



Little River Band of Ottawa Indians  
Enrollment Department  
2608 Government Center Drive  
Manistee, MI 49660  
(231) 723-8288  
Fax (231) 398-6751

## ADDRESS CORRECTION FORM FOR ENROLLMENT

Completing this form will officially change the address at which you are currently listed in Tribal records and for all Tribal Department program mailing purposes. Address corrections are generally effective in the month following the receipt of the completed and signed form in the Enrollment Department. If you have any questions, please contact the Enrollment Office.

Name \_\_\_\_\_  
First Middle Last Former Last Name

Membership# \_\_\_\_\_ SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

### New Address

#### I. Physical Address (Where you live)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

#### II. Mailing Address (Where you want your mail to go)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Home Phone # (\_\_\_\_\_) \_\_\_\_\_ Country \_\_\_\_\_

**I certify that the above information is true. I understand that penalties may be incurred as a result of filing false information.**

\_\_\_\_\_ Date Tribal Member's Signature \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public for the State of \_\_\_\_\_

County of \_\_\_\_\_, do hereby certify that \_\_\_\_\_  
provided proper identification that clearly identifies the person who executed the foregoing instrument as the above named person acknowledged the execution of the foregoing instrument to be his/her act and deed.

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
Month Year

\_\_\_\_\_  
Notary Public  
My Commission Expires \_\_\_\_\_