



## FOREST LAKE CHAPTER

Jimmy Yellowhair, Council Delegate  
May Gilene Begay, President  
Raphael Boy, Vice-President  
Brenda White, Secretary Treasurer  
Irene Begaye, Grazing Representative  
Ella M. Benally, Community Service Coordinator

**JONATHAN NEZ**  
PRESIDENT

**MYRON LIZER**  
VICE-PRESIDENT

## VERIFICATION OF RESIDENCY

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

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

Purpose of Verification:

\_\_\_\_\_

Mileage from Home to the Chapter:

\_\_\_\_\_

\_\_\_\_\_

Other Information needed on Verification:

Birthdate? \_\_\_\_\_

Census Number? \_\_\_\_\_

Social Security Number? \_\_\_\_\_

Registered Member of Forest Lake? \_\_\_\_\_

Mailing Address?

\_\_\_\_\_

\_\_\_\_\_

Other Names on Verification:

\_\_\_\_\_

\_\_\_\_\_

\*\*\*\*Letter of verification will contain the information you provide on this form. If you can be confirmed as a currently registered voting member of Forest Lake Chapter. That notation will be made. Verification of residency can only be provided by a staff member or official who will be able to attest to your residency.