

Kickapoo Tribe of Oklahoma

Post Office Box 70
McLoud, OK 74851

Enrollment 405/964-5418
Fax 405/964-5417

DATE: _____

Tribal Chairman
Kickapoo Tribe of Oklahoma
P.O. Box 70
McLoud, OK 74851

Dear Tribal Chairman:

This is to request Burial funds for _____ who died on _____.
I have knowledge of the circumstances surrounding the death of the above-mentioned
individual. The check for funds in the amount of \$_____ should be made out to:
_____. On behalf of the family, I understand that a remaining balance
of only \$_____ is available for the purpose of having an adoption at a later date.

Sincerely,

Requestor/surviving relative

Address

Phone #

If not accompanied by a death certificate, this form must be attested to by another
individual outside of the immediate family.

I, _____, Hereby attest that I also possess personal knowledge of the
death of _____ on _____. Tribal identification # _____
date of birth _____. The deceased died in _____
(city) (state)

(county)

Signature