Descendant Application

KONIAG
INCORPORATED

The Descendant program is available to all descendants of voting Koniag Shareholders. Additional documentation is required:

☐ *Copy of certified birth certificate(s)* to show proof of descendancy from a voting shareholder as follows:

Child of Shareholder	○ Birth certificate of child
Grandchild of Shareholder	○ Birth certificate of child, **and**
	○ Birth certificate of grandchild
Great-grandchild of Shareholder	○ Birth certificate of child, **and**
	○ Birth certificate of grandchild, **and**
	○ Birth certificate of great-grandchild
Adopted child	○ Adoption Decree OR birth certificate and adopted birth certificate

☐ *Copy of legal document* authorizing the change of name (marriage certificate, divorce decree, etc.), if current name is different from the birth certificate.

APPLICANT (DESCENDANT)

Date of Birth:

Name: First Name	/	Middle Initial	/	Last Name

Mailing Address:	City	State	Zip Code

Telephone:	Email:	SSN: (xxx-xx-xxxx)

CUSTODIAN INFORMATION

Provide information of the Custodian/Guardian if applicant is a minor (under age 18).

Name : First Name	/	Middle Initial	/	Last Name

Mailing Address:	City	State	Zip Code

Telephone:	Email:	SSN(xxx-xx-xxxx)

Provide information about the (voting) Shareholder: ○ Parent   ○ Grandparent   ○ Great-Grandparent

SHAREHOLDER INFORMATION

Shareholder ID Number:

Name : First Name	/	Middle Initial	/	Last Name

Mailing Address:	City	State	Zip Code

Telephone:	Email:	Last 4-digits of SSN: (xxxx)

Signature (or Custodian/Guardian)   Date

I certify that the information provided on this form is true and correct to the best of my knowledge.

DELIVER, MAIL, FAX OR EMAIL FORM (WITH REQUIRED DOCUMENTS)

Shareholder Records
194 Alimaq Drive
Kodiak, AK 99615
Phone: 907-486-2530 or toll free: 800-658-3818
Fax: 907-486-3325
Email: shareholderrecords@koniag.com

Shareholder Records
3800 Centerpoint Drive, Ste 502
Anchorage, AK 99503
Phone: 907-561-2668 or toll free: 800-658-3818
Fax: 907-562-5258
Email: shareholderrecords@koniag.com

For Office Use Only: Approved: _____	Not Approved – Reason: _____
ID: _____	Entered by: _____ Date: _____