## CERTIFICATION

It is hereby certified by the undersigned that I am personally acquainted with

circumstances of the birth of _____ and that he/she was born
(NAME)

on _____ at _____ to _____
(MONTH, DATE, YEAR) (PLACE OF BIRTH) (FATHER'S NAME)

who is _____ Mexican Kickapoo Indian and _____
(BLOOD DEGREE) (MOTHER'S NAME)
who is _____ Mexican Kickapoo Indian.
(BLOOD DEGREE)

(If other than Mexican Kickapoo, please indicate which tribe or nationality.)

WITNESS:

_____ _____
(SIGNATURE) (SIGNATURE)

_____ _____
(PRINT NAME) (PRINT NAME)

_____ _____
(RELATIONSHIP) (RELATIONSHIP)

_____ _____
(ADDRESS) (ADDRESS)

_____
(SIGNATURE)

_____
(PRINT NAME)

_____
(RELATIONSHIP)

_____
(ADDRESS)

Sworn to and subscribed before me this ____ day of _____, 20____.

(SEAL OR STAMP) _____
(NOTARY PUBLIC)

My commission expires: _____