

BENEFICIARY INFORMATION FORM

TOOTINAOWAZIIBEENG TREATY RESERVE SOVEREIGN WEALTH FUND

Account Name:

To ensure the efficient processing of your distribution, please complete the following information and return this form to Tootinaowaziibeeng Treaty Reserve by email to <u>agriculturalbenefits@ttr292.ca</u>

Full Name:

Preferred Mailing Address:

Telephone Number:

E-mail address:

Tax Residence:

Tax residence refers to the province or state youreside in when you file your tax returns. If you reside outside of Canada and file a Canadian tax return, please provide the province or territory for the tax package that you use. If you reside permanently outside of Canada, we recommend you consult with your tax advisor regarding reporting requirements in your jurisdiction.

*IN ADDITION TO THE COMPLETED APPLICATION FORM, PLEASE INCLUDE A COPY OF TWO (2) PIECES OF VALID GOVERNMENT-ISSUED IDENTIFICATION, ONE OF WHICH MUST BE PHOTO IDENTIFICATION. * This can include Passport, Driver's License, Certificate of Indian Status Cards, Health Care Cards (Health cards issued in all Provinces/Territories or other Provincial Identification Cards, etc.)

Status #:

Date of Birth:

To submit:

Please send completed Beneficiary Form and I.D. to Tootinaowaziibeeng Treaty Reserve by email to <u>agriculturalbenefits@ttr292.ca</u>. You may send a photo or scanned copy of the Beneficiary Forms and I.D. If email is not available, please contact Shayne (Pierce) Lynxleg, Lands Manager/Membership Clerk at 204-546-3334 for alternate methods to submit.

If you have any questions regarding this form please contact:

Shayne (Pierce) Lynxleg – 204-546-3334 Or Victoria Ironstand – 204-546-3334

Preferred Payment Method:

(Please select one of the following payment methods)

	Electronic Fund Transfer (EFT) If you do not have a bank account and require help in opening one, please reach out to the closest major financial institution in your area.
	Wire Transfer \$15.00 fee for each wire sent to a non-Canadian domiciled account.
For ETFs	and Wire Transfers, please either attach a void cheque, direct deposit form or complete the information below:
Name of Bank:	
Address o	of Bank:
Transit #:	
Institutio	n#:
Name on Account:	
Account #	t:

For international wire transfers:

Swift/Business Identifier Code or American Bankers Association (ABA) transit routing number:

Notes:

- The Nation assumes no responsibility for the unsuccessful transfer of funds if incorrect information is provided;
- Funds sent by EFT can be in Canadian currency only.

(Please Print Full Name)

, acknowledge that upon receipt of the above, my entitled Distribution as specified in the Trust Agreement,

I hereby grant my First Nation a full receipt and complete discharge and indemnity in respect of said Distribution.

Beneficiary Signature

Date

Please Note: If the person signing this form is not the named beneficiary within the membership list, please forward a signed notarial copy of the documentation authorizing the signee, on behalf of the beneficiary.