OFFICE OF THE SPECIAL TRUSTEE FOR AMERICAN INDIANS OFFICE OF TRUST FUNDS MANAGEMENT

## **Application to Withdraw Tribal Funds from Trust Status**

## **A. General Information**

(Supply Tribal identification and contact information, and fund information, as asked for, below, in 1-8. If applicable, place an X in the appropriate box in 9.)

1. Name of Tribe	2. Date
3. Address of Tribe	3. Phone Number
5. Name of Tribal Chairman	
6. Docket Number or Other Identification of Trust Fund	7. Approximate Dollar Amount
	\$
8. Name and Title of Person Submitting Application	9. Type of Fund
	Judgment Fund Settlement Fund

## B. Specific Regulatory Requirements in 25 CFR 1200 § 1200.13

(Checklist for ensuring that the required documentation is attached. Place an X by each document attached.)

- 1. Tribal Membership Notification
- 2. Tribal Resolution
- 3. Formal Agreement between Tribe and Investment Entity
- 4. Legal Opinion by Attorney
- 5. Results of Tribal Referendum, if Required by Constitution
- 6. For Judgment or Settlement Funds; Act Setting Out Use of Funds
- \_\_\_\_ 7. Management Plan

## Paperwork Reduction Act Statement:

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that this information is being collected to enable Tribes to withdraw Tribal trust funds. Response to this request is voluntary. The public reporting burden for this collection of information is estimated to average 400 hours per response, including the time required for gathering the data needed and completing and reviewing the collection of information form. Send comments on the burden estimate or on any other aspect of this collection of information, including suggestions for reducing this burden, to Office of the Special Trustee for American Indians, Department of the Interior, MS 5140 MIB, 1849 C St. NW, Washington, D.C., 20240. Under the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.