

WHAKAPAPA DETAILS FORM

NAME OF BENEFICIARY: _____ *(Print name)*

NAME OF TUPUNA: _____

(Note, as directed by the Court beneficiaries must be descendants of one of the following:

Eriapa Poata Uruamo, Harata Takerei, Kingi Ruarangi, Kukui Pungaro, Te Raraku Hami

Tawaewae, or Weneti Maihi

WHAKAPAPA DESCENT: *(Note, show descent line from tupuna named to beneficiary, if insufficient space please attach as appendix)*

Signed by: _____ **Beneficiary Dated**

Whakapapa verified _____ **Kaumatua Dated**