffix	
Full Name of Minor's Parent	/ Legal Guardian	/ Power of Attor	ney if Applicabl	e
Social Security / Social Insurance #			_	Date of Birth
Mailing Address:			51	
City	State	Zip (Code	Country
Legal Physical Residence:			Address (No P.O. I	Box)
City	State	Zip (Code	Country
Telephone #	Cell/Alt #			
Email:	-			
Marital Status: Single	Married	Divorced	Widow	Other
Are you in the Military:		Are you in Sc	hool:	
Resident	Service Area of Indian Township, MENon-Resident			
Are you listed as a Member of	another Tribe, B	and or Nation?	Yes	No
If yes, please provide the Nam	e and Address of	Tribe, Band or N	lation:	
				,
Signature of Member or Pare	nt/Guardian	Date	Notary/ Cor	nmissioner of Oaths

THIS FORM MUST BE RETURNED BY SEPTEMBER 30TH OF EACH YEAR

DIRECT DEPOSIT IS OPTIONAL.

IF YOU WOULD LIKE TO CANCEL DIRECT DEPOSIT PLEASE SPECIFY ****HANDWRITING MUST BE LEGIBLE****

DIRECT DEPOSIT AUTHORIZATION FORM FOR PER CAPITA DISBURSEMENTS ONLY

Full Name of Tribal Member:						
Telephone #	Email:					
I hereby authorized the Passamaquoddy Tribal Government to deposit my Per Capita credits and if necessary, any debit entries & adjustments for any credit entries in error into my Checking or Savings Account below:						
Name of Bank:						
Bank Routing Number:						
Account Number:						
Checking Account: (please select only 1 account)						
PLEASE ATTACH A VOIDED CHECK OR LETTER FROM BANK WITH ACCOUNT INFORMATION						
Notice to Parents/Guardians: If this member is a minor, the parent guardian authorized to receive payment for this minor.	t or guardian signing must have a minor applicant on file with the same parent or					
Complete for Minors Only:						
Are you the legal Guardian of the minor Tribal Member?	YES NO					
Do you want to include Minor(s) with Parent/Guardian Direct Deposit? List Minor(s) below if included with same Bank Account Information: YES NO						
Signature of Tribal Member or (Parent/Guardian)	Date					
FOR OFFICE USE ONLY	VERIFY AND SIGN ONCE ENTERED					
Signature of Tribal Census Clerk/Finance Dept.	Date:					