



## **PRIVACY PROGRAM OPT OUT**

Please fill out the below information if you no longer wish to participate in the Privacy Program and would like to have your name placed back on the public accessible list. Be advised that by opting out of the Privacy Program, you will no longer be excluded from mailings from those citizens applying for petitions for recalls, referenda, initiative and/or Constitutional Amendments.

---

\_\_\_\_\_  
Last Name                                      First Name                                      Middle Name Maiden, Suffix, Alias(es)

\_\_\_\_\_  
Enrollment Number      Date of Birth

---

I have carefully read and understand this form. By signing below I wish to no longer participate in the Privacy Program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

---

RETURN THIS FORM BY:

Mail: Osage Nation Election Office, P.O. Box 928, Pawhuska, OK 74056

Fax: (918) 287-5292

E-mail: [electionoffice@osagetribe.org](mailto:electionoffice@osagetribe.org)

In Person: 608 Kihekah, Pawhuska, OK (NOT a mailing address.)