[MUST BE PRINTED ON TRIBAL LETTERHEAD]

[DATE]

Alaska Department of Health and Social Services

Health Analytics & Vital Records

P.O. Box 110675

Juneau, AK 99811-0675

 RE: [CHILD’S NAME]

 DATE OF BIRTH: [PROVIDE DATE HERE]

To Whom It May Concern:

I write to you on behalf of [TRIBE’S NAME HERE] (Tribe), to request that Health Analytics & Vital Records create a new birth record for the child[ren] named above, following the Tribe’s completion of a cultural adoption. Enclosed please find the following original documents:

* Request for a New Birth Certificate Following a Cultural Adoption;
* Tribal Resolution;
* Tribal Statement;
* Descriptive Information Regarding Biological Parents;
* A copy of the ID of the tribal official signing this letter;
* Parental Statement of Mother [if applicable];
* Parental Statement of Father [if applicable]; and
* For a child in OCS Custody, State’s Consent for Adoption [if applicable]

In addition, please find payment for [number of children]:

* $60 to process adoption and for first copy of the new birth certificate; and
* $25 for each additional updated birth certificate; and [optional]
* $30 for each certified copy of the cultural adoption paperwork filed with the Health Analytics & Vital Records. The Tribe requests [number of copies] certified copies. [optional]

For a total amount of $[total amount paid].

The completed documents should be sent to:

 [TRIBE’S ADDRESS, OR OTHER RECIPIENT]

[Optional] Moving forward, the Tribe authorizes Health Analytics and Vital Records to provide certified copies of the cultural adoption records to the following individuals without any further action by the Tribe:

* The adoptive parents; and
* The adopted individual, or their legal guardian.

If there are any issues with this request, please contact the Tribe at [GIVE CONTACT INFORMATION]

Sincerely,

[NAME, TITLE]