



*Indian Registry and Membership Department  
Alexis Nakota Sioux Nation*

**MEMBERSHIP PCD DIRECT DEPOSIT  
REQUEST FORM**

I, \_\_\_\_\_ am requesting to receive my  
*Per Capita Distribution Entitlements* through Direct Deposit.

Name: \_\_\_\_\_

Treaty No. \_\_\_\_\_

Spouse: \_\_\_\_\_

Dependents: *\*(Please attach PCD Waiver to this form)\**

Banking Information: *(Please Attach Direct Deposit Form to this application)*

Mailing Address:

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Contact Information:

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Please Email Application and all required paperwork to:**

**PCD@ANSN.CA**

**DEADLINE FOR DIRECT DEPOSIT IS:  
FRIDAY DECEMBER 8, 2023 @ 4:30 PM**