



To: THE MEMBERS OF THE WABIGOON LAKE OJIBWAY NATION TRUST AGREEMENT

NOTICE OF DISTRIBUTION OF TIMBER CLAIM SETTLEMENT PAYMENT

TAKE NOTICE The Wabigoon Lake Ojibway Nation Settlement and Trust Agreements states the beneficiary (Chief and Council) shall distribute \$1,000.00 to every qualifying WLON Band Member that was both alive on the day of the Vote and was a Member on the day of the Vote, And who has reached the age of eighteen (18) for the purpose of timber claim settlement with Canada.

TAKE NOTICE That the Chief and Councillors and Trustees of the Wabigoon Lake Ojibway Nation have established a process for requesting the timber claim settlement payments.

FURTHER TAKE NOTICE Chief and Council will be completing the distribution to all Eligible WLON Band Members or their legal representatives requesting payment on receipt of a written request Made on the WLON Trust Timber Claim Settlement Fund Form.

DISTRIBUTION DATE

MONDAY, MAY 1ST, 2017

2:00 p.m. – 6:00 p.m.

**WLON MEMBERS who have completed the WLON Trust Timber Claim
Healing Fund Form
Plus 2 pieces of photo Identification.**

For those members who have not yet completed the WLON Trust Timber Claim Settlement Fund Form. Please contact the Band Office at 807-938-6684 or download the form from the WLON website and return to claimsettlement@wlon.ca

**APPLICATION FOR THE WLON TRUST TIMBER CLAIM SETTLEMENT FUND PAYMENT
(\$1,000)**

WABIGOON LAKE OJIBWAY NATION TRUST

TO BE COMPLETED AND RETURNED

PROOF OF WLON MEMBERSHIP AND THAT APPLICANT IS 18 YEARS OF AGE.

PLEASE PRINT LEGIBLY

FILL OUT ALL BOXES

PLEASE CALL 1-855-487-1295/807-938-6684 (WLON TRUST)
FAX FORMS TO: 1-807-938-1166 OR EMAIL TO: claimsettlement@wlon.ca

PART ONE: IDENTIFICATION

First Name	Middle Name	Surname	
Mailing Address (No., Street, Apt. R.R., P.O. Box)		City/Town	
Province/Territory/State	Country	Postal Code/ZIP	Telephone Number
Date of Birth	Place of Birth (Town/City)	Province/State	Country
Proof of Identity (Circle)	Original Birth Certificate	Driver's License	Status Card
	Passport		

**Note that two pieces of identification will ensure that the application is processed quickly.
Attach the proof of identity (photocopy of both sides of any identification card)**

PART TWO: SIGNATURE

My signature indicates that the information I have provided in this application is true and accurate to the best of my knowledge. I acknowledge that knowingly making a fraudulent application could result in criminal prosecution. I understand that every application is subject to verification.

Signature of Applicant

Date

Mail application to: Wabigoon Lake Ojibway Nation Trust, RR 1, Site 115, PO Box 300
Dryden, ON P8N 2Y4 or Fax application to: (807) 938-1166