



Affidavit of Identification

Part 1 New Shareholder Information

Name: _____
First Middle Last Suffix/Maiden

Mailing Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

E-mail Address: _____ Gender: Male Female

Last 4-Digits of SSN: ____|____|____ Birth Date: ____|____|____ US Citizen? Yes No

Are you enrolled to a regional corporation? Yes No If Yes, which(s)? _____

Are you enrolled to a Village Corporation? Yes No If Yes, which(s)? _____

Part 2 Family Information

Mother: Biological Adoptive (*Please attach adoption decree*) Date of Birth: ____|____|____

Name: _____
First Middle Last Suffix/Maiden

Mailing Address: _____
Street City State Zip

MTNT, Ltd. Shareholder? Yes No If no, enrolled to: _____

Enrolled to a village corporation? Yes No If Yes, enrolled to _____

Father: Biological Adoptive (*Please attach adoption decree*) Date of Birth: ____|____|____

Name: _____
First Middle Last Suffix/Maiden

Mailing Address: _____
Street City State Zip

MTNT, Ltd. Shareholder? Yes No If No, enrolled to: _____

Enrolled to a village corporation? Yes No If Yes, enrolled to _____

Part 3 Blood Quantum/Voting Rights

I certify that I am _____ (quantum) Indian Eskimo Aleut (*Please attach Certificate of Degree of Indian Blood (CIB) issued by BIA or verification from another regional corporation and certified birth certificate. If you do not have a CDIB, contact the BIA at (800) 645-8465 to obtain one.*)

I certify that I am NOT Alaska Native (*no documents needed*).

By signing my name to this document, I certify this information provided in this affidavit is true and correct to the best of my knowledge.

Shareholder Signature: _____ **Date:** _____

If the New Shareholder is under age 18, custodian must complete Part 4 Custodian/Legal Guardian

Part 4 Custodian/Legal Guardian (If Shareholder is a Minor)

Parent Custodian/Legal Guardian (*Documents must be attached.*)

I hereby accept and consent to my appointment as custodian of the shares to which the minor person is entitled, pursuant to the Alaska Uniform Gifts to Minors Act, AS 13.46.085.

I understand that the duties and powers of a custodian of MTNT, Ltd. shares are governed by the laws of the State of Alaska, in particular AS 13.46.110-130. I also understand that as custodian I may spend any distributions and dividends which are perceived by the minor ONLY for the support, maintenance, education, and benefit of the minor, and for no other person or purpose.

Full Name: _____
First Middle Last Suffix/Maiden

Mailing Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

E-mail Address: _____ Gender: Male Female

Last 4-Digits of SSN: _____ Birth Date: ____|____|_____ US Citizen? Yes No

Custodian Signature: _____ **Date:** _____