

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF INDIAN AFFAIRS

APPLICATION FOR THE EXCHANGE OF INDIAN LAND

DATE _____

In justification of this application, true statements are made to the following items:

1. Age: _____ 2. Date of Birth : _____
3. Degree of Indian Blood: _____ Enrollment Number: _____
4. I am enrolled as a _____ Indian.
Name of Tribe
5. Single Married Widow Widower Spouse's name _____
6. The following persons are dependent upon me for support. (Give names, ages, and relationship): _____

7. Education: Years in grade school _____ High School _____ College _____
8. Permanent address _____
9. The amount of my annual income is \$ _____
10. My income is obtained from the following sources: _____
11. PLEASE STATE WHETHER ANY PARTY INVOLVED IN THIS TRANSACTION IS EMPLOYED BY THE U.S. GOVERNMENT AND IF SO, WHERE they are employed _____
12. If receiving public assistance grants from the State or General Assistance from the Bureau of Indian Affairs, or funds from the Veterans Administration, Social Security, or any regular public benefit, state kind and amount. If none, state none. _____
13. If indebted to the United States, state amount and purpose of indebtedness.

14. I do/do not live on or make personal use of the land covered by this application.
15. The land is leased and the annual rent received is \$ _____
16. Your reason(s) for exchanging land: _____