## 2025 Per Capita Distribution – Request to Receive Distribution Check via Certified Mail

I,	[Tribal Member's legal name] hereby certify that I am a			
duly enrolled member of the Puebl distribution. I authorize the Treasu understand that by requesting my or responsible for the costs of postage	lo of Isleta eligible fo rer's Office to send m distribution check be	r the December 2 ny distribution ch sent via certified	025 Per Capita eck via certified mail, I will be	mail. I
addressed to the Pueblo of Isleta.				
I certify that I have attached a pho- provided all of the relevant identifi- addressed envelope and money or	ication information re	equired by this fo	rm, and enclosed	d a self-
Thank you,			·	
Signature	Printed Name		Date	
Tribal ID Number				
Date of Birth				
Phone				
Email				
Address where the Distribution ch				
State of				
County of	<del>-</del>			
Subscribed and sworn before me the		day of	·	by
Notary Public		My Commis	sion Expires	