BIA-8306

OMB No. 1076-0104
Expires 12/31/06
Annual Burden Hrs. 38

MEMBERSHIP ROLL OF _____ AS OF _____
(name of group) (month, day, year)

Roll Number	Name and Address	Sex	Birth Date	Birth Place	Tribe		Names of Parents	Birth Date	Birth Place	Tribe	
							Fa.				
							Mo.				
							Fa.				
							Mo.				
							Fa.				
							Mo.				
							Fa.				
							Mo.				
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							Fa.				
							Mo.				
							Fa.				
							Mo.				
							Fa.				
							Mo.				

KEY TO ABBREVIATIONS: Fa. Father; Mo. Mother