



The Saginaw Chippewa Indian Tribe Of Michigan

7500 SOARING EAGLE BLVD.
TRIBAL CLERK'S OFFICE

MT. PLEASANT, MICHIGAN 48858

(989) 775-4054
FAX (989) 775-4094

FILE COPY REQUEST

***Copy Fee – \$1.00 Per Page**

Payable via cash, cashier's check, or money order

| | | | |
|--|------|-----------------------|-------------|
| Name: | | Date of Birth: | |
| Membership Number: | | | |
| Name of Requestor: | | | |
| Address: | City | State | Zip |
| Phone Number: | | | |
| Please Circle One: | | Mail | or Pick Up |
| What Would You Like (Circle or Specify): | | Complete Copy | or Specify: |

By signing below, I understand this file copy will be ***delivered to me as indicated above within three (3) weeks*** from the date the Enrollment Department received this form. Filing fee is to be paid prior to the delivery of copy.

THIS FORM MUST BE NOTARIZED OR SIGNED BY A FEDERAL CORRECTIONS AGENT

Signature _____ **Dated** _____

=====Notary Use Only=====

Sworn and Subscribed before me, _____, a Notary Public in and for the State of _____, County of _____, do hereby certify that _____ provided proper photo-identification that clearly identifies the person who executed the foregoing instrument as the above named person and said person acknowledged the execution of the foregoing instrument to be his/her act and deed. Subscribed and sworn to me this ____ day of _____, 20 ____.

(seal)

Notary Public
My commission Expires on _____.

=====Federal Corrections Agent Use Only=====

Subscribed and sworn before me, a Federal Corrections Agent authorized to administer oaths and take acknowledgments of inmates.

Corrections Agent authorized by the Act of July 7, 1955,
as amended, to administer oaths (18 U.S.C. § 4004).

Date

*November 3rd, 2010, Tribal Council approved a fee of one dollar per page for copies of files.