



December 9, 2019

**RE: 1919 LANDS CLAIM DISTRIBUTION APPLICATION**

Dear Band Members,

On behalf of our Chief and Council, I am pleased to announce we are working towards advancing the 1919 Land Claims per Capita Distribution of \$3000 per Sipekne'katik band member. This will be disbursed to each registered band member 19 years and older as of December 31, 2019. Distribution for registered band members as of the referendum date of November 21, 2019 who are 18 and under (minors) will be held in trust until they turn 19 years old. Minors do not have to apply for the distribution, their distribution will automatically allocated on their behalf to the trust.

Enclosed with this letter is the application that must be completed and submitted to the Band by every registered band member. The deadline for applications will be February 14, 2020, after this date their money will be released to the trust.

**Submission Criteria**

**Band members must be registered band members by the date of referendum, November 21, 2019.**

All applications, including the consent portion, must be signed and dated. The Band reserves the right to request documentation such as, and not limited to, a court order or proof of marriage.

You can send your application by using the following methods:

1. Mail to: Sipekne'katik  
Attention: Monica Henneberry  
522 Church Street  
Indian Brook, Nova Scotia B0N 2H0
2. Hand delivery to the Band Office marked as *Attention: Monica Henneberry*
3. Fax to: 902-758-2017
4. Scan/Fax to email to [christmas@sipeknekatik.ca](mailto:christmas@sipeknekatik.ca)

**Disbursements**

**Disbursement payments will be released at the Community Centre on December 18, 2019 from 1pm to 7pm, and December 19, 2019 at the Band Office in Council Chambers from 9am-4pm.**

**Members wishing to pick up their disbursements after December 19, 2019 will have to wait until the office opens on January 6, 2020.**

**Please note that this advance of distribution is subject to available funding arrangements. If funding cannot be arranged by distribution date, all applications received will be held until such time that funding is received.**

Band members will be responsible for making suitable arrangements to collect their payment. If you wish to have your payment mailed, please check the box provided on the application. If you are arranging for another band member to pick up your payment, please indicate who you are authorizing to pick up on your behalf. Otherwise, band members will be expected to pick up their payment in person at the Band Office. It will be at Band's discretion to release any and all payments. Finally, please be advised that payments not picked up by February 28, 2020, or any registered band members who has not applied for the Lands Claim Per Capita Distribution will be forwarded to the trust.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Michael Sack', is written over the name of the Chief.

Chief Michael Sack  
Sipekne'katik



\*\*\*\*1919 Lands Claim Disbursement Application\*\*\*\*

1. First & Last Name: \_\_\_\_\_

3. Phone Number: \_\_\_\_\_

4. Full Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. How would you like to receive your cheque?  
Please circle your choice

Pick up In Person

Mailed Out

Authorized Member to Pick up For You \_\_\_\_\_

6. Band Number:

(ex: 0250000001)

0 / 2 / 5 / 0 / / / / / / / /

7. Date of Birth:

(DD/MM/YYYY)

\_\_\_\_\_

I, \_\_\_\_\_ the applicant hereby understand and agree that the Sipekne'katik Band is advancing me the full \$3000.00 as part of my per capita distribution from the 1919 land claim distribution. Once the settlement money is released by the Government of Canada, I agree and consent to Sipekne'katik retaining my per capita distribution to pay back the advance.

I understand and agree that I must be a registered member, as of the referendum vote on November 21 2019, of the Sipekne'katik Band, and am 19 years of age and older as of December 31 2019 to receive my per capita distribution.

All information provided on this form will remain private and confidential.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

"This Section for Internal Office Use Only"

Cheque Number	Total Payment	Approval Signature