To: All Ponca Member Households

From: The Enrollment Committee

We are conducting a survey to complete the "2017" census in accordance with the Ponca Tribe of Nebraska's Constitution Article II Section 8.

"...Once every year in the month of April, the Enrollment Committee shall conduct a census of the members of the Ponca Tribe of Nebraska and the roll of members shall be amended according to the findings of the census conducted..."

The information that you provide to us on this questionnaire will allow us to update the enrollment records.

You may mail, email or fax this questionnaire back. We thank you for your time and assistance in this matter.

Your Name____________________________________________

1. Is there a member or a relative that you know has passed away in the last 5 years?
   Yes________ No________

2. If yes, please list the name of the individual(s) that you know of and who we may contact for further information.

   ______________________________________________________
   ______________________________________________________
   ______________________________________________________
3. Are we sending all of your mailings to the correct address?

Yes_________ No_________

If no, please list your complete mailing address. (Please include the Apt. #, PO Box, etc.)

____________________________________

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4. Do you know any Ponca Members who are not receiving any mailings from the Ponca Tribe?

Yes_________ No_________

If yes, please list name and current address, if known.

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5. Please list the names of all the Ponca members who reside in your home, including yourself.

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6. If you have a child that has recently moved out of your household please list the address.

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7. If you have recently had a name change due to marriage, divorce or otherwise, please list your new name below and send in a copy of your marriage license, divorce decree etc for verification of name change.

____________________________________

8. Are you a registered Tribal Voter? Yes_______ or No_______
   (If you are unsure, please contact the Enrollment Office for assistance)

   8a. If you are not registered would you like a Tribal Voter Registration form sent to you? Yes_______ or No_______

9. Have you served in the military? Yes_______ or No_______

   9a. Date of service _____/_____/__________