

## TOHONO O'ODHAM NATION

## NAME CHANGE

## You MUST Submit This Application (in person or by mail) to: The Elections Office of the Tohono O'odham Nation

The Elections Office of the Tohono O'odham Nation Physical Address: BIA Loop #34/Sells, AZ Mailing Address: P.O. Box 837/Sells, AZ/85634 Telephone Number: 520-383-8709

I,	, am a regi	stered voter in the	district (if applicable), ir
the commun	ity of	(if applicable). I wish to change	my name on the Official List of
Registered Voters from		to	This name
change is bas	sed on the following:		
[]	marriage;		
[]	divorce;		
[]	legal name change;		
[]	other, please explain:		
	-		v
I avow that t	this name change is not for pu	urposes of defrauding anyone. Furthe	er, that the information below is
current and c	correct.		
Enrollment #	Date of birth	Phone #	
Mailing addr	POB/Street	City/Stata/7	
	POB/Street	City/State/Zi	p
Date		Signature	
	OFFICE USE ONLY:		
Date received		Ву	
<b>ELECTION</b>	BOARD REVIEW		
Date		Election Board Chairman	n
Date Name Change entered:		Ву	