



PRAIRIE BAND POTAWATOMI NATION
PER CAPITA OFFICE
16281 Q Road Mayetta, KS 66509
(866) 277-3722 Toll Free
(785) 966-3993 Phone
(785) 966-3917 Fax

PER CAPITA PAYMENT OPTIONS FORM

Must be received at least 14 days before Per Capita Distribution Date

NAME: _____ ROLL # _____

ADDRESS: _____

CITY / STATE / ZIP: _____

PHONE NUMBER (H): _____ (C): _____

I HAVE SELECTED THE FOLLOWING PAYMENT OPTION FOR MY QUARTERLY PER CAPITA PAYMENT AND UNDERSTAND THAT I MUST CONTACT THE PER CAPITA OFFICE IN WRITING IF I WANT TO CHANGE MY PAYMENT OPTION:

____ OPTION 1: PLEASE MAIL A PAPER CHECK TO THE ADDRESS LISTED ABOVE.

____ OPTION 2: PLEASE DIRECT DEPOSIT MY PER CAPITA IN TO MY BANK ACCOUNT LISTED BELOW:

NAME OF BANK: _____

IS THIS ACCOUNT A PRE-PAID DEBIT CARD? YES ____ NO ____ (PLEASE CHECK ONE)

ROUTING #: _____ ACCOUNT #: _____

CHECKING: _____ SAVINGS: _____ (PLEASE CHECK ONE)

*****THIS FORM IS NOT VALID UNLESS SIGNED BY MEMBER*****

SIGNATURE: _____ DATE: _____