DA	TE:			
ТО	:	Bureau of Trust Funds Administration (BTFA)		
FR	OM:	NAME:		
		SOCIAL SECURITY NUM	1BER:	
		DATE OF BIRTH:		
		ADDRESS:		
IIN	I ACCOUI	NT No. or TRIBAL ENROLI	LMENT No:	
RE	: VERIFI	CATION OF IDENTITY AN	D REQUEST TO UPDATE MINOR IIM ACCOUNT	
	I, (Account Holders's name) hereby request the my Individual Indian Monies (IIM) account be updated from being a minor to an adult. I are			
•			h photo id in support of my request.	
Sig	ned:	(Indian beneficiary)	Date:	
		(mulan beneficiary)		
			epartment of the Interior or Bureau of Trust e <u>OR</u> must be NOTARIZED to be valid.	
Wit	nessed by	:		
Sig	nature of [DOI or BTFA Employee	Print DOI/BTFA Employee Name	
Pos	Position Title		Date	
******	******	*****************	*******	
-		older's Signature or Thumbj		
		day of	personally appeared	
OII	uns		personally appeared to count holder) and signed the foregoing instrument.	
Iad	cknowledg	e that he/she signed the sa		
Pri	nted Name	e of Notary Public	NOTARY PUBLIC Signature	