

TAB 36

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SAWRIDGE INDIAN BAND Electors Meeting
held 12:30 p.m., June 24, 1987, Board
Room, Sawridge Administration, Slave
Lake, Alberta.

Electors Present:

Dr. Walter P. Twinn, Chief
Catherine Twinn
Walter Felix Twin
George Twin
Richard Twin
Roland Twinn
Arlene Twinn
Yvonne Twin
Dehlia Neesotasis
Chester Neesotais
Vera McCoy

Chairman: Dr. Walter P. Twinn, Chief
Recording Secretary: Rodney M. Hope

The Chairman called the meeting to order.

The Recording Secretary advised the meeting that all Electors were advised of the time, place and nature of the meeting by telephone and by written notice posted in the Administration office (such notice is attached hereto), and that absent from the meeting on roll call were the following:

Irene Twinn
Ardell Twinn
Paul Twinn
Harry Potskin
Jean Potskin

The Chairman declared the meeting to be properly convened and a quorum present.

The Chairman briefly explained the nature of a proposed amendment to the Membership Rules of the Sawridge Indian Band and a form of the proposed amendment was circulated for consideration.

Catherine Twinn explained the proposed Resolution amendment and the legal counsel advise, discussion ensued.

MOVED by Vera McCoy that the Membership Rules of the Sawridge Indian Band be amended as follows:

See attached Schedule "A".

SCHEDULE "A"

AMENDMENT TO MEMBERSHIP RULES

NOW THEREFORE BE IT RESOLVED THAT the Rules be and they are hereby amended as follows:

- (a) by inserting the following before the period (.) at the end of Section 15:

"and, for greater certainty, no person shall be entitled to have his or her name included in the Band List unless that person has, at some time after July 4, 1985, had a right to have his or her name entered in the Band List pursuant to these Rules."

- (b) by inserting the following provisions as Section 16 and 17:

"16. In the event that any of the foregoing provisions of these Rules is held by a court of competent jurisdiction to be invalid in whole or in part on the ground that it is not within the power of the Band to exclude any particular person or persons from membership in the Band, these Rules shall be construed and shall have effect as if they contained a specific provision conferring upon each such person a right to have his or her name entered in the Band List but, for greater certainty, no other person shall have a right to have his or her name entered or included in the Band List by virtue of the provisions of this Section and, in particular, no person referred to in Subsection 11(2) of the Act shall be entitled to membership in the Band otherwise than pursuant to Section 3 of these Rules.

17. In the event that any provision, or part of any provision, of these Rules is held to be invalid or of no binding force or effect by any court of competent jurisdiction, these Rules shall be construed and applied as if such provision or part thereof did not apply to or in the circumstances giving rise to such invalidity and the effect of the remaining provisions, or parts thereof, of these Rules shall not be affected thereby."

Sawridge Indian Band
Electors Meeting held June 24, 1987
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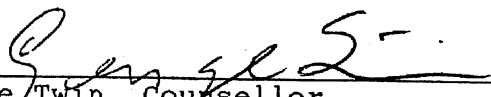
The motion was seconded by Roland Twinn.

The Chairman called for a vote and the motion was passed unanimously.

There being no further business the meeting adjourned.



Dr. Walter P. Twinn, Chief & Chairman



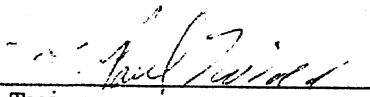
George Twinn, Counsellor

The following Members by their signature hereto acknowledge having received notice of the meeting held June 24, 1987 and ratify the motion heretofore set out.


Missing Members:



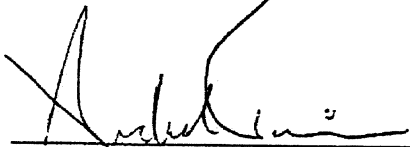
Irene Twinn

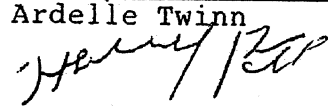


Paul Twinn



Jean Potskin



Ardelle Twinn


Harry Potskin

SANRIDGE INDIAN BAND

RESOLUTION ADOPTING MEMBERSHIP RULES

WHEREAS subsection 10(1) of the Indian Act, R.S.C. 1970, Chapter I-6, as amended, (the "Act") recognizes that a band may assume control of its own membership if it establishes membership rules for itself in writing in accordance with section 10 of the Act;

AND WHEREAS the Sawridge Indian Band (the "Band") wishes to assume control of its own membership pursuant to section 10 of the Act;

AND WHEREAS the electors of the Band wish to consent to the Band's assumption of control of its own membership and the establishment of the membership rules (the "Rules") annexed as Schedule A hereto;

AND WHEREAS the objective of the Band in approving the establishment of the Rules is to protect the culture and social identity of the Band, to maintain and strengthen the existing sense of community, and to ensure continued peace and good order, among the members of the Band;

NOW THEREFORE BE IT RESOLVED that

1. the Band hereby consents to, and approves, the assumption by the Band of control of its own membership; and
2. the Rules be and they are hereby approved, adopted and established.

Andell Twinn
G/L
Heidi L. Twinn
Christa Twinn
Vera
Walter F. Twinn
Frene M. Twinn
Arlene Twinn
Roland
Helen
Judy
Catherine Twinn
Walter L.

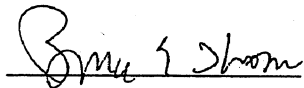
STATUTORY DECLARATION

I, CHIEF WALTER PATRICK TWINN, hereby declare that:

1. On the 8th day of July, A.D. 1985, pursuant to subsection 10(6) of the Indian Act, R.S.C. 1970, Chapter I-6, as amended, the Council of the Sawridge Indian Band (the "Band") gave notice in writing to the Honourable David Crombie, Minister of Indian Affairs and Northern Development, that the Band was on that day assuming control of its own membership and provided the said Minister of Indian Affairs and Northern Development with a copy of the within Membership Rules of the Band.

2. Accordingly, pursuant to subsection 10(8) of the Indian Act, R.S.C. 1970, Chapter I-6, as amended, and section 1 of the within Membership Rules, the said Membership Rules effect, on and from the 8th day of July, A.D. 1985.

Declared before me at the
Town of Slave Lake,
in the Province of Alberta,
this 18 day of July A.D., 1985.




WALTER PATRICK TWINN

SAWRIDGE INDIAN BAND
RESOLUTION ADOPTING MEMBERSHIP RULES

WHEREAS subsection 10(1) of the Indian Act, R.S.C. 1970, Chapter I-6, as amended, (the "Act") recognizes that a band may assume control of its own membership if it establishes membership rules for itself in writing in accordance with section 10 of the Act;

AND WHEREAS the Sawridge Indian Band (the "Band") wishes to assume control of its own membership pursuant to section 10 of the Act;

AND WHEREAS the electors of the Band wish to consent to the Band's assumption of control of its own membership and the establishment of the membership rules (the "Rules") annexed as Schedule A hereto;

AND WHEREAS the objective of the Band in approving the establishment of the Rules is to protect the culture and social identity of the Band, to maintain and strengthen the existing sense of community, and to ensure continued peace and good order, among the members of the Band;

NOW THEREFORE BE IT RESOLVED THAT

1. the Band hereby consents to, and approves, the assumption by the Band of control of its own membership; and
2. the Rules be and they are hereby approved, adopted and established.

I certify that the above resolution was passed at a duly convened meeting of the electors of the Sawridge Indian Band held the 4th day of July, 1985 after appropriate notice of such meeting had been given and that such resolution is of full force and effect unamended as of the date hereof.

Dated the 4th day of July, 1985.


CHIEF WALTER PATRICK TWINN

SCHEDULE A

1. These Rules shall come into force on the day on which the Band gives notice to the Minister pursuant to subsection 10(6) of the Act.

2. On and after the day these Rules come into force the Band List of the Band shall be maintained by the Band under the direction and supervision of the Band Council and only those persons whose names are included therein, or who have rights to have their names entered therein, pursuant to these rules shall be members of the Band.

3. Each of the following persons shall have a right to have his or her name entered in the Band List;

(a) any person who, but for the establishment of these rules, would be entitled pursuant to subsection 11(1) of the Act to have his or her name entered in the Band List required to be maintained in the Department and who, at any time after these rules come into force, either

(i) is lawfully resident on the reserve; or

(ii) has applied for membership in the band and, in the judgment of the Band Council, has a significant commitment to, and knowledge of, the history, customs, traditions, culture and communal life of the Band and a character and lifestyle that would not cause his or her admission to membership in the Band to be detrimental to the future welfare or advancement of the Band;

(b) a natural child of parents both of whose names are entered on the Band List;

(c) with the consent of the Band Council, any person who

(i) has applied for membership in the Band;

(ii) is entitled to be registered in the Indian Register pursuant to the Act;

(iii) is the spouse of a member of the Band, and

- (iv) is not a member of another band;
- (d) with the consent of the Band Council, any person who
 - (i) has applied for membership in the Band,
 - (ii) was born after the date these rules come into force, and
 - (iii) is the natural child of a member of the Band, and
- (e) any member of another band admitted into membership of the Band with the consent of the council of both bands and who thereupon ceases to be a member of the other band.

4. For the purpose of section 3(a)(i) and section 6 the question whether a person is lawfully resident on the reserve shall be determined exclusively by reference to by-laws made by the Band Council pursuant to section 81 of the Act except that, at any time when there are no such applicable by-laws in force, no person shall be considered to be lawfully resident on the reserve for the purpose of section 3(a)(i) and section 6 unless the residence of such person on the reserve has been approved or ratified by a resolution of the Band Council that is expressed to be made for the purpose of these Rules.

5. In considering an application under section 3, the Band Council shall not refuse to enter the name of the applicant in the Band List by reason only of a situation that existed or an action that was taken before these Rules came into force.

6. The Band Council may at any time delete from the Band List the name of any person who has applied to the Band Council to have his or her name deleted from the Band List or the name of any person who is not then lawfully resident on the reserve and who, in the judgment of the Band Council, either does not have a significant commitment to the history, customs, traditions, culture and communal life of the Band or has a character or lifestyle that would cause his or her continued membership in the Band to be seriously detrimental to the future welfare or advancement of the Band; provided that, before a decision to delete the name of any person from the Band List is made under this section, otherwise than pursuant to an application by such person, the Band Council shall give fifteen days notice to such person who shall then be entitled to make representations to the Band Council in writing, in person or through an agent or counsel within such period of fifteen days.

7. Where the name of a person is deleted from the Band List pursuant to section 6, the names of his or her minor children may, in the discretion of the Band Council, also be deleted from the Band List.

8. Notwithstanding section 6 the Band Council shall delete from the Band List the name of any person who has been admitted into membership of another band with the consent of both the Band Council and the admitting band.

9. Except as otherwise expressly provided in these Rules, no application shall be required before the Band Council may enter in the Band List the name of any person who has a right to have his or her name entered in the Band List pursuant to these Rules.

10. Where, pursuant to section 3 of these Rules, an application is required before a person has a right to have his or her name entered in the Band List, such application may be made in such manner and form as the Band Council may determine from time to time and, for greater certainty, the Band Council may permit applications to be made under section 3(d) by a parent or guardian of a natural child referred to therein who is an infant at the time the application is made.

11. The Band Council may consider and deal with applications made pursuant to section 3 of these Rules according to such procedure and at such time or times as it shall determine in its discretion and, without detracting from the generality of the foregoing, the Band Council may conduct such interviews, require such evidence and may deal with any two or more of such applications separately or together as it shall determine in its discretion.

12. Any person whose application for membership in the Band pursuant to section 3 of these Rules has been denied, or whose name has been deleted from the Band List pursuant to section 6, by the Band Council may appeal such decision to the electors of the Band by delivering notice in writing to the Band Council at the office of the Band within 15 days after communication to him or her of the decision of the Band Council.

13. Within 60 days after receipt of a notice of appeal pursuant to section 12 of these Rules the Band Council shall convene a meeting of the electors of the Band for the purpose of disposing of the appeal and the applicant shall be entitled to be present at such meeting and make representations thereto in person or through an agent or counsel.

14. Each discretionary power conferred upon the Band Council under these rules shall be exercised by the Band Council in good faith, without discrimination on the basis of sex and in accordance with its judgment of the best interests and welfare of the Band.

15. No person shall have a right to have his or her name entered in the Band List except as provided in section 3 of these Rules.

TAB 42

SAWRIDGE INDIAN BAND MEMBERSHIP APPLICATION FORM

The answers in this membership questionnaire will be kept confidential and shall be disclosed only to those persons involved in the membership determination process as well as appropriate Band employees and advisors unless otherwise necessary in respect of a membership matter before the courts.

This questionnaire has been created to assist the Band Council in assessing applicants who are seeking or surrendering membership in the Band. The data provided will also assist the Band in the planning, including programs and services, required to accommodate members.

INSTRUCTIONS

1. Please print or type.
2. Please answer all questions, or indicate why no answer is provided.
3. If more space is required to fully answer a question, please attach additional sheets and indicate which question it applies to.
4. Please attach a current colour passport photo of yourself.
5. Please attach supporting documents as indicated.
6. Please attach a copy of your treaty "status" card.
7. This application may be followed by an interview. Additional questions may be asked at the interview.

1. APPLICATION FOR (CHECK ONE)									
APPLICATION FOR MEMBERSHIP IN THE BAND BY NON-MEMBER									
APPLICATION BY MEMBER TO SURRENDER MEMBERSHIP IN THE BAND									
2. IDENTIFICATION									
A. NAME		FIRST		MIDDLE		LAST			
Other Names You Have Used (Maiden/Nicknames/Alias):									
B. ADDRESS									
MAILING ADDRESS (if different):									
C. PHONE NUMBERS				HOME		WORK			
D. Sex	MALE		FEMALE		E. BIRTHDATE	Month	Day	Year	Attach Birth Certificate
F. PLACE OF BIRTH					G. MARITAL STATUS				
H. YOUR SOCIAL INSURANCE NUMBER									
I. YOUR DRIVERS LICENSE NUMBER									
J. WHAT IS YOUR HEIGHT					K. WHAT IS YOUR WEIGHT				
L. IF THIS IS AN APPLICATION FOR MEMBERSHIP PLEASE EXPLAIN THE BASIS OF YOUR APPLICATION									
M. HAVE YOU EVER BEEN A MEMBER OF THE SAWRIDGE BAND?								YES	NO
If yes,	HOW DID YOU BECOME A MEMBER?								
	WHEN DID YOU BECOME A MEMBER?								
	HOW DID YOU CEASE TO BE A MEMBER?								
	WHEN DID YOU CEASE TO BE A MEMBER?								
	HOW MUCH OF THE BAND'S MONEY DID YOU RECEIVE?								
	WHEN DID YOU RECEIVE IT?								
									HOW MUCH IS LEFT?

ARE YOU WILLING TO REPAY PRINCIPLE AMOUNT WITH INTEREST OF MONIES RECEIVED WHEN YOU ENFRANCHISED?									
IF YOU DID NOT RECEIVE ANY MONEY PLEASE EXPLAIN									
N. HAVE YOU EVER BEEN ADOPTED?								YES	NO
IF YES, PLEASE PROVIDE FULL DETAILS.									
3. RESIDENCE AND STATUS									
A. HAVE YOU EVER RESIDED ON THE SAWRIDGE INDIAN RESERVE?								YES	NO
IF YES, PROVIDE DETAILS									
DATES FROM				TO					
WHO WITH									
LOCATION									
B. WHERE HAVE YOU RESIDED SINCE BIRTH?									
DATES FROM	TO	ADDRESS	ON A RESERVE			LANGUAGE(S) SPOKEN	WITH WHOM (parents, siblings, others)		
BIRTH			YES		NO				
			YES		NO				
			YES		NO				
			YES		NO				
C. HAVE YOU EVER BEEN OR ARE YOU NOW A MEMBER OF ANY INDIAN BAND OTHER THAN SAWRIDGE?								YES	NO
IF YES PROVIDE DETAILS OF EACH BAND INCLUDING NAME									
DATE OF BEGINNING AND ENDING MEMBERSHIP									
HOW YOU BECAME A MEMBER?									
WHY YOU CEASED TO BE A MEMBER									
D. ARE YOU A STATUS INDIAN?								YES	NO
E. HAVE YOU ALWAYS BEEN A STATUS INDIAN?								YES	NO
F. INDICATE DURING WHAT PERIOD OR PERIODS YOU WERE A STATUS INDIAN									
G. DATE AND REASON FOR THE CHANGE IN STATUS									
4. SPOUSES									
A. LIST ALL SPOUSES' NAMES ATTACH MARRIAGE CERTIFICATE OR IF COMMON-LAW PROVIDE DETAILS OF COHABITATION		#1		#2		#3			
NAME PRIOR TO MARRIAGE									
B. MARRIED OR COMMON-LAW (PRESENT STATUS)		MARRIED COMMON-LAW		MARRIED COMMON-LAW		MARRIED COMMON-LAW			
C. DATE OF MARRIAGE									
D. PLACE OF MARRIAGE									
E. SPOUSES' STATUS PRIOR		INDIAN NON-STATUS		INDIAN NON-STATUS		INDIAN NON-STATUS			

TO MARRIAGE	BAND MEMBER		BAND MEMBER		BAND MEMBER	
	NAME OF BAND		NAME OF BAND		NAME OF BAND	
F. NUMBER OF CHILDREN						
G. DATE AND PLACE OF DIVORCE/SEPARATION (PLEASE ATTACH DIVORCE JUDEMENTS)						
H. CURRENT STATUS OF SPOUSE	INDIAN		INDIAN		INDIAN	
	NON STATUS		NON STATUS		NON STATUS	
	BAND MEMBER		BAND MEMBER		BAND MEMBER	
	NAME OF BAND		NAME OF BAND		NAME OF BAND	
	DECEASED		DECEASED		DECEASED	
	DATE OF DEATH		DATE OF DEATH		DATE OF DEATH	

5. CHILDREN

LIST NAMES OF ALL YOUR CHILDREN (USE ADDITIONAL SHEETS IF NECESSARY)

A. NAME						
B. SEX	MALE		FEMALE		MALE	
C. BIRTHPLACE						
D. OTHER PARENT'S NAME						
E. BIRTHDATE						
F. YOUR STATUS AT BIRTH OF CHILD	INDIAN		INDIAN		INDIAN	
	NON STATUS		NON STATUS		NON STATUS	
	BAND MEMBER		BAND MEMBER		BAND MEMBER	
	NAME OF BAND		NAME OF BAND		NAME OF BAND	
G. CHILD'S STATUS AT BIRTH	INDIAN		INDIAN		INDIAN	
	NON STATUS		NON STATUS		NON STATUS	
	BAND MEMBER		BAND MEMBER		BAND MEMBER	
	NAME OF BAND		NAME OF BAND		NAME OF BAND	
H. CHILD'S CURRENT STATUS	INDIAN		INDIAN		INDIAN	
	NON STATUS		NON STATUS		NON STATUS	
	BAND MEMBER		BAND MEMBER		BAND MEMBER	
	NAME OF BAND		NAME OF BAND		NAME OF BAND	
	DECEASED		DECEASED		DECEASED	
I. REASON FOR CHANGE IN STATUS						
J. RELATIONSHIP TO CHILD	BIOLOGICAL		BIOLOGICAL		BIOLOGICAL	
	ADOPTED		ADOPTED		ADOPTED	
	NON-ADOPTED		NON-ADOPTED		NON-ADOPTED	
	STEP CHILD		STEP CHILD		STEP CHILD	
K. HAVE EACH OF YOUR CHILDREN RESIDED WITH YOU SINCE BIRTH, AND HAVE YOU PROVIDED FOR THE CHILD SINCE BIRTH?					YES	NO
IF NO, PLEASE PROVIDE DETAILS:						
L. HAVE ANY OF YOUR CHILDREN EVER BEEN APPHREHENDED OR PLACED IN CARE?					YES	NO
IF YES, PROVIDE DETAILS						
M. HAVE ANY OF YOUR CHILDREN EVER BEEN THE SUBJECT OF A GUARDIANSHIP ORDER?					YES	NO
IF YES, PROVIDE DETAILS:						

N. HAVE ANY OF YOUR CHILDREN EVERY BEEN ADOPTED OR PUT UP FOR ADOPTION?					<input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES,	NAME OF CHILD(REN)					
	BIRTHDATE(S)					
	REASONS FOR ADOPTION					
	DATE OF ADOPTION(S)					
ADOPTING PARENT A RELATIVE					<input type="checkbox"/> YES <input type="checkbox"/> NO	
O. NAME OF ADOPTING PARENT(S) (IF KNOWN)						
6. GENEALOGY						
FOR EACH OF YOUR PARENTS AND GRANDPARENTS, PLEASE PROVIDE THE INFORMATION SET OUT BELOW OR, IF YOU HAVE A GENIOLOGY WHICH CONTAINS THIS INFORMATION, PLEASE PROVIDE A COPY:						
• FULL NAME						
• ANY ALIASES (INCLUDING MAIDEN NAME)						
• RELATIONSHIP INCLUDING WHETHER BIOLOGICAL, ADOPTED OR STEP						
• BIRTHDATE (COPY OF BIRTH CERTIFICATE)						
• STATUS AT BIRTH (NON STATUS, INDIAN, BAND MEMBER (NAME OF BAND) OTHER)						
• HOW STATUS ATTAINED (NON-STATUS, INDIAN, BAND MEMBER, ETC).						
• MARITAL STATUS AT TIME OF YOUR BIRTH						
• CURRENT STATUS (NON-STATUS, INDIAN, BAND MEMBER, ETC.)						
• IF STATUS CHANGED, EXPLAIN						
• LANGUAGE SPOKEN						
• LEVEL OF EDUCATION ACHIEVED						
• CONNECTION OR POSITION HELD IN THE BAND OR COMMUNITY.						
• IF DECEASED, DATE OF DEATH						
7. SIBLINGS (USE ADDITIONAL SHEETS FOR ADDITIONAL BROTHERS AND SISTERS)						
A. HOW MANY BROTHERS DO YOU HAVE?						
B. NAME OF EACH BROTHER		#1	#2	#3		
C. BIRTHDATE						
D. BIRTHPLACE						
E. FULL, HALF BROTHER, OR STEP	FULL		FULL		FULL	
	HALF		HALF		HALF	
	STEP		STEP		STEP	
F. IF HALF OR STEP, WHICH PARENT IS COMMON	FATHER		FATHER		FATHER	
	MOTHER		MOTHER		MOTHER	
G. HOW MANY SISTERS DO YOU HAVE?						
H. NAME OF EACH SISTER		#1	#2	#3		
I. BIRTHDATE						
J. BIRTHPLACE						
K. FULL, HALF SISTER, OR STEP	FULL		FULL		FULL	
	HALF		HALF		HALF	
	STEP		STEP		STEP	
L. IF HALF OR STEP, WHICH PARENT IS COMMON	FATHER		FATHER		FATHER	
	MOTHER		MOTHER		MOTHER	

8. FINANCIAL

A. WHAT RESOURCES ARE AVAILABLE TO YOU?

B. WHAT ARE YOUR MEANS AND RESOURCES?

C. ARE YOU LIVING WITHIN YOUR MEANS?

D. ARE YOU SELF-SUFFICIENT? (IF NO, PLEASE EXPLAIN)

E. DO YOU HAVE ANY DEPENDANTS? IF SO, HOW MANY?

F. DO YOU OR ANY DEPENDANTS HAVE SPECIAL NEEDS? IF SO, PLEASE EXPLAIN.

9. CRIMINAL AND DRIVERS RECORD

A. LIST THE OFFENCE(S), OFFENCE DATE(S), CONVICTION DATE(S), AND SENTENCE(S).

USE ADDITIONAL SHEET IF NECESSARY

B. HAS YOUR DRIVER'S LICENSE EVEN BEEN SUSPENDED?

YES ☐ NO ☐

IF YES, PLEASE PROVIDE DETAILS INCLUDING DURATION, REASON(S), AND DETAIL(S) OF REINSTATEMENT

USE ADDITIONAL SHEET IF NECESSARY

10. EMPLOYMENT HISTORY

STARTING WITH YOUR MOST RECENT JOB, LIST EVERY JOB (FULL TIME/YEAR ROUND) WHICH YOU HAVE HAD. (USE ADDITIONAL SHEET IF NECESSARY). HAVE YOU BEEN REGULARLY EMPLOYED?

A. LIST YOUR SIGNIFICANT EMPLOYMENT RELATIONSHIPS, DATES AND REASON FOR LEAVING

B. LIST ANY EXPERTISE AND INTEREST AND ANY EXPERIENCE AND TRAINING IN THESE AREAS

C. WHAT AGE DID YOU ENTER THE WORKPLACE?

11. BACKGROUND & PERSONAL INTERESTS (CAN BE DONE IN WRITING ON SEPARATE SHEET OR ORALLY THROUGH RECORDING DEVICE)

A. WHAT DO YOU KNOW ABOUT THE HISTORY OF THE SAWRIDGE INDIAN BAND (PRE-TREATY AND POST-TREATY)? WHAT ARE THE SOURCES OF YOUR KNOWLEDGE?

B. WHAT ARE YOUR UNDERSTANDINGS OF THE TREATY AND TREATY LAW?

C. WHAT DO YOU KNOW ABOUT THE CUSTOMS, THE LAWS, THE CULTURE, TRADITIONS AND PRACTICES VALUES AND PRINCIPLES OF THE SAWRIDGE INDIAN BAND

D. WHO DO YOU HAVE A MEANINGFUL RELATIONSHIP WITH SOMEONE WHO IS A MEMBER OF THE SAWRIDGE INDIAN BAND? (PROVIDE NAMES, HOW LONG YOU HAVE KNOWN, AND DESCRIBE YOUR ACTIVITIES AND RELATIONSHIPS WITH EACH PERSON AS WELL AS THE HISTORY OF THAT RELATIONSHIP. ALSO INDICATE IF THAT PERSON IS A RELATIVE AND WHAT RELATION THEY ARE TO YOU).

E. DO ANY CURRENT BAND MEMBERS SUPPORT YOUR BID FOR MEMBERSHIP? (FOR APPLICATIONS FOR MEMBERSHIP ONLY). IF YES, PLEASE PROVIDE THE NAME OR NAMES OF SUPPORTERS AND A LETTER SETTING OUT THEIR SUPPORT.

YES ☐ NO ☐

F. HOW WOULD YOU DESCRIBE YOUR LIFESTYLE?	
G. WHAT IS YOUR CURRENT INVOLVEMENT WITH THE BAND?	
H. WHAT ARE YOUR HOBBIES?	
I. WHAT ARE YOUR OTHER RECREATIONAL ACTIVITIES?	
J. WHAT DO YOU HOLD AS MOST IMPORTANT AND VALUABLE? WHY?	
K. DESCRIBE YOUR ATTITUDE TOWARDS THE BAND, ITS MEMBERS AND THE COUNCIL.	
L. WHAT DO YOU SEE AS YOUR ROLE AND RESPONSIBILITY AS A BAND MEMBER?	
12. FUTURE PLANS (CAN BE DONE IN WRITING ON SEPARATE SHEETS OR ORALLY THROUGH A RECORDING DEVICE).	
A. WHY DO YOU WISH TO BECOME A MEMBER OF THE SAWRIDGE INDIAN BAND?	
B. WHAT ARE YOUR PLANS FOR THE FUTURE? (INCLUDING PLANS FOR RESIDENCY, EMPLOYMENT, OCCUPATION, EDUCATION, RETIREMENT, TRAVEL, MARRIAGE, FAMILY, RECREATION, ETC.).	
13. EDUCATION	
A. PROVIDE A DETAILED HISTORY OF YOUR EDUCATION BOTH FORMAL AND TRADITIONAL	
B. ARE YOU WILLING UPON REQUEST TO PROVIDE A TRANSCRIPT OF ALL OF YOUR SECONDARY AND POST-SECONDARY EDUCATION, IF ANY.	
C. HONOURS, AWARDS, DISTINCTIONS, SCHOLARSHIPS, MERITS	
D. IF YOUR LEARNING WAS INTERRUPTED OR YOU WERE UNABLE TO COMPLETE	EXPLAIN
E. PLEASE PROVIDE A DETAILED HISTORY OF ALL OF YOUR EXTRA CURRICULAR ACTIVITIES	
F. WHAT ARE YOUR PLANS FOR FUTURE EDUCATION, IF ANY?	
14. HEALTH AND WELLNESS (PLEASE NOTE THAT YOUR HEALTH IS IMPORTANT TO THE BAND, BUT IT IS NOT A SINGLY DETERMINATIVE FACTOR IN MAKING A DECISION ON MEMBERSHIP). THESE QUESTIONS CAN HELP DETERMINE WHETHER THE BAND NEEDS TO APPLY FOR FUTURE GRANTS, FUNDING, ETC.	
A. WHAT IS THE CONDITION OF YOUR HEALTH?	
B. DO YOU HAVE ANY PROBLEMS?	LIST
C. DO YOU HAVE ANY PHYSICAL OR MENTAL DISABILITIES (INCLUDING EMOTIONAL)?	
	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
IF YES, EXPLAIN	
D. HAVE YOU EVER HAD ANY ALCOHOL OR DRUG RELATED ADDICTIONS OR ILLNESS?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
IF YES	PLEASE EXPLAIN
E. HAVE YOU EVER SUFFERED FROM MENTAL ILLNESS?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
IF YES (PLEASE EXPLAIN)	

F. HOW DO YOU DEFINE YOUR PERSONAL WELLNESS AND HOW CAN YOU CONTRIBUTE TO THE WELLNESS OF THE SAWRIDGE INDIAN BAND?	
G. WHAT IS YOUR PRESENT CODE OF CONDUCT?	
15. CONTRIBUTIONS	
PLEASE WRITE A BRIEF STATEMENT OR ORALLY RECORD YOUR ANSWER ON A RECORDING DEVICE ABOUT:	
A. YOUR ROLE, PLACE AND RESPONSIBILITIES IN THE LIFE AND HEALTH OF THE COMMUNITY.	
B. WHERE YOU CAN BEST CONTRIBUTE, INCLUDING CONTRIBUTIONS TO THE BAND.	
C. THE SPIRITUAL VALUES AND PRINCIPLES THAT YOU LIVE BY AND ASPIRE TO IN ALL YOUR RELATIONSHIPS.	
D. WHAT SUPPORT YOU HOPE FOR FROM THE BAND.	
E. DESCRIBE THE RELATIONSHIP AND SUPPORT SYSTEM YOU HAVE WITH OUR FAMILY MEMBERS.	
16. REFERENCES (FOR THOSE SEEKING MEMBERSHIP ONLY)	
PLEASE PROVIDE FOUR LETTERS OF REFERENCE.	
17. PROBATIONARY PERIOD (FOR THOSE SEEKING MEMBERSHIP ONLY)	
A. ARE YOU PREPARED TO COME TO THE COMMUNITY TO PARTICIPATE AND/OR ASSIST THE BAND?	YES <input type="checkbox"/> NO <input type="checkbox"/>
B. WHAT DO YOU FEEL DURING THE PERIOD THIS APPLICATION IS BEING ASSESSED YOU COULD DO TO CONTRIBUTE TO THE BAND AND TO SHOW YOUR COMMITMENT?	
C. ARE YOU WILLING TO PARTICIPATE IN A COMMUNITY WELLNESS BUILDING PROCESS AS A CONDITION TO THIS APPLICATION AND/OR THE GRANTING OF MEMBERSHIP?	YES <input type="checkbox"/> NO <input type="checkbox"/>
D. WHAT IS YOUR UNDERSTANDING OF THE RIGHT, OBLIGATIONS AND RESPONSIBILITIES OF MEMBERSHIP?	
18. FAMILY	
A. HOW OFTEN DO YOU VISIT OR TALK TO FAMILY MEMBERS AND WHAT ACTIVITIES DO YOU SHARE WITH THEM?	
19. GENERAL	
A. HOW DO YOU IDENTIFY YOURSELF?	
B. DID YOU HAVE ANY ASSISTANCE IN COMPLETING THIS APPLICATION?	YES <input type="checkbox"/> NO <input type="checkbox"/>
IF YES, WHO ASSISTED YOU?	
20. DO YOU HAVE ANY QUESTIONS, CONCERNS, OR COMMENTS?	

CERTIFICATION

I certify that all of the information provided in this application is complete and true. I understand that if any of the information provided is found to be false or misleading then this shall be sufficient grounds for the denial of my application, or if the application has been approved then it shall be sufficient grounds for the reversal of my application at the option of the Band at any time in the future. Such denial or reversal shall be final; there shall be no right of appeal and no right to reapply after any such denial or reversal. I hereby authorize Sawridge Indian Band to obtain any and all factual information regarding me from other persons, organizations, institutions, or government agencies. I hereby authorize any person, organization, institution, or government agency who has any information regarding me to release that information regarding me in confidence to the Sawridge Indian Band.

Dated at _____, _____, this _____ day of _____, 20__.

Applicant Name

Applicant Signature

I was present and did see _____, the applicant herein sign above.
(PLEASE PRINT)

Witness

Witness

(Print Name)

(Print Name)

TAB 43

TAB 44

TAB 45

TAB 46

TAB 47



31 January 2013

Dear Sawridge Trust Beneficiary,

Welcome to the Sawridge Trusts. As a member of the Sawridge First Nation you are automatically also a beneficiary of the Sawridge Trusts. As a beneficiary of those Trusts, there are certain benefits that have been created for you by the Trustees. Enclosed, you will find a package of pamphlets that outline these benefits. As benefits change or new benefits are added, you will receive updated pamphlets which you can add to your package.

This package also contains information on the Great West Life health insurance package that is part of your benefits as a beneficiary. The health insurance works in coordination with the Non-Insured Health Benefits provided to all Status Indians by the Federal Government. If you have any questions about this or any other benefit, please do not hesitate to call the Sawridge Trusts office.

Cordially,

Paul Bujold, Trusts Administrator

214, 10310-124 Street NW
Edmonton, AB T5N 1R2
Office: 780-988-7723
Fax: 780-988-7724
Toll Free: 888-988-7723
Email: general@sawridgetrusts.ca
Web: www.sawridgetrusts.ca

The Sawridge Trusts Tipi

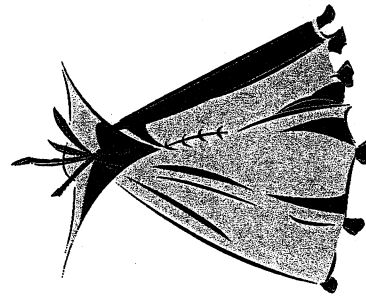
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ADDICTIONS TREATMENT SUPPORT BENEFIT FUND



801, 4445 Calgary Trail NW
Edmonton, AB T6H 5R7

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Toll Free: 1-888-988-7723
Facsimile: 780-988-7724
E-mail: benefits@sawridgetrusts.ca

ADDICTIONS TREATMENT SUPPORT BENEFIT FUND

America and only then with the approval of the Trustees.

Available Funding

Because funding is limited each year, funding will be made available on a **first-come-first-serve basis**. Decisions will be governed by the total funding provided by other funding agencies and by the commitment of the individual to a treatment regime.

Who is Eligible

For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts as well as their dependants.

For the purposes of this benefit, an eligible dependant will include any natural child or any child adopted through legal or customary adoption by an eligible beneficiary or a spouse of an eligible beneficiary who is under 25 years of age and who is registered in a full-time or part-time education program with an accredited educational institution.

How to Access the Benefit

Funding for addictions treatment services will only be provided in cases where the beneficiary or dependant has first developed a treatment plan with the Trusts' Administrator and other professionals and has made a commitment to follow through with the full treatment program.

While the Trusts recognize that relapses, in the case of addictions, are possible and even likely, the Trusts will not allow abuses of the Addictions Treatment Fund by beneficiaries who repeatedly relapse and have to attend a new treatment pro-

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. Where another similar benefit exists, it must be accessed first.

This will be a supplementary benefit, that is, beneficiaries must first take advantage of other benefits available through government, First Nation programs, and health insurance programs.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

Addictions Treatment Support Benefit

The Sawridge Trusts have established a limited annual fund to cover the costs of beneficiaries and their dependants attending authorized alcohol and drug treatment programs.

Eligible treatment programs will include accredited programs provided by reputable professionals with a proven record of success in treating addictions.

Priority will be given first to certified treatment programs first in the Province of residence of the beneficiary; second to certified treatment programs within Canada; third to certified treatment programs with North America.

Only in special circumstances will consideration be given to treatment programs outside of North

gram. After the second use of the Fund, every beneficiary application for renewed treatment will require the approval of the Board of Trustees.

The Trusts' Administrator is authorized to approve treatment plans and payment for treatment services for the first two applications without having to obtain the approval of the Trustees provided that there remains sufficient funds in the current year's budget for the Addictions Treatment Fund.



More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.

The Sawridge Trusts Tipi

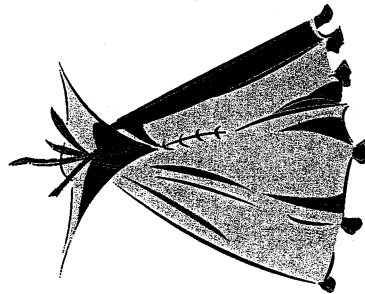
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47-Child and Youth Benefit Pamphlet.pdf
17/06/2013

CHILD AND YOUTH BENEFIT



214, 10310-124 Street NW NW
Edmonton, AB T5N 1R2

Office: 780-988-7723
Toll Free: 1-888-988-7723
Facsimile: 780-988-7724
E-mail: benefits@sawridgetrusts.ca

Child and Youth Benefit

Who is Eligible

For the purposes of this benefit, a beneficiary is defined as anyone who meets the requirements and has been accepted by the Trustees as an eligible beneficiary to either the Sawridge Band Intervivos Settlement or the Sawridge Trust.

An eligible child will include any child either born to an eligible beneficiary, adopted through legal or customary adoption by an eligible beneficiary or for which an eligible beneficiary is the legal guardian.

How to Access the Benefit

In order to access this benefit, beneficiaries will have to fill out an application form provided by the Sawridge Trusts. Beneficiaries can obtain the application form by requesting it by email or mail from the trusts' Administrator. Once the completed form is submitted to the Trusts' Office, determination will be made as to the eligibility of the child for whom benefits are being requested and payment arrangements will be made if the child is eligible.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Adminis-

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. They are meant to support other benefits provided by Sawridge First Nation, the Federal Government, the Provincial Government and the community. Where another similar benefit exists, it must be accessed first.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

The Benefit

The Child and Youth Benefit provides an annual amount of up to \$10,000 to assist with the costs associated with caring or educating the special needs child on a reimbursement basis or pre-paid services basis.

The Benefit also provides annual amount of up to \$8,500 to assist with child care costs for a child without any special need on a reimbursement basis or pre-paid services basis.

trator at the telephone numbers and address provided on the back of this pamphlet.



The Sawridge Trusts Tipi

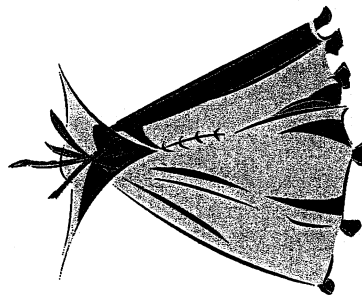
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COMPASSIONATE CARE AND DEATH BENEFIT



801, 4445 Calgary Trail NW
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Compassionate Care and Death Benefit

other suitably priced hotel accommodations. Costs will be covered only as long as the ill family member is confined to a hospital in a distant location.

Death Benefit

In the event of the death of a family member—as defined under **Who is Eligible** section below—the Trusts will assist in covering funeral costs including the cost of the wake, the cost of the funeral, the cost of burial and a headstone and the cost of a reception after the funeral up to a maximum of \$12,000 per incident.

If the person was eligible for the Canada Pension Plan Death Benefit of up to \$2,500, this amount shall be used first. If other sources of funding are available, these will be used first.

Who is Eligible

For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts.

A family member of an eligible beneficiary includes:

- a child of the beneficiary or of her/his current, co-habiting spouse or common-law partner, the current, co-habiting spouse or common-law partner of the beneficiary;
- the father or mother or his/her partner of either the beneficiary or her/his current co-habiting spouse or common-law partner;
- brothers, sisters, stepbrothers or step sisters of either the beneficiary or her/his current, co-habiting spouse or common-law partner;
- grandparents or step grandparents of either

- the beneficiary or her/his current co-habiting spouse or common-law partner;
- grandchildren or step-grandchildren of either the beneficiary or her/his current, co-habiting spouse or common-law partner; or
- son-in-law or daughter-in-law of either the beneficiary or her/his current, co-habiting spouse or common-law partner.

How to Access the Benefit

In either case, illness or death, first call the Trusts' Administrator at the numbers on the back of this pamphlet to inform him of the incident and he will inform you of the requirements. If he cannot be reached, leave a message and your call will be returned as soon as possible.

1. Keep all receipts for expenses—meals purchased, gasoline and oil purchased, parking costs and hotel costs at the time of the incident.
2. Submit these receipts by mail or in-person to the Trusts' Administrator at the address on the back of this pamphlet along with information about the incident on a separate piece of paper including:

- Name of Eligible Beneficiary
- Date(s)
- Persons involved
- List of Expenses Claimed

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. They are meant to support other benefits provided by Sawridge First Nation, the Federal Government, the Provincial Government and the community. Where another similar benefit exists, it must be accessed first.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

Compassionate Care Benefit

This benefit provides for travel, meals and accommodation costs for the beneficiary and her/his immediate family in the event of a **serious or life-threatening illness** resulting in hospital confinement or two weeks or more of intense home care of a family member—as defined under **Who is Eligible** section below—for an eligible beneficiary. The maximum amount covered is up to \$6,000 per incident and up to a lifetime maximum of \$60,000.

Travel costs are covered from the home of the eligible beneficiary to the place where the family member is being treated. If hotel accommodation is required for the beneficiary and his family at this location, this cost is also covered. If a Sawridge Inn exists at this location, arrangements will be made for the beneficiary to stay at the Sawridge Inn and costs will be billed directly to the Trusts. If there is no Sawridge Inn at the location, accommodation will be arranged in

The Sawridge Trusts Tipi

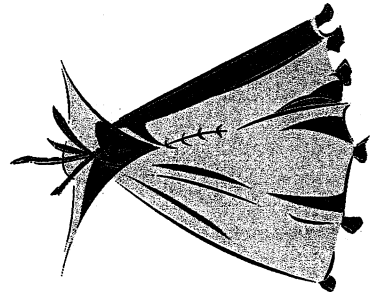
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47-Counselling Benefit Pamphlet.pdf
20 March 2014

COUNSELLING BENEFIT



214, 10310-124 Street NW
Edmonton, AB T5N 1R2

Office: 780-988-7723

Toll Free: 1-888-988-7723

Facsimile: 780-988-7724

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COUNSELLING BENEFIT

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. Where another similar benefit exists, it must be accessed first.

This is also a supplementary benefit, that is, beneficiaries must first take advantage of other benefits available through government, First Nation programs, and health insurance programs.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

Counselling Benefit

The Sawridge Trusts have established a limited annual fund to cover the costs of beneficiaries and their dependants receiving counselling from accredited professionals.

Eligible counselling programs will include services provided by accredited counselling professionals including psychiatrists, psychologists, social workers, marriage and family therapists, art therapists, and psychiatric nurses.

Counselling benefits will also include

career counselling by professional career counsellors.

Available Funding

Because funding is limited each year, funding will be made available on a **first-come-first-serve basis up to a maximum annual expense of \$7000**. Decisions will be governed by the total funding provided by other funding agencies and by the commitment of the individual to a treatment regime.

Who is Eligible

For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts as well as their dependants.

For the purposes of this benefit, an eligible dependant will include any natural child or any child adopted through legal or customary adoption by an eligible beneficiary or a spouse of an eligible beneficiary who is under 25 years of age and who is registered in a full-time or part-time education program with an accredited educational institution.

How to Access the Benefit

Funding for counselling benefits will

only be provided in cases where the beneficiary or dependent has first developed a treatment plan with the Trusts' Administrator and other professionals and has made a commitment follow through with the full treatment program.



Source: Nancy G. Photography

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts website at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.

The Sawridge Trusts Tipi

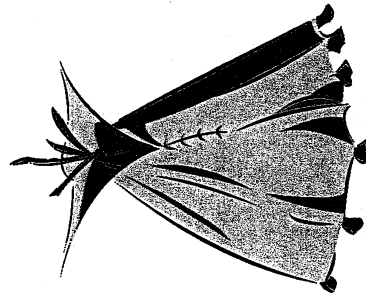
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EDUCATION SUPPORT BENEFIT FUND



801, 4445 Calgary Trail NW
Edmonton, AB T6H 5R7

Office: 780-988-7723

Toll Free: 1-888-988-7723

Facsimile: 780-988-7724

E-mail: benefits@sawridgetrusts.ca

Education Support Benefit Fund

clude:

- Tuition and Fee Support: including a portion of tuition fees and other required fees to attend an educational program.
- Support for Books and Equipment: including a portion of the cost of text books and laboratory and other equipment necessary for the study program, including computers and including a portion of any deposits required to cover the cost of damaged or lost equipment.
- Living Expense Support: including a portion of rent or mortgage payments, utilities, telephone, tenant/home insurance, food, transportation, basic furniture and personal expenses.

This benefit does not include any portion of the purchase of a vehicle, payment of credit card or other outstanding debts.

Available Funding

Because funding is limited each year, funding will be made available on a **first-come-first-serve basis**. Decisions will also be governed by the total funding provided by other funding agencies and by the individual him or herself. If the individual receives maximum funding available through federal government grants or other scholarship programs or if the individual is able to personally fund her/his education through parental contributions or self-employment, this person will not be placed as high in priority as someone who has no financial support programs available to them.

Funding will also be accorded in priority to those with high academic performance records.

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. Where another similar benefit exists, it must be accessed first.

This will be a supplementary benefit, that is, that beneficiaries must first take advantage of other benefits available through government, First Nation programs, student loans and lines-of-credit and scholarship or student bursary programs and through full or part-time employment.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

Education Support Benefit

The Sawridge Trusts have established a limited annual fund to cover the costs of beneficiaries and their dependants attending authorised post-secondary education programs.

For the purposes of this benefit, eligible education programs include:

- Recognised upgrading programs to improve opportunities for higher education.
- Recognised technical and skills development training programs
- Recognised university programs up to and including doctoral level study but not including post-doctoral studies.

Costs that may be covered by this benefit in-

Who is Eligible

For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts as well as their dependants.

For the purposes of this benefit, an eligible dependant will include any natural child or any child adopted through legal or customary adoption by an eligible beneficiary or a spouse of an eligible beneficiary who is under 25 years of age and who is registered in a full-time or part-time education program with an accredited educational institution.

How to Access the Benefit

Those wishing to receive funding for their education from the Trusts will first have to fill out and submit an application for funding available through the Trusts' Office. Applications will be reviewed by the Trusts' Administrator and a decision will be made based on available funding and past academic performance.

Successful applicants will be required to provide on-going proof of enrolment, attendance and academic performance in order to be considered for on-going financial support from the Trusts.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.

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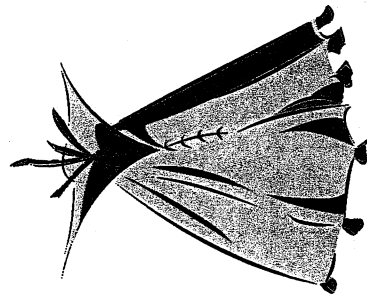
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INCOME REPLACEMENT BENEFIT



214, 10310-124 Street NW NW
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Toll Free: 1-888-988-7723
Facsimile: 780-988-7724
E-mail: benefits@sawridgetrusts.ca

Income Replacement Benefit

trator at the telephone numbers and address provided on the back of this pamphlet.

received in the month immediately preceding the illness requiring time-off up to a maximum of \$2,500.00 per month. The benefit is only provided for two (2) months and up to an annual maximum of \$5,000.00 per person.

Supplementary Benefit

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Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

The Benefit

The Income Replacement Benefit is meant to replace income for beneficiaries who have to take time-off from work in order to recover and obtain treatment for physical or mental health conditions, including addictions.

The benefit only covers those persons who are regularly employed but who are not covered for sick leave by their employer or by Employment Insurance Sick Benefits and who have no other source of income during times of illness.

47-Income Replacement Benefit Pamphlet.pdf

The benefit will provide up to 80% of the salary

Who is Eligible

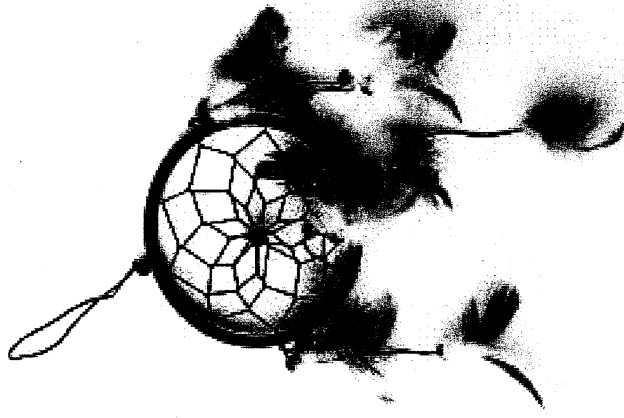
For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts who has attained the age of 18 years and who is employable.

How to Access the Benefit

The beneficiary will first have to submit a physician's note to the Trusts' Administrator indicating when the time-off period begins and ends and the reason for the sick leave being requested. In addition, the beneficiary will have to provide copies of pay slips for the past month indicating the level of income immediately preceding the period of sick leave.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Adminis-



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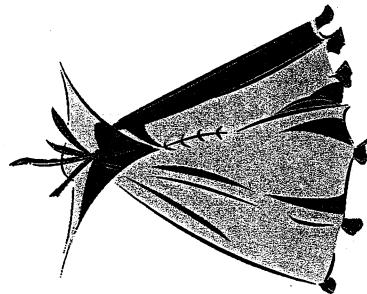
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47-Loans Policy Pamphlet.pdf
10 March 2011

LOANS POLICY

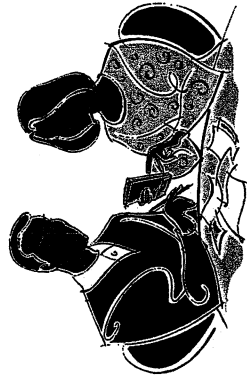


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Loans Policy

financial topics including: debt management, savings and investments, financial planning and career planning.



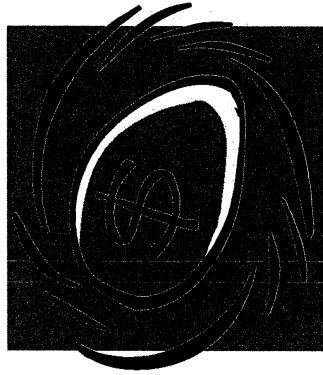
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persons-in- need obtain assistance in consolidating debts, avoiding problems with creditors or obtaining loans.

These financial advisors also provide financial counselling and advice so that the individuals can better plan and manage their financial affairs.

The cost of obtaining this assistance from financial advisors can be covered by the Personal Development Benefit.



Referral to Emergency Funding Sources

The Trusts Office can also assist by referring persons-in-need to sources of emergency funding such as Alberta Employment and Immigration-Income Assistance, the Lesser Slave Lake Regional Indian Council Social Assistance Program, food banks and other charitable organizations.

Community and Individual Education

The Sawridge Trusts are committed to community and individual education on financial management and financial self-sufficiency. Where there is interest, community workshops can be planned for interested parties on any number of

Equitable Benefits

The Sawridge Trusts are meant to provide equitable benefits to the eligible beneficiaries of the Trusts and their dependents.

Issuing loans through the Trusts or through companies owned by the Trusts to beneficiaries and their dependents cannot be done in an equitable manner. Neither the Trusts nor their Companies are set up to issue loans, track payments and interest owed and paid, or to collect on loans in default through the necessary legal means without putting the assets of the Trusts and their Companies in jeopardy. This can also affect benefits for present and future generations of beneficiaries and their dependants.

No Loans Policy

Since the Trustees are legally charged with protecting the capital and assets of the Trusts, the Trustees have decided that neither the Trusts nor any of the Companies owned by the Trusts will provide loans to beneficiaries of the Trusts or their dependants or to any related organization including governing bodies or businesses involving the beneficiaries or their dependants under any circumstances.

Referral to Financial Advisors

Beneficiaries in need of financial assistance because of short-falls in income or because of high debt loads can be referred by the Trusts to financial advisors. These financial advisors can assist

The Sawridge Trusts Tipi

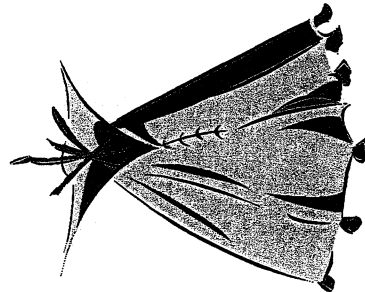
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214, 10310-124 Street NW
Edmonton, AB T5N 1R2

Office: 780-988-7723
Toll Free: 1-888-988-7723
Facsimile: 780-988-7724
E-mail: benefits@sawridgetrusts.ca

PERSONAL DEVELOPMENT
AND ALTERNATIVE
HEALTH BENEFIT



Personal Development and Alternative Health Benefit

tional healer or elder,

- treatment services from a recognized mental health or addictions treatment centre,
- recognized fitness or nutrition counselling programs,
- recognized self-esteem building programs,
- vitamins, minerals, medicinal herbs, special food supplements,
- visits to alternative health practitioners such as naturopaths, osteopaths, homeopaths, chiropractors, massage therapists, reiki therapists, acupuncturists, kinesiologists, shiatsu therapists, herbalists, traditional indigenous healers, sweat lodges, and the like.
- in the case of visits to traditional healers, the beneficiary will provide an itemized list of the expenses incurred for the visit.

Who is Eligible

For the purposes of this benefit, an eligible person includes anyone who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts as well as their dependants.

How to Access the Benefit

The annual allowance will not be paid directly to the eligible beneficiary. The beneficiary will first have to submit receipts for eligible expenses listed under **The Benefit** above for reimbursement.

To claim the benefit, the beneficiary should:

1. Get a receipt for every expense they intend to claim from the person, store or company providing a service.

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. They are meant to support other benefits provided by Sawridge First Nation, the Federal Government, the Provincial Government and the community. Where another similar benefit exists, it must be accessed first.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

If services requested under the Personal Development and Alternative Health Benefit duplicate other benefits provided by the Sawridge Trusts through other programs, reimbursement for these services will not be provided under the Personal Development and Alternative Health Benefit until these other benefits have been expended first.

The Benefit

In order to promote the health and well-being of the beneficiaries and their dependants, the Sawridge Trusts will provide an annual allowance of up to \$2,000 per person. Benefits will be paid upon submission of receipts for expenditures or by payment of invoices from the supplier up to the maximum amount under the benefit.

Eligible expenditures include:

- personal or family counselling provided by a

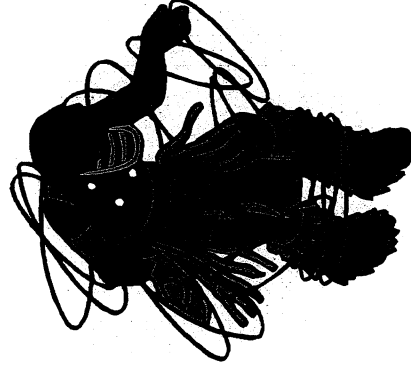
2. Submit these receipts by mail or in-person to the Trusts' Administrator at the address on the back of this pamphlet along with a separate piece of paper including:

- Name of Eligible Beneficiary
- A Description of the Service Claimed
- List of Expenses Claimed and Dates Services Were Provided

Arrangements can also be made for the Trusts to pay the service provider directly provided that eligibility of the service and of the beneficiary has been determined ahead of time and provided that the service provider is willing to bill the Trusts directly.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge



Trusts website at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.

The Sawridge Trusts Tipi

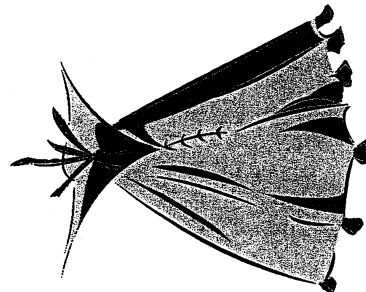
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SAWRIDGE INNS AND CONFERENCE CENTRES

Sawridge Inn and Conference Centre, Slave Lake

Sawridge Inn and Conference Centre, Fort
McMurray

Sawridge Inn and Conference Centre, Jasper

Sawridge Inn, Edmonton South

Sawridge Inn and Conference Centre, Peace River

Reservations

1-888-729-7343

SPECIAL RATES AT SAWRIDGE INNS FOR BENEFICIARIES



801, 4445 Calgary Trail NW
Edmonton, AB T6H 5R7

Office: 780-988-7723

Toll Free: 1-888-988-7723

Facsimile: 780-988-7724

E-mail: benefits@sawridgetrusts.ca

Special Rates at Sawridge Inns for Beneficiaries

dren.

Definition of the Service

Provided that rooms are available and that occupancy rates are below 85%, the Sawridge Inns will provide a discounted room rate of \$69 per night plus applicable taxes up to a maximum of two rooms per beneficiary.

In addition to the room, the room guests will be provided discounted meal price rates of 50% **ONLY WHILE THEY ARE REGISTERED AT THE INN.** This discounted rate does not apply to alcohol, tobacco products, gratuities and taxes. Discounts are available only from Sawridge owned and operated services and not from private contractors providing service at Sawridge facilities. The beneficiary must present the discount coupon provided at registration in order to access the meal discounted rate.

How to Access the Benefit

Sawridge Trusts beneficiaries can access this discounted room and meal rate by contacting the Trusts Administrator at the Sawridge Trusts office at 1-888-988-7723 or by contacting the Chief or administrator at the Sawridge First Nation office in Slave Lake at 1-780-849-4331.

The room must be reserved up to 60 days from the date of the planned trip. Once you are informed that the room is available, you will have to call the Sawridge Inn in question to actually reserve the room and hold the reservation with a valid credit card number.

If the room is being obtained through the Compassionate Care and Death Benefit, the Trusts may guarantee the room by having the bill sent directly to the trust office rather than having the beneficiary pay at the end of the stay. In this case, a credit card may not be required.

Privilege Not A Benefit

As opposed to other benefits provided by the Trusts, the special rates provided to Sawridge trusts beneficiaries by the Sawridge Inns and Conference Centres is not funded directly by the Trusts. These special rates are a privilege provided to the beneficiaries by the Sawridge Inns, which are wholly owned by the Trusts, through a special arrangement between the Trustees and the Directors of the Sawridge Group of Companies.

Limitation

Special rates can only be provided when there is a surplus of rooms available at one of the Sawridge Inns. The Inns are in business to make profit that will help to fund benefits for all beneficiaries. The special room rates can only be provided if they do not affect the profitability of the Inn. If there is a shortage of rooms and if a paying customer will pay full rate for a room rather than the discounted rate being paid by the beneficiary, the special rate will not be available for a beneficiary for that particular time period.

Who is Eligible

For the purposes of this privilege, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts. The privilege can only be accessed by the beneficiary, but can be used for immediate family members including spouses and dependent chil-

Credit Card Requirement

In order to hold a room reservation at any hotel, the person making the booking must guarantee the room using a valid credit card. Until the room and meal bill is finally paid, the credit card will be used to guarantee that payment will be made. Without a valid credit card to hold the reservation, the room cannot be booked.

If you do not show up when you have booked a room and fail to call the Sawridge Inn concerned to inform them that you are cancelling the reservation, your credit card may still be charged for the room.

Respect and Good Behaviour

Even though the Sawridge Inns are closely associated with the Sawridge Trusts, beneficiaries making use of services at the Inns are expected to treat the staff and other patrons with respect. The hotel is entitled to evict a guest that is unruly, abusive toward staff and other patrons, smoking in a non-smoking room or is causing damage to the facilities.

If you have a complaint about service that you receive at the Sawridge Inn, ask to speak to the Front Desk or General Manager to resolve your problem. If you are still not satisfied, contact the Trusts Administrator or the Chief or administrator at the Sawridge First Nation Office to address your complaint with them.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.

The Sawridge Trusts Tipi

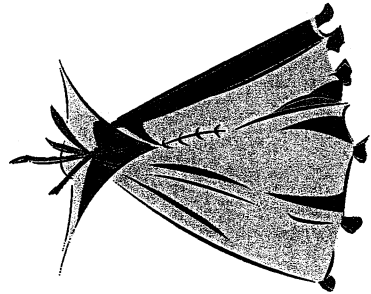
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SENIORS' SUPPORT BENEFIT



801, 4445 Calgary Trail NW
Edmonton, AB T6H 5R7

Office: 780-988-7723
Toll Free: 1-888-988-7723
Facsimile: 780-988-7724
E-mail: benefits@sawridgetrusts.ca

Senior's Support Benefit

Without extra financial support from the family or the community, many seniors are faced with a poorer diet and a very restricted social life.

While living costs for most seniors go down once they no longer are working, for many indigenous seniors, these costs may not go down because they often assist in raising their grandchildren.

The Sawridge Trusts Seniors' Support Benefit is meant to provide some relief to these disadvantaged persons in our community.

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. They are meant to support other benefits provided by Sawridge First Nation, the Federal Government, the Provincial Government and the community. Where another similar benefit exists, it must be accessed first.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

Monthly Income Benefit

A monthly cash disbursement of \$2,000 effective 1 April 2011 is made to each Senior to assist them by supplementing other senior's income benefits like the Old Age Pension and Canada Pension Plan. This benefit is meant to assist with cost-of-living, transportation and home maintenance expenses.

Seniors Economically Disadvantaged

Many seniors in Canada are economically disadvantaged. Indigenous seniors are among the most disadvantaged in this group.

Once they are no longer able to work, seniors must either rely on money that they have saved while they were working or employee pensions. If the senior has no savings or pension, Old Age Pension and the Canada Pension Plan is the only money left to support the senior's living costs.

the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts and who has attained the age of 65 years.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.



Who is Eligible

For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by

The Sawridge Trusts Tipi

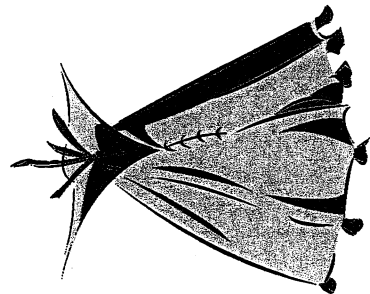
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47-Health Support Benefit Pamphlet.pdf

HEALTH SUPPORT BENEFIT



801, 4445 Calgary Trail NW
Edmonton, AB T6H 5R7

Office: 780-988-7723
Toll Free: 1-888-988-7723
Facsimile: 780-988-7724
E-mail: benefits@sawridgetrusts.ca

Health Support Benefit

Supplementary Benefit

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Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

The Benefit

The Sawridge Trusts have contracted J.T. Moland Insurance Consultants to set up three health support programs for beneficiaries.

Health Insurance

The health insurance will cover the difference between what is paid through Alberta Health Care and Non-Insured Health Benefits. It covers health care costs like hospital, ambulance, chiropractors, physiotherapists, speech therapists, psychologists/social workers, hearing aids, prostheses, wheelchair

ramps and glucose monitoring equipment. It also covers basic/major/orthodontic dental care, prescriptions and out-of-country emergency medical care.

Life Insurance

The life insurance will provide \$250,000 of fully-paid, permanent life insurance for each beneficiary between 18 and 60 years of age. This insurance will pay out \$200,000 to the person designated by the beneficiary and \$50,000 to the Trust to fund future life insurance plans.



Member Assistance Plan

The member assistance program will provide telephone and in-person counselling and referral and will help people by providing support after they receive treatment and counselling. The program is available to all beneficiaries and their families.

Who is Eligible

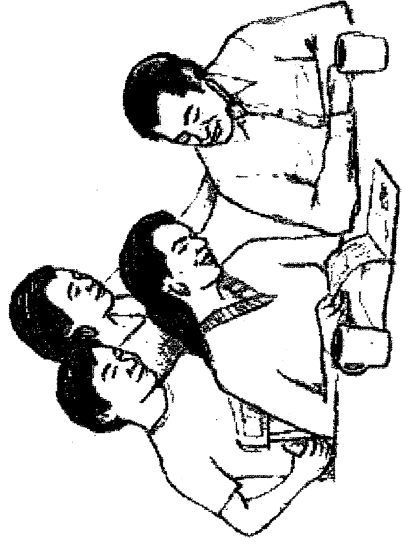
For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts.

How to Access the Benefit

J.T. Moland will be contacting all the identified beneficiaries to enrol them in the program, to provide them with a medical card and to provide detailed benefits information. Once the card is provided, beneficiaries can begin accessing health benefits.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.



The Sawridge Trusts Tipi

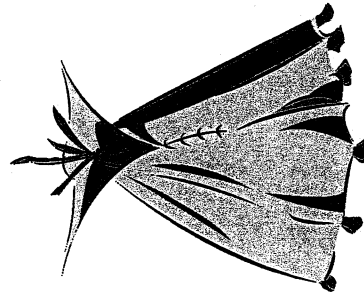
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CASH DISBURSEMENT BENEFIT



801, 4445 Calgary Trail NW
Edmonton, AB T6H 5R7

Office: 780-988-7723
Toll Free: 1-888-988-7723
Facsimile: 780-988-7724
E-mail: benefits@sawridgetrusts.ca

Cash Disbursement Benefit

Supplementary Benefit

All Sawridge Trusts are supplementary benefits. They are meant to support other benefits provided by Sawridge First Nation, the Federal Government, the Provincial Government and the community. Where another similar benefit exists, it must be accessed first.

Sawridge Trusts benefits are only available as long as the Trusts have the resources to support these benefits.

The Benefit

The Sawridge Trusts have established a "One Time Only Good Faith Cash Disbursement" to be made to each of the identified and approved adult beneficiaries of either Trust.

A single cash disbursement of \$2,500 will be to each adult beneficiary who is 18 years of age and older.

Only one payment of \$2,500 will be made to each beneficiary for this benefit regardless of whether the beneficiary is a member of one or both Trusts.

⁴⁷Cash Disbursement Benefit Pamphlet.pdf
Minor beneficiaries under 18 years of

age will not be eligible for this benefit until they reach the age of 18 years of age and apply. Payments will be honoured automatically when these beneficiaries reach the age of majority, subject to available funds.

Payments to newly identified beneficiaries will be made as soon as that beneficiary has been authorized by the Board of Trustees and registered with the Trusts' Office.

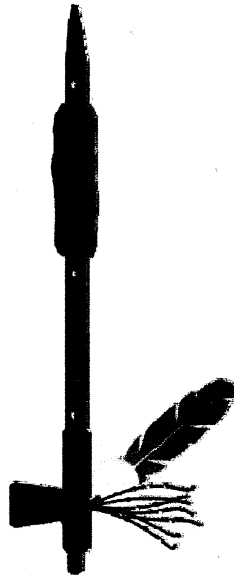
While other cash disbursements may be made available to beneficiaries in the future, it is not the intent of the Trusts to make regular cash disbursements at this time.

Who is Eligible

For the purposes of this benefit, an eligible beneficiary is any person who has been confirmed by the Board of Trustees of the Sawridge Trusts as a beneficiary under the rules of the Trusts and who has attained the age of 18 years.

How to Access the Benefit

Beneficiaries do not need to do anything



to receive this benefit. It will be issued automatically by the Trusts' Office.

If you are eligible for this benefit and have not received payment, you can contact the Trusts' Office at the address on the back of this pamphlet for more information.

More Information

You can obtain more information on this and other Trusts' benefits by going to the Sawridge Trusts web site at www.sawridgetrusts.ca or by emailing, faxing or calling the Trusts Administrator at the telephone numbers and address provided on the back of this pamphlet.

Other Benefits

The Sawridge Trusts have developed or are developing a number of benefits that support the growth and development of beneficiaries. You may be interested in receiving information on:

- Compassionate Care and Death Benefit
- Senior's Support Benefit
- Personal Development Benefit
- Educational Support Benefit

TAB 48

TAB 49

TAB 50

Meeting of the Trustee's and Settlers of the
SAWRIDGE BAND TRUST
June, 1982, held at Sawridge Band Office
Sawridge Reserve, Slave Lake, Alberta

IN ATTENDANCE:

WALTER P. TWINN
GEORGE TWIN
WALTER FELIX TWIN


All the Trustees and Settlers being present, formal notice calling the meeting was dispensed with and the meeting declared to be regularly called. Walter P. Twinn acted as Chairman, and called the meeting to order. George Twinn acted as secretary.

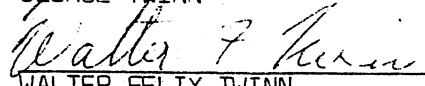
IT IS HEREBY RESOLVED:

1. THAT the Solicitors and David A. Fennell and David Jones and the Accountants, Ron Ewoniak of Deloitte, Haskins & Sells presented to the Settlers a Trust Settlement document which settled certain of the assets of the Band on the Trust.
2. THAT this document was reviewed by the Settlers and approved unanimously.
3. THAT the Trustees then instructed the Solicitors to prepare the necessary documentation to transfer all property presently held by themselves to the Trust and to present the documentation for review and approval.

There being no further business, the meeting then adjourned.


WALTER P. TWINN


GEORGE TWINN


WALTER FELIX TWINN

Meeting of the Trustee's
SAWRIDGE BAND TRUST
held on this day of
1983, held at Sawridge Band Office
Sawridge Reserve, Slave Lake, Alberta

IN ATTENDANCE:

WALTER P. TWINN
WALTER F. TWINN
GEORGE TWINN
DAVID A. FENNELL

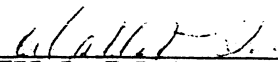
All the Trustees being present, formal notice calling the meeting was dispensed with and the meeting declared to be regularly called. Walter P. Twinn acted as Chairman, and called the meeting to order. George Twinn acted as secretary.

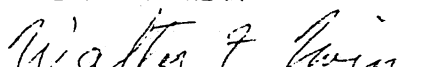
On motion duly made by Walter P. Twinn, seconded by Walter F. Twinn and unanimously carried, it was resolved that the reading of the last minutes are approved as read.

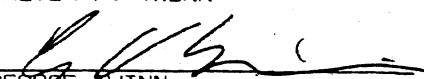
Further, on motion duly made, seconded and unanimously carried, it was resolved that David A. Fennell report as to the further business arising out of last meeting. David A. Fennell reported as follows:

1. He attended before Mr. Justice Bowen of the Court of Queen's Bench of Alberta and obtained the following Order, a copy of which is attached hereto.
2. That pursuant to the Order the proper notices were posted and at the expiration of the notice period an application was made again before Mr. Justice Bowen and that the following amendments were granted, a copy of which Order is attached hereto.

There being no further business, the meeting then adjourned.


WALTER P. TWINN


WALTER F. TWINN


GEORGE TWINN

Meeting of the Trustee's of
SAWRIDGE BAND TRUST
held on this day of ,
1983, held at Sawridge Band Office
Sawridge Reserve, Slave Lake, Alberta

IN ATTENDANCE:

WALTER F. TWINN
GEORGE TWINN
DAVID A. FENNELL

All the Trustees being present, formal notice calling the meeting was dispensed with and the meeting declared to be regularly called. Walter F. Twinn acted as Chairman, and called the meeting to order. George Twinn acted as secretary.

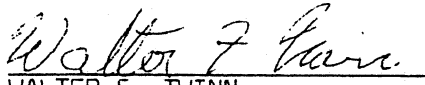
IT WAS RESOLVED :

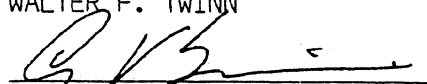
1. After discussion as to necessity of staging the election of the Trustees the following proposal was put forward by George Twinn.

(See attached Schedule "A" as to amendments to trust)

2. On motion duly made, seconded by Walter F. Twinn and unanimously approved, David A. Fennell was then instructed to file the necessary applications in the Court of Queen's Bench and to report back to the Trustees after the application was complete.

There being no further business, the meeting then adjourned.


WALTER F. TWINN


GEORGE TWINN

SCHEDULE "A"

AMENDMENTS TO SAWRIDGE BAND TRUST

THAT Paragraph 5 be amended of the original trust deed made on the 15th day of April, 1982, pursuant to the Alberta Trustee Act, R.S.A. 1980 c. T-10, s.42(1);

An application will be made to amend the Sawridge Band Trust to allow increased terms for the Trustees. Under the proposal, the Chief will have a term of six (6) years, one Councillor will have a term of four (4) years and the other Councillor will have a term of two (2) years. They would not be replaced until the end of their terms as trustees even if they were defeated in an election. The Trustees Act requires the consent of the adult beneficiaries. The Court can consent for Minors.

DECLARATION OF TRUST

SAWRIDGE BAND TRUST

This Declaration of Trust made the 5th day of July, 1983.

BETWEEN:

CHIEF WALTER PATRICK TWINN
of the Sawridge Indian Band,
No. 19, Slave Lake, Alberta

(hereinafter called the "Settlor")

Of the First Part

AND:

CHIEF WALTER PATRICK TWINN
WALTER FELIX TWINN and GEORGE TWINN
Chief and Councillors of the
Sawridge Indian Band, No. 150, G & H
respectively

(hereinafter collectively called the
"Trustees")

Of the Second Part

AND WITNESSES THAT:

Whereas the Settlor is Chief of the Sawridge Indian Band No. 19, and in that capacity has taken title to certain properties on trust for the present and future members of the Sawridge Indian Band No. 19 (herein called the "Band"); and,

Whereas it is desirable to provide greater detail for both the terms of the trust and the administration thereof; and,

Whereas it is likely that further assets will be acquired on trust for the present and future members of the Band, and it is desirable that the same trust apply to all such assets;

NOW, therefore, in consideration of the premises and mutual promises contained herein, the Settlor and each of the Trustees do hereby covenant and agree as follows:

1. The Settlor and Trustees hereby establish a Trust Fund, which the Trustees shall administer in accordance with the terms of this Agreement.

2. Wherever the term "Trust Fund" is used in this Agreement, it shall mean:

(a) the property or sums of money paid, transferred or conveyed to the Trustees or otherwise acquired by the Trustees including properties substituted therefore, and

(b) all income received and capital gains made thereon, less,

(c) all expenses incurred and capital losses sustained thereon and less,

(d) distributions properly made therefrom by the Trustees.

3. The Trustees shall hold the Trust Fund in trust and shall deal with it in accordance with the terms and conditions of this Agreement. No part of the Trust Fund shall be used for or diverted to purposes other than those purposes set out herein.

4. The name of the Trust Fund shall be "The Sawridge Band Trust", and the meetings of the Trustees shall take place at the Sawridge Band Administration Office located on the Sawridge Band Reserve.

5. The Trustees of the Trust Fund shall be the Chief and Councillors of the Band on the effective date of this Agreement (as duly elected pursuant to Sections 74 through 80 inclusive of the Indian Act, R.S.C. 1970, c. 1-6 as amended from time to time). The Chief shall serve a term of Six (6) years as Trustees.

One Councillor (to be determined by a majority of the Three Trustees) shall serve Four (4) years as Trustee. The other Councillor shall serve a term of Two (2) years as Trustee. Upon completion of their respective terms as Trustees, the Trustees shall resign as Trustee. If the Trustee whose term has ended was Chief when appointed Trustee, he shall automatically be replaced as Trustee by the new Chief for a term of Six (6) years. If the Trustee whose term has ended was a Councillor, he shall be replaced as Trustee by one of the new Councillors (to be determined by a majority of the Chief and Councillors at that time). In the event that an elected Chief or Councillor refuses to accept the terms of this trust and to act as a Trustee hereunder, the remaining Trustees shall appoint a person registered under the Indian Act as a replacement for the said recusant Chief or Councillor, which replacement shall serve for the remainder of the term of the recusant Chief or Councillors. In the event that the number of elected Councillors is increased, the number of Trustees shall also be increased. In the event that there are no Trustees able to act, any person interested in the Trust may apply to a Judge of the Court of Queen's Bench of Alberta who is hereby empowered to appoint one or more Trustees, who shall be a member of the Band.

6. The Trustees shall hold the Trust Fund for the benefit of all members, present and future, of the Band; provided, however, that at the end of Twenty One (21) years after the death of the last descendant now living of the original signators of Treaty Number 8 who at the date hereof are registered Indians, all of the Trust Fund then remaining in the hands of the Trustees shall be divided equally among all members of the Band then living.

Provided, however, that the Trustees shall be specifically entitled not to grant any benefit during the duration of the Trust or at the end thereof to any illegitimate children of Indian women, even though that child or those children may be registered under the Indian Act and their status may not have been protested under Section 12(2) thereunder; and provided further that the Trustees shall exclude any member of the Band who transfers to another Indian Band, or has become enfranchised (within the meaning of these terms in the Indian Act).

The Trustees shall have complete and unfettered discretion to pay or apply all or so much of the net income of the Trust Fund, if any, or to accumulate the same or any portion thereof, and all or so much of the capital of the Trust Fund as they in their unfettered discretion from time to time deem appropriate for the beneficiaries set out above; and the Trustees may make such payments at such time, and from time to time, and in such manner as the Trustees in their uncontrolled discretion deem appropriate.

7. The Trustees may invest and reinvest all or any part of the Trust Fund in any investment authorized for Trustees' investments by the Trustees' Act, being Chapter 373 of the Revised Statutes of Alberta, 1970, as amended from time to time, but the Trustees are not restricted to such Trustee Investments but may invest in any investment which they in their uncontrolled discretion think fit, and are further not bound to make any investment nor to accumulate the income of the Trust Fund, and may instead, if they in their uncontrolled discretion from time to time deem it appropriate, and for such period or periods of time as they see fit, keep the Trust Fund or any part of it deposited in a bank to which the Bank Act or the Quebec Savings Bank Act applies.

8. The Trustees are authorized and empowered to do all acts necessary or desirable to give effect to the trust purposes set out above, and to discharge their obligations thereunder other than acts done or omitted to be done by them in bad faith or in gross negligence, including, without limiting the generality of the foregoing, the power

- (a) to exercise all voting and other rights in respect of any stocks, bonds, property or other investments of the Trust Fund;
- (b) to sell or otherwise dispose of any property held by them in the Trust Fund and to acquire other property in substitution therefore; and

- (c) to employ professional advisors and agents and to retain and act upon the advised given by such professionals and to pay such professionals such fees or other remuneration as the Trustees in their uncontrolled discretion from time to time deem appropriate (and this provision shall apply to the payment of professional fees to any Trustee who renders professional services to the Trustees).

9. Administration costs and expenses of or in connection with the Trust shall be paid from the Trust Fund, including, without limiting the generality of the foregoing, reasonable reimbursement to the Trustees or any of them for costs (and reasonable fees for their services as Trustees) incurred in the administration of the Trust and for taxes of any nature whatsoever which may be levied or assessed by Federal, Provincial or other governmental authority upon or in respect of the income or capital of the Trust Fund.

10. The Trustees shall keep accounts in an acceptable manner of all receipts, disbursements, investments, and other transactions in the administration of the Trust.

11. The Trustees shall not be liable for any act or omission done or made in the exercise of any power, authority or discretion given to them by this Agreement provided such act or omission is done or made in good faith; nor shall they be liable to make good any loss or diminution in value of the Trust Fund not caused by their gross negligence or bad faith; and all persons claiming any beneficial interest in the Trust Fund shall be deemed to take notice of and subject to this clause.

12. A majority of the Trustees shall be required for any action taken on behalf of the Trust. In the event that there is a tie vote of the Trustees voting, the Chief shall have a second and casting vote.

Each of this Trustees, by joining in the execution of this Trust Agreement, signifies his acceptance of the Trust herein. Any Chief or Councillor or any other person who becomes a Trustee under paragraph 5 above shall signify his acceptance of the Trust herein by executing this Trust Agreement or a true copy hereof, and shall be bound by it in the same manner as if he or she had executed the original Trust Agreement.

IN WITNESS WHEREOF the parties hereto have executed this
Trust Agreement.

SIGNED, SEALED AND DELIVERED
in the presence of:

477 Caprethurst
NAME
#910, 10310 JHS PERKINS EDDINGTON, ALTA.
ADDRESS

A. Settlor Walter J.

B. Trustees:

477 Caprethurst
NAME

1. Walter J.

ADDRESS

477 Caprethurst
NAME

2. Sam J.

ADDRESS

477 Caprethurst
NAME

3. G. J. B.

ADDRESS

DECLARATION OF TRUST

SAWRIDGE BAND TRUST

This Declaration of Trust made the 15th day of April, A.D. 1942.

BETWEEN:

CHIEF WALTER PATRICK TWINN
of the Sawridge Indian Band
No. 19, Slave Lake, Alberta
(hereinafter called the "Settlor")

of the First Part

AND:

CHIEF WALTER PATRICK TWINN,
WALTER FELIX TWINN and GEORGE TWINN
Chief and Councillors of the
Sawridge Indian Band No. 19 N.S.W. respectively
(hereinafter collectively called the "Trustees")

of the Second Part

AND WITNESSES THAT:

Whereas the Settlor is Chief of the Sawridge Indian Band No. 19, and in that capacity has taken title to certain properties on trust for the present and future members of the Sawridge Indian Band No. 19 (herein called the "Band"); and,

whereas it is desirable to provide greater detail for both the terms of the trust and the administration thereof; and,

Whereas it is likely that further assets will be acquired on trust for the present and future members of the Band, and it is desirable that the same trust apply to all such assets;

NOW, therefore, in consideration of the premises and mutual promises contained herein, the Settlor and each of the Trustees do hereby covenant and agree as follows:

1. The Settlor and Trustees hereby establish a Trust Fund, which the Trustees shall administer in accordance with the terms of this Agreement.
2. Wherever the term "Trust Fund" is used in this Agreement, it shall mean: a) the property or sums of money paid, transferred or conveyed to the Trustees or otherwise acquired by the Trustees including properties substituted therefor and b) all income received and capital gains made thereon, less c) all expenses incurred and capital losses sustained thereon and less d) distributions properly made therefrom by the Trustees.
3. The Trustees shall hold the Trust Fund in trust and shall deal with it in accordance with the terms and conditions of this Agreement. No part of the Trust Fund shall be used for or diverted to purposes other than those purposes set out herein.
4. The name of the Trust Fund shall be "The Sawridge Band Trust", and the meetings of the Trustees shall take place at the Sawridge Band Administration office located on the Sawridge Band Reserve.
5. The Trustees of the Trust Fund shall be the Chief and Councillors of the Band, for the time being, as duly elected pursuant to Sections 74

through 80 inclusive of the Indian Act, R.S.C. 1970, c. I-6, as amended from time to time. Upon ceasing to be an elected Chief or Councillor as aforesaid, a Trustee shall ipso facto cease to be a Trustee hereunder; and shall automatically be replaced by the member of the Band who is elected in his stead and place. In the event that an elected Chief or Councillor refuses to accept the terms of this trust and to act as a Trustee hereunder, the remaining Trustees shall appoint a person registered under the Indian Act as a replacement for the said recusant Chief or Councillor, which replacement shall serve for the remainder of the term of the recusant Chief or Councillors. In the event that the number of elected Councillors is increased, the number of Trustees shall also be increased, it being the intention that the Chief and all Councillors should be Trustees. In the event that there are no Trustees able to act, any person interested in the Trust may apply to a Judge of the Court of Queen's Bench of Alberta who is hereby empowered to appoint one or more Trustees, who shall be a member of the Band.

6. The Trustees shall hold the Trust Fund for the benefit of all members, present and future, of the Band; provided, however, that at the end of twenty one (21) years after the death of the last descendant now living of the original signators of Treaty Number 8 who at the date hereof are registered Indians, all of the Trust Fund then remaining in the hands of the Trustees shall be divided equally among all members of the Band then living.

Provided, however, that the Trustees shall be specifically entitled not to grant any benefit during the duration of the Trust or at the end thereof to any illegitimate children of Indian women, even though that child or those children may be registered under the Indian Act and

their status may not have been protested under Section 12(2) thereunder; and provided further that the Trustees shall exclude any member of the Band who transfers to another Indian Band, or has become enfranchised (within the meaning of these terms in the Indian Act).

The Trustees shall have complete and unfettered discretion to pay or apply all or so much of the net income of the Trust Fund, if any, or to accumulate the same or any portion thereof, and all or so much of the capital of the Trust Fund as they in their unfettered discretion from time to time deem appropriate for the beneficiaries set out above; and the Trustees may make such payments at such time, and from time to time, and in such manner as the Trustees in their uncontrolled discretion deem appropriate.

7. The Trustees may invest and reinvest all or any part of the Trust Fund in any investment authorized for Trustees' investments by The Trustees' Act, being Chapter 373 of the Revised Statutes of Alberta 1970, as amended from time to time, but the Trustees are not restricted to such Trustee Investments but may invest in any investment which they in their uncontrolled discretion think fit, and are further not bound to make any investment nor to accumulate the income of the Trust Fund, and may instead, if they in their uncontrolled discretion from time to time deem it appropriate, and for such period or periods of time as they see fit, keep the Trust Fund or any part of it deposited in a bank to which the Bank Act or the Quebec Savings Bank Act applies.

8. The Trustees are authorized and empowered to do all acts necessary or desirable to give effect to the trust purposes set out above,

and to discharge their obligations thereunder other than acts done or omitted to be done by them in bad faith or in gross negligence, including, without limiting the generality of the foregoing, the power

- a) to exercise all voting and other rights in respect of any stocks, bonds, property or other investments of the Trust Fund;
- b) to sell or otherwise dispose of any property held by them in the Trust Fund and to acquire other property in substitution therefore; and
- c) to employ professional advisors and agents and to retain and act upon the advice given by such professionals and to pay such professionals such fees or other remuneration as the Trustees in their uncontrolled discretion from time to time deem appropriate (and this provision shall apply to the payment of professional fees to any Trustee who renders professional services to the Trustees).

9. Administration costs and expenses of or in connection with the Trust shall be paid from the Trust Fund, including, without limiting the generality of the foregoing, reasonable reimbursement to the Trustees or any of them for costs (and reasonable fees for their services as Trustees) incurred in the administration of the Trust and for taxes of any nature whatsoever which may be levied or assessed by Federal, Provincial or other governmental authority upon or in respect of the income or capital of the Trust Fund.

10. The Trustees shall keep accounts in an acceptable manner of all receipts, disbursements, investments, and other transactions in the administration of the Trust.

11. The Trustees shall not be liable for any act or omission done or made in the exercise of any power, authority or discretion given to them

by this Agreement provided such act or omission is done or made in good faith; nor shall they be liable to make good any loss or diminution in value of the Trust Fund not caused by their gross negligence or bad faith; and all persons claiming any beneficial interest in the Trust Fund shall be deemed to take with notice of and subject to this clause.

12. A majority of the Trustees shall be required for any action taken on behalf of the Trust. In the event that there is a tie vote of the Trustees voting, the Chief shall have a second and casting vote.

Each of the Trustees, by joining in the execution of this Trust Agreement, signifies his acceptance of the Trust herein. Any Chief or Councillor or any other person who becomes a Trustee under paragraph 5 above shall signify his acceptance of the Trust herein by executing this Trust Agreement or a true copy hereof, and shall be bound by it in the same manner as if he or she had executed the original Trust Agreement.

IN WITNESS WHEREOF the parties hereto have executed this Trust Agreement.

SIGNED, SEALED AND DELIVERED
In the Presence of:

Walter P. J.
NAME

A. Settlor:

Walter P. J.

1100 One Thornton Court
ADDRESS

Walter P. J.
NAME

B. Trustees: 1.

Walter P. J.

1100 One Thornton Court
ADDRESS

Weather York
NAME

1100 One Thornton Court
ADDRESS

Weather York
NAME

1100 One Thornton Court
ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

2. 9/15

3. Walter F. Fink

4. _____

5. _____

6. _____

7. _____

8. _____