

PUEBLO DE SAN ILDEFONSO DISTRIBUTION FORM FOR TRIBAL MEMBERS FORM MUST BE RETURNED NO LATER THAN JANUARY 10, 2025

□ One lump sum distribution for members of the household listed below: If direct deposit, attach a copy of a VOIDED check. Tribal Members over 18 **MUST** have name on account and MUST sign at the bottom of this page.

Name of person receiving lump-sum distribution payment:

□ Individual payments. Individual forms for each person over 18 must be provided if this option is chosen. If direct deposit, attach a copy of a VOIDED check for each individual member. If a VOIDED check is not attached, paper checks will be mailed to the mailing address below.

Signature of Tribal Member for individual payment: _

Direct Deposit
Direct Deposit
Ail Check
Direct Deposit
Pick up Check

(Phone number MUST be provided, if the pick up option is chosen. If phone number is not provided, check will be mailed.)

THIS FORM MUST BE FILLED OUT IN ENTIRETY. If FULL address is not provided, your form will not be processed and will delay your distribution.

Physical address:

CURRENT	
Mailing address:	

List all members of household to be included in this distribution (add additional pages if necessary)

Tribal Member	Date of Birth	Enrollment Number (official use only)	Relationship to member
		•	SELF
e number:	Ema	il address:	

Adults over 18 that are included in the Lump Sum Distribution MUST sign below:

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2	4.

Forms may be dropped off in person to Kitty Montoya, at the Tribal Administration Building, emailed to <u>distributions@sanipueblo.org</u> or faxed to 505-455-7351.

To avoid delays, please include contact information in the case your forms are incomplete or additional information is needed.