

Rincon Band of Luiseño Indians

1 West Tribal Road • Valley Center • CA 92082 • (760) 749-1051 • Fax: (760) 749-8901



TO: Rincon Tribal Council

FROM: _____

Band Member # _____

Address: _____

Phone # _____

RE: California Franchise Tax Board

I, _____, have been contacted by the State of California Franchise Tax Board, informing me that I owe taxes for the year(s) _____.

I am a Tribal Member, living on the Rincon Indian Reservation, and I was living on the Rincon Reservation for the year(s) in question.

Rincon Tribal Member Signature

Date

FORM NEEDS TO BE NOTARIZED