

**RESOLUTION OF THE
WHITE MOUNTAIN APACHE TRIBE OF THE
FORT APACHE INDIAN RESERVATION**

- WHEREAS**, the Tribal Council of the White Mountain Apache Tribe has been advised that Ms. Kathy Lee Fall, DOB: 08-16-1971, has requested enrollment with the White Mountain Apache Tribe; and
- WHEREAS**, the Tribal Enrollment Committee has completely reviewed Ms. Kathy Lee Fall's request and supporting documents; and
- WHEREAS**, the Enrollment Committee finds Ms. Fall, eligible for enrollment with the White Mountain Apache Tribe and possesses the necessary blood quantum of 1/2 White Mountain Apache through her father Leonard Fall; and
- WHEREAS**, Kathy Lee Fall, has been a resident of the Fort Apache Indian Reservation for fourteen years; and
- WHEREAS**, Kathy Lee Fall, is willing to and shall provide her relinquishment of her enrollment with the San Carlos Apache Tribe.

BE IT RESOLVED by the Tribal Council of the White Mountain Apache Tribe hereby grants Kathy Lee Fall membership into the White Mountain Apache Tribe, based on the recommendation of the Enrollment Committee.

The foregoing resolution was on May 20, 1992, duly adopted by a vote of five for and zero against by the Tribal Council of the White Mountain Apache Tribe, pursuant to authority vested in it by Article III, Section 3 of the Amended Constitution and Bylaws of the Tribe, ratified by the Tribe June 27, 1958, and approved by the Secretary of the Interior on May 29, 1958, pursuant to Section 16 of the Act of June 18, 1934 (48 Stat. 984).

RECEIVED

MAY 27 1992

FORT APACHE INDIAN AGENCY
WHITERIVER, ARIZONA



Chairman of the Tribal Council



Secretary of the Tribal Council

Received By: C. Alhaha
Date: 3/19/92

APPLICATION FOR ENROLLMENT WITH THE
WHITE MOUNTAIN APACHE TRIBE

NAME Kathy Lee Fall SOCIAL SECURITY NO. 527-37-1091 SEX Female

Indian, Maiden or other name by which you are known: _____

DATE OF BIRTH: 08/16/71 Degree White Mountain OK Degree other _____
Apache Indian Blood 1/2 Indian Blood 1/2 SCA

Does your name appear on the January 01, 1938 Census of the White Mountain Apache Tribe? YES _____ NO x

If YES, name by which you are listed _____ Roll No. _____
If NO, name, roll number, relationship to ancestor on roll: _____

ANCESTOR Percy B. Fall ROLL NO. _____ RELATIONSHIP Grandfather

TRACE ANCESTRY TO ANCESTOR ON BASIC ROLL OF JANUARY 01, 1938

FATHER: Leonard Fall Degree White Mountain OK Degree other _____
Apache Indian Blood Full Indian Blood _____

Enrolled with another Tribe? YES _____ NO x If YES, Name of Tribe _____

FATHER'S father Percy B. Fall FATHER'S mother Magdalene Fall

MOTHER Hattie Fall Degree White Mountain _____ Degree other _____
Apache Indian Blood None Indian Blood Full

Enrolled with another Tribe? YES x NO _____ If Yes, Name of Tribe San Carlos

MOTHER'S father Glen Harney MOTHER'S mother Lydia Harney

C E R T I F I C A T I O N

I HEREBY CERTIFY THAT _____, for whom this application is being made, IS _____ IS NOT _____ an adopted child and IS _____ IS NOT _____ a direct decendent by blood of a member of the White Mountain Apache Tribe.

DATE: _____ SIGNATURE OF APPLICANT _____

To be completed by person filing application in behalf of a minor, mental incompetent, older person in need of assistance, or member of the Armed Forces.

NAME:



United States Department of the Interior
BUREAU OF INDIAN AFFAIRS
SAN CARLOS AGENCY
San Carlos, Arizona 85550

RECEIVED
WHITE MOUNTAIN APACHE
TRIBE

MAR 31 1992

COUNCIL SECRETARY

IN REPLY REFER TO:
Tribal Operations
(602) 475-2321

MAR 30 1992

Mr. Dell White
Enrollment Officer
White Mountain Apache Tribe
P.O. Box 700
Whiteriver, Arizona 85941

Dear Mr. White:

Enclosed is the Conditional Relinquishment form executed by Kathy Lee Fall. Please notify this office when her membership is effective with the White Mountain Apache Tribe so that the name, Kathy Lee Fall, can be removed from the membership rolls of the San Carlos Apache Tribe. If you have any questions, you may contact the Tribal Enrollment Clerk.

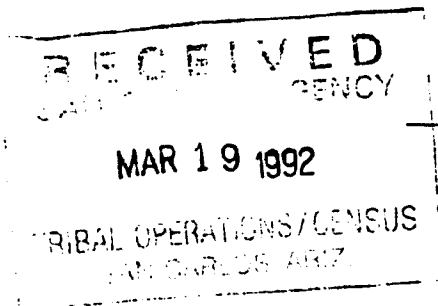
Sincerely,


Tribal Operations Specialist

Enclosure

CONDITIONAL RELINQUISHMENT OF ENROLLMENT

Kathy Lee Fall, DOB: 08/16/71, hereby relinquish my membership and all rights or title to any privileges or benefits which I may have had as a member of the San Carlos Apache Tribe of Indians, Census No. 00008887. CONDITIONED UPON my acceptance as a member of the White Mountain Apache Tribe. If such enrollment is not approved, this relinquishment is not effective. I am making this relinquishment in order to be enrolled with the White Mountain Apache Tribe of Indians with which I am eligible for membership. I am making this relinquishment voluntarily and I understand that I will no longer be considered a member of the San Carlos Apache Tribe if accepted as a member of the White Mountain Apache Tribe, or be entitled to any of the benefits or privileges accorded other members of that Tribe.



Kathy L. Fall
(signature)

WITNESSES:

Cabin McCoy
(signature)

John Fanta III
(signature)

PO Box 209; San Carlos, AZ 85550
Mailing Address

PO Box 209; San Carlos, AZ 85550
Mailing Address

STATE OF Arizona

COUNTY OF Gila

Subscribed and sworn before me this 19th day of March, 1992.

Vivian Oster
Notary Public

PO Box 209; San Carlos, AZ 85550
Address

My Commission Expires August 21, 1995.