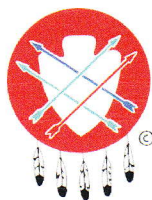


P (918) 540-2535

F (918) 540-2538



# PEORIA TRIBE

OF INDIANS OF OKLAHOMA

118 S. Eight Tribes Trail • P.O. Box 1527

Miami, Oklahoma 74355

## UNCONDITIONAL TRIBAL MEMBERSHIP RELINQUISHMENT

I, \_\_\_\_\_, an enrolled member of the Peoria Tribe of Indians of  
 (Print Name)  
 Oklahoma, with roll number \_\_\_\_\_, Date of birth \_\_\_\_\_, and  
 SS # \_\_\_\_\_, do hereby petition and apply to relinquish my Tribal  
 Membership from the Peoria Tribe. I hereby expressly waive all privileges, including any and  
 all rights and benefits now existing or which may accrue to members of the Peoria Tribe.

I further understand that any member of the Peoria Tribe of Indians of Oklahoma who  
 relinquishes membership in the Peoria Tribe of Indians of Oklahoma will not be eligible for  
 re-enrollment with the Peoria Tribe.

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

### ACKNOWLEDGEMENT

State of \_\_\_\_\_

County of \_\_\_\_\_)

On \_\_\_\_\_ before me, \_\_\_\_\_  
 (insert name and title of the officer)

Personally appeared \_\_\_\_\_ who proved to me on the basis of  
 satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to  
 me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on  
 the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of \_\_\_\_\_ that the  
 foregoing paragraph is true and correct.

Witness my hand and official seal.

(Seal)

Signature: \_\_\_\_\_

My Commission expires: \_\_\_\_\_