



**CHEROKEE NATION  
Registration Department**

P.O. Box 948  
Tahlequah, OK 74465-0948  
(918) 453-5000

**DEATH AFFIDAVIT**

I, \_\_\_\_\_ do hereby solemnly swear that I have personal knowledge regarding the death of \_\_\_\_\_ and know for fact that the above mentioned individual is now deceased. Affiant knows and remembers facts because: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Date of Birth**

\_\_\_\_\_  
**Date of Death**

\_\_\_\_\_  
**Registry Number**

Please return form to:

**Cherokee Nation  
Attn: Tribal Registration  
P.O. Box 948  
Tahlequah, OK 74465**

\_\_\_\_\_  
**Signature of Affiant**

**NOTARY PUBLIC**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
**Notary**

\_\_\_\_\_  
**My Commission Expires**