



Payment Instruction, Discharge, Release and Indemnity

IN THE MATTER OF THE George Gordon First Nation Sōniyāskaw Trust Agreement dated for reference April 17, 2025, between George Gordon First Nation as represented by its Band Council and Royal Trust Corporation of Canada as Trustee (collectively, the “Trust”).

Under the current Anti Money Laundering legislation, Government of Canada requires Royal Trust to collect the following information from Members receiving Per-Capita Distribution (“PCD”) payments. The information provided will remain private and confidential in accordance with the Freedom of Information and Protection of Privacy Act and will only be used for the PCD purposes.

I, _____ (full legal name),
also known as _____,
resident of _____, in the Province/State of _____,
STATE THE FOLLOWING:

1. I was a Member of George Gordon First Nation on the George Gordon First Nation’s Treat 4 Agricultural Benefits and Ammunition and Twine Settlement Agreement Ratification Vote date of April 4, 2025.
2. I am therefore eligible for a payment of Fifty Thousand Canadian dollars (CA\$50,000.00) pursuant to the Trust and a Per-Capita Distribution Resolution of the George Gordon First Nation Council made pursuant to the terms of the Trust (the “PCD”).
3. My date of birth is _____ and I am 18 years of age or older.
(yyyy-mm-dd)
4. My Status Number is _____.
5. My occupation is _____.
6. My telephone number is _____.
7. My email address is _____.

8. My residential address (physical address, not PO box) is _____

_____.

9. My mailing address is _____

_____.

10. My Tax Residence is _____.

Tax Residence refers to the province or state you reside 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, RBC Royal Trust recommends you consult with your tax advisor regarding reporting requirements in your jurisdiction.

11. I do not require, nor have I received, the services of a translator regarding this Payment Instruction, Discharge, Release and Indemnity.

12. I am executing this Payment Instruction, Discharge, Release and Indemnity under seal of my own free will and volition.

13. I am executing this Payment Instruction, Discharge, Release and Indemnity conscientiously believing all facts set out herein to be true.

NOW THEREFORE,

14. I hereby authorize and direct Royal Trust to make the Payment to me by:

☐ **Electronic Funds Transfer (EFT)**, into the bank account identified as follows (please attach a bank-validated direct deposit form (stamped and signed) or a VOID cheque and complete the information below):
Financial Institution Name: _____
Financial Institution Address: _____
Financial Institution Number (3 digits): _____
Branch Transit Number (5 digits): _____
Bank Account Number: _____

* For USA or international wires, please also provide:
SWIFT/SORT Code: _____
ABA / Routing number: _____
IBAN (International Only): _____
Additional wire information: _____

Please note that foreign exchange will apply for USA or international wire payments. The exchange rate will be determined at the time of wire transfer.

15. George Gordon First Nation and RBC Royal Trust assumes no responsibility for the unsuccessful transfer of funds if incorrect information is provided.
16. The foreign exchange rate established by RBC will be used, without exception, for any wires that are completed in any currency other than Canadian Dollars.
17. Funds sent by EFT can be in Canadian currency only.
18. I hereby agree that, upon my receipt of the Payment consistent with these instructions, I grant to George Gordon First Nation and Royal Trust Corporation of Canada a full, final and complete discharge with respect to the payment and release George Gordon First Nation and Royal Trust Corporation of Canada from any further obligation to account to me or make a distribution to me in connection with the Payment.
19. I hereby agree to indemnify George Gordon First Nation and Royal Trust Corporation of Canada, including the directors, officers, employees, and agents of Royal Trust Corporation of Canada (collectively the “Indemnified Parties”), and save them harmless from any and all liability, losses, damages, costs (judicial or not), charges and other expenses of any kind or nature arising at any time directly or indirectly out of or in consequence of any action, proceeding, account, claim or demand which may be imposed upon, or incurred by, any one or more of the Indemnified Parties in relation to the making of the Payment out of the Trust to me and Royal Trust acting upon the payment instructions contained herein.
20. I agree that, in accepting this Payment:
 - a. I am receiving a portion of the Settlement Compensation settled to the Trust pursuant to the George Gordon First Nation’s Treat 4 Agricultural Benefits and Ammunition and Twine Settlement with the Government of Canada, which was ratified by the members of George Gordon First Nation on April 4, 2025; and

- b. I am granting to the George Gordon First Nation and the Trustee a full, final release and complete discharge with respect to the distribution of the Payment from a portion of the George Gordon First Nation Treaty 4 Agricultural Benefits and Ammunition and Twine Settlement Compensation as a per capita distribution, and further release George Gordon First Nation, its Chief and Council, agents and employees, and the Trustee and their respective successors, heirs, executors, administrators, estate trustees and assigns from all further accounting and responsibility in this matter.

21. I hereby acknowledge that I have had the opportunity to seek independent legal advice with respect to my execution of this Payment Instruction, Release, Discharge and Indemnity and confirm that I have either done so or have chosen of my own free will not to do so.

22. I am executing this Payment Instruction, Release, Discharge, and Indemnity under seal and intend to adopt the pre-printed mark contained by my signature as my seal so as to bind myself to the terms of this Payment Instruction, Release, Discharge, and Indemnity.

23. Any part, provision, term or declaration of this Payment Instruction, Release, Discharge and Indemnity which is prohibited, or which is held to be void or unenforceable shall be ineffective to the extent of such prohibition or unenforceability without invalidating the remaining parts, provisions, terms or declarations hereof.

24. I agree that (i) this Payment Instruction, Release, Discharge, and Indemnity may be delivered electronically and that I am immediately and unconditionally bound upon such electronic delivery, and (ii) that a faxed, scanned, or otherwise electronically delivered copy of this executed Deed shall be deemed to be an original.

In Witness Whereof I have hereunto set my hand and seal this _____ day of _____, 20____.

SIGNED in the presence of

Signature of Witness

Signature of Member

Print First and Last Name

Print First and Last Name

Address

For Office Use Only

☐ Application is fully completed.

☐ Member is on the PCD list or approved by BCR.

☐ Two pieces of valid ID verified.

☐ Bank-validated direct deposit form (stamped and signed) or void cheque attached and verified - must include the Member's name.

Signature of band officer

Print First and Last Name