

**SHAREHOLDER INFORMATION SHEET**

Shareholder Name: \_\_\_\_\_

Shareholder Blood Quantum: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Spouse Name: \_\_\_\_\_ Blood Quantum: \_\_\_\_\_

Children's Names \_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

\_\_\_\_\_ Blood Quantum: \_\_\_\_\_

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

Date: \_\_\_\_\_

Please mail, email or fax to the address below.