

NATIVE AMERICAN BUSINESS OWNER CERTIFICATION FORM

I, *Click here to enter text.*

certify and represent that I am an enrolled tribal member residing in Montana and own 51% of the business *Click here to enter text.*, which is recognized and registered with the Montana Secretary of State's Office or under tribal ordinance.

Borrower Signature:

Name: *Click here to enter text.*

Title: *Click here to enter text.*

Date: *Click here to enter text.*