

RESOLUTION OF THE  
WHITE MOUNTAIN APACHE TRIBE OF THE  
FORT APACHE INDIAN RESERVATION

WHEREAS, the Tribal Council of the White Mountain Apache has been advised that Mr. Erick Walker, whose birthdate is August 01, 1972, has requested enrollment with the White Mountain Apache Tribe; and

WHEREAS, the Tribal Enrollment Committee has completely reviewed Mr. Walker's request and supporting documents; and

WHEREAS, the Enrollment Committee finds that Mr. Walker is eligible for enrollment with the White Mountain Apache Tribe and possesses the necessary blood quantum of one-half White Mountain Apache through his father, Mr. Rudy Walker, Sr.; and

WHEREAS, Erick Walker has been a permanent resident of the Fort Apache Indian Reservation since 1978, at the age of six years old; and

WHEREAS, Erick Walker is willing to and shall provide to the Enrollment Committee and Tribal Council, proof of his relinquishment of his enrollment in the San Carlos Apache Tribe; and

BE IT RESOLVED by the Tribal Council of the White Mountain Apache Tribe that based on the recommendation of the Enrollment Committee, that the enrollment of Erick Walker is hereby granted membership into the White Mountain Apache Tribe.

The foregoing resolution was on August 13, 1991, duly adopted by a vote of 8 for and 0 against by the Tribal Council of the White Mountain Apache Tribe, pursuant to authority vested in it by Article III, Section 3 of the Amended Constitution and Bylaws of the Tribe, ratified by the Tribe June 27, 1958, and approved by the Secretary of the Interior on May 29, 1958, pursuant to Section 16 of the Act of June 18, 1934 (48 Stat. 984).



# White Mountain Apache Tribe

P.O. BOX 700  
WHITERIVER, ARIZONA 85941

August 01, 1991

Wesley Bonito  
TRIBAL EDUCATION  
P.O. Box  
Whiteriver, AZ 85941


Dear Mr. Bonito:

Please be advised by the Office of Vital Records of the White Mountain Apache Tribe, that the Enrollment Committee members had their meeting on August 01, 1991, and had approved Erick R. Walker, DOB: 08-01-1972, to become a tribal member of the White Mountain Apache Tribe.

To finalize this enrollment request, the Tribal Council has to approve the request which the Enrollment Committee had approved. This will be presented to the Tribal Council at their next Council Meeting which is scheduled for August 06, 1991.

If you have further questions regarding this, please notify our office at 338-4001.

Sincerely,

  
Dell D. White, Director  
Office of Vital Records  
WHITE MOUNTAIN APACHE TRIBE

CONDITIONAL RELINQUISHMENT OF ENROLLMENT

I, Erick Walker, DOB: 5-1-72, hereby relinquish my membership and all rights or title to any privileges or benefits which I may have had as a member of the SAN CARLOS APACHE TRIBE of Indians, Census No. 527-25-5567, CONDITIONED UPON my acceptance as a member of the WHITE MOUNTAIN APACHE TRIBE. If such enrollment is not approved, this relinquishment is not effective. I am making this relinquishment in order to be enrolled with the WHITE MOUNTAIN APACHE TRIBE of Indians with which I am eligible for membership. I am making this relinquishment voluntarily and I understand that I will no longer be considered a member of the SAN CARLOS APACHE TRIBE if accepted as a member of the WHITE MOUNTAIN APACHE TRIBE, or entitled to any of the benefits or privileges accorded other members of that Tribe.

Erick R. Walker  
(signature)

WITNESSES:

Jinela Buerette  
(signature)

Virginia M. Dalton  
(signature)

P.O. Box 700  
Mailing Address  
Whiteriver AZ 85941  
STATE OF Arizona  
COUNTY OF Navajo

P.O. Box 700 WR, AZ 85941  
Mailing Address

Subscribed and sworn before me this 22 day of July, 1991.

Rayleon Benashley  
Notary Public  
P.O. - Whiteriver, Az. 85941  
Address

My Commission Expires Sept. 10, 1994.

Received By: Mice  
Date: 7-11-71

APPLICATION FOR ENROLLMENT WITH THE  
WHITE MOUNTAIN APACHE TRIBE

NAME EPICK WALKER SOCIAL SECURITY NO. 527-25-3867 SEX MALE

Indian, Maiden or other name by which you are known: \_\_\_\_\_

DATE OF BIRTH: 8-1-72 Degree white Mountain Apache Indian Blood 1/2 Degree other Indian Blood 1/2

Does your name appear on the January 01, 1938 Census of the White Mountain Apache Tribe? YES \_\_\_\_\_ NO \_\_\_\_\_ S.C.A.T

If YES, name by which you are listed \_\_\_\_\_ Roll No. \_\_\_\_\_  
If NO, name, roll number, relationship to ancestor on roll: \_\_\_\_\_

ANCESTOR \_\_\_\_\_ ROLL NO. \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

\*\*\*\*\*

TRACE ANCESTRY TO ANCESTOR ON BASIC ROLL OF JANUARY 01, 1938

FATHER: Rudy WALKER SR. Degree White Mountain Apache Indian Blood 4/4 Degree other Indian Blood \_\_\_\_\_

Enrolled with another Tribe? YES \_\_\_\_\_ NO X If YES, Name of Tribe \_\_\_\_\_

FATHER'S father \_\_\_\_\_ FATHER'S mother \_\_\_\_\_

MOTHER Cora W. Walker Degree White Mountain Apache Indian Blood \_\_\_\_\_ Degree other Indian Blood 4/4

Enrolled with another Tribe? YES X NO \_\_\_\_\_ If Yes, Name of Tribe S.C.A.T

MOTHER'S father \_\_\_\_\_ MOTHER'S mother \_\_\_\_\_

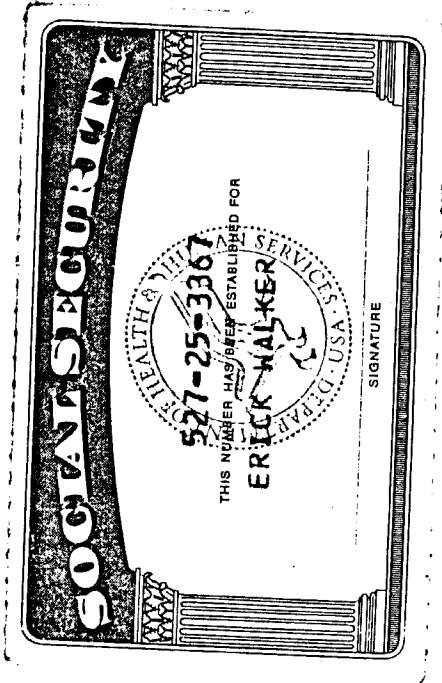
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C E R T I F I C A T I O N

I HEREBY CERTIFY THAT \_\_\_\_\_, for whom this application is being made, IS \_\_\_\_\_ IS NOT \_\_\_\_\_ an adopted child and IS \_\_\_\_\_ a direct decendent by blood of a member of the White Mountain Apache Tribe.

DATE: \_\_\_\_\_ SIGNATURE OF APPLICANT Epick R. Walker

To be completed by person filing application in behalf of a minor, mental incompetent, older person in need of assistance, or member of the Armed Forces.



July 22, 1991

Ms. Jean Cassa  
San Carlos Agency  
Enrollment Department  
P.O. Box 209  
San Carlos, Arizona 85550

Dear Ms. Cassa:

My name is Erick Rudell Walker, DOB: August 1, 1972, born in San Carlos, Arizona, and an enrolled member of the San Carlos Apache Tribe, son of Rudy Walker and Cora (Nelson) Walker. My father is 4/4 White Mountain Apache and my mother is 4/4 San Carlos Apache, making me 1/2 White Mountain Apache and 1/2 San Carlos Apache and making me eligible for membership into both Tribes.

I have requested membership into the White Mountain Apache Tribe for reasons stated below, that I have resided in Whiteriver, Arizona on the Fort Apache Indian Reservation since age 6, attended and graduated from Alchesay High School, have a daughter, Mallory Renee Walker, enrolled into the White Mountain Apache Tribe and I wish to make my home and remain on the Fort Apache Indian Reservation. My other reason is that the White Mountain Apache Education Department has impressed me with their dedication to the education of their tribal members and that education is of utmost importance to me and desire to continue with my higher education under their guidance and assistance. In that respect, I will be attending the Haskell Indian Junior College starting this fall.

Attached is my request for relinquishment from the San Carlos Apache Tribe and I understand that will become effective upon my enrollment into the White Mountain Apache Tribe.

Thank you for your expeditious assistance in addressing this matter of importance to me.

Sincerely,

*Erick R. Walker*



# White Mountain Apache Tribe

P.O. BOX 700  
WHITERIVER, ARIZONA 85941

July 23, 1991

Eric Walker  
Whiteriver, AZ 85941

Dear Mr. Walker:

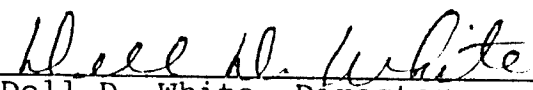
Please be advised that our enrollment committee members will have their meeting on August 01, 1991, in the Tribal Executive Building, at 1:30 p.m.

I have scheduled you for an interview at 2:15 p.m., please make every effort to be there. This is to interview you for your possible enrollment into the White Mountain Apache Tribe.

If you should have any questions, do not hesitate to contact me at 338-4346, or come by our office.

Thank you in advance.

Sincerely,

  
\_\_\_\_\_  
Dell D. White, Director  
Office of Vital Records  
WHITE MOUNTAIN APACHE TRIBE

file



United States Department of the Interior  
BUREAU OF INDIAN AFFAIRS  
SAN CARLOS AGENCY  
San Carlos, Arizona 85550

IN REPLY REFER TO:  
Tribal Operations  
(602) 475-2321

JUL 25 1991

Mr. Dell White  
Tribal Enrollment Officer  
White Mountain Apache Tribal Enrollment  
White Mountain Apache Tribe  
P.O. Box 700  
Whiteriver, Arizona 85941

Dear Mr. White:

Enclosed is a copy of the Conditional Relinquishment form executed by Erick Rudell Walker. Please notify this office when his membership is effective with the White Mountain Apache Indian Tribe so that Erick's name can be removed from the membership roll of the San Carlos Apache Tribe. If you have any questions, you may contact the Tribal Enrollment Clerk.

Sincerely,

*Norm Anderson*  
Tribal Operations Specialist

Enclosure



RECEIVED  
SAN CARLOS AGENCY  
JUL 23 1991  
San Carlos, Ariz.

CONDITIONAL RELINQUISHMENT OF ENROLLMENT

I, Erick Walker, DOB: 8-1-72, hereby relinquish my membership and all rights or title to any privileges or benefits which I may have had as a member of the SAN CARLOS APACHE TRIBE of Indians, Census No. 527-25-5567, CONDITIONED UPON my acceptance as a member of the WHITE MOUNTAIN APACHE TRIBE. If such enrollment is not approved, this relinquishment is not effective. I am making this relinquishment in order to be enrolled with the WHITE MOUNTAIN APACHE TRIBE of Indians with which I am eligible for membership. I am making this relinquishment voluntarily and I understand that I will no longer be considered a member of the SAN CARLOS APACHE TRIBE if accepted as a member of the WHITE MOUNTAIN APACHE TRIBE, or entitled to any of the benefits or privileges accorded other members of that Tribe.

Erick R. Walker  
(signature)

WITNESSES:

Shirley Bennett  
(signature)

Virginia M. Dutton  
(signature)

P.O. Box 700  
Mailing Address  
Whiteriver AZ 85941  
STATE OF Arizona  
COUNTY OF Navajo

P.O. Box 700 WR, AZ 85941  
Mailing Address

Subscribed and sworn before me this 22 day of July, 1991.

Rayleen Benashley  
Notary Public  
P.O. - Whiteriver, G. 85941  
Address

My Commission Expires Sept. 10, 1994.

RECEIVED  
SAN CARLOS AGENCY  
JUL 23 1991  
TRIBAL OPERATIONS / CENSUS  
SAN CARLOS, ARIZ.

STATE OF ARIZONA  
DEPARTMENT OF HEALTH — DIVISION OF HEALTH RECORDS AND STATISTICS  
CERTIFICATE OF LIVE BIRTH

BIRTH NO.  
SB 102-

1. NAME OF CHILD A. FIRST <b>ERICK</b>		B. MIDDLE <b>RUDELL</b>		C. LAST <b>WALKER</b>	
2. SEX <b>MALE</b>	3. TYPE OF BIRTH SINGLE, TWIN, TRIPLET, ETC. <b>SINGLE</b>		4. DATE OF BIRTH MONTH DAY YEAR <b>AUGUST 1 1972</b>		5. HOUR <b>4:20 P.M.</b>
6. PLACE OF BIRTH A. COUNTY <b>GILA</b>		B. TOWN OR CITY <b>SAN CARLOS</b>		7. HOSPITAL OR CLINIC <b>PHS INDIAN HOSPITAL</b>	
8. FATHER'S NAME A. FIRST <b>RUDY</b>		B. MIDDLE <b>WALKER, SR.</b>		C. LAST <b>WALKER</b>	
9. MOTHER'S MAIDEN NAME A. FIRST <b>CORA</b>		B. MIDDLE <b>NEILSON</b>		C. LAST <b>GRAHAM</b>	
10. MOTHER'S USUAL RESIDENCE A. STATE <b>ARIZONA</b>		B. COUNTY <b>BYLAS</b>		C. CITY <b>BYLAS</b>	
11. STREET ADDRESS OR R.F.D. <b>SAN CARLOS INDIAN RESERVATION</b>		12. CITY LIMITS <b>RESERVATION</b>		13. ZIP CODE <b>85530</b>	
14. THE INFORMATION LISTED IN ITEMS 1-13 IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.		15. I ATTENDED THE BIRTH OF THIS CHILD WHO WAS BORN ALIVE AT THE PLACE, TIME AND DATE ENTERED ABOVE.		16. DATE REGISTERED <b>8-23-1972</b>	
17. PARENT OR INFORMANT A. NAME <b>RUDY WALKER, SUR.</b>		18. RELATIONSHIP TO CHILD <b>FATHER</b>		19. DATE SIGNED <b>8-3-1972</b>	
20. ATTENDANT A. NAME <b>DAVID B. KERN</b>		21. TITLE <b>M.D.</b>		22. DATE SIGNED <b>8-17-1972</b>	
23. REG. FILE NO. <b>1130</b>		24. REGISTRAR <b>SELINDA KING</b>		25. DATE RCVD. IN STATE OFFICE <b>8-23-1972</b>	
26. DATE ESTABLISHED <b>9-8-1972</b>		27. SUP. CERT. NO. <b>S72-2013</b>		28. REGISTRAR'S SIGNATURE <i>[Signature]</i>	
29. TITLE <b>ASS'T. STATE REGISTRAR</b>		28. REGISTRAR'S SIGNATURE <i>[Signature]</i>			

CERTIFIED COPY OF VITAL RECORD

STATE OF ARIZONA )  
COUNTY OF MARICOPA )

Date Issued: **SEP 8 1972**

This copy is a true and exact reproduction of the document officially registered and placed on file in the DIVISION OF VITAL RECORDS, ARIZONA STATE DEPARTMENT OF HEALTH, PHOENIX, ARIZONA.

Issued under the authority of ARS 36-341 and by direction of:

LOUIS C. KOSSUTH, M.D.  
Commissioner of Health

*[Signature]*  
ROBERT E. FLINN  
Deputy State Registrar

THIS COPY NOT VALID UNLESS PREPARED ON SAFETY PAPER DISPLAYING STATE SEAL IN COLOR AND IMPRESSED WITH RAISED SEAL OF ISSUING AGENCY



# White Mountain Apache Tribe

P.O. BOX 700  
WHITERIVER, ARIZONA 85941

June 8, 1992

Beatrice Cassa  
SAN CARLOS AGENCY  
P.O. Box #209  
San Carlos, Arizona 85550

Dear Ms. Cassa:

The Office of Vital Records of the White Mountain Apache Tribe does not currently have on it's tribal membership roll on the individual Erick Rudell Walker, whose birthdate is August 01, 1972. His father Rudy Walker, Sr., is a member of the White Mountain Apache Tribe possessing 4/4 Apache blood, and his mother Cora (Nelson) Walker, a member of the San Carlos Apache Tribe.

Erick Rudell Walker's blood degree would than be 1/2 White Mountain Apache, and 1/2 San Carlos Apache, possessing 4/4 degree of Indian Blood. If you should have further question regarding this matter please, do not hesitate to contact our office at 338-4346, ext. 207.

Sincerely,

Dell D. White, Director  
OFFICE OF VITAL RECORDS  
WHITE MOUNTAIN APACHE TRIBE

P-3951  
S72-2013

P.O. Box 3887

ARIZONA STATE DEPARTMENT OF HEALTH  
Division of Health Records and Statistics

Phoenix, Arizona 85030

"AFFIDAVIT OF ACKNOWLEDGMENT OF PATERNITY"

PART I. ACKNOWLEDGMENT OF PATERNITY BY FATHER (This must be signed before a Notary Public) -

I, Rudy Walker, Sr. (FATHER) of Box 764 Whiteriver, Az. 85941 (FATHER'S ADDRESS), being duly sworn, declare that I am the father of Erick Rudell Walker (CHILD'S NAME), the child born to Cora N. Kitcheyan (MOTHER'S NAME) on Aug. 1, 1972 (DATE OF BIRTH) at San Carlos, Arizona (CITY AND STATE). I was not married to Cora N. Kitcheyan at the time of birth nor at any time in the 10 months preceding said birth.

I further declare this statement to be made for recording in the Division of Health Records and Statistics and hereby consent and request that the birth certificate be amended to show the father's name and that the child's surname be changed to agree with the father's name.

Dated this 2ND day of Sept, 19 72.

STATE OF Ariz )  
COUNTY OF Maricopa ) ss

Signature Rudy Walker Sr.

Subscribed and sworn to before me this SEP. 2 day of 1972.

Signature John L. [unclear]  
Title [unclear]  
Address Box 536 Whiteriver, Az. 85941

(Seal)

My authority to administer oaths expires My Commission Expires Aug. 4, 1974

PART II. PERSONAL INFORMATION ABOUT THE FATHER FOR CERTIFICATE (This information must be given as of the time of this birth and not as of the present time.)

Father's Full Name Rudy Walker, Sr. Race Apache  
Date of Birth April 2-1939 Place of Birth Whiteriver, Arizona  
Social Security Number 527-90-8556  
Education (enter highest grade completed) - Elementary 8<sup>th</sup> High School 11<sup>th</sup> College none  
(0, 1, 2, 3, 4, 5, 6, 7, 8) (1, 2, 3, 4) (1, 2, 3, 4, 5)

PART III. AFFIDAVIT BY MOTHER (This must be signed before a Notary Public) -

I hereby declare upon oath that I am the mother of the child referred to herein, that Rudy Walker, Sr. is the father of this child and that it is my wish for the birth certificate to show him to be the father and to show the child's name as Erick Rudell Walker

Dated this 2ND day of Sept, 19 72.

STATE OF Ariz )  
COUNTY OF Maricopa ) ss

Signature Cora N. Kitcheyan

Subscribed and sworn to before me this SEP. 2 day of 1972.

Signature John L. [unclear]  
Title [unclear]

(Seal)

My authority to administer oaths expires My Commission Expires Aug. 4, 1974