



CLAIM FORM - NON-TRUST DISTRIBUTION

Distribution to Abenaki of Odanak First Nation members aged 18 and over from the compensation obtained in settlement of the Mission St-François and the 38 lots specific claims

Eligibility conditions

Deadline to submit the form
October 31, 2026

To be eligible for a distribution, you:

- a) must be an adult member of Odanak (18 years and older) as of March 13, 2026;
- b) must submit the claim form no later than October 31, 2026, together with the required documentation indicated in this form.

Estates and minor members (once they reach 18 years of age) may apply to the distribution trust to be established to receive their share of the distribution. Adult members who have not received their distribution through the non-trust process may also claim it from the distribution trust. More details to come will be shared with members.

2 methods to submit the form

Online (recommended)



Complete and submit the form at: www.distributionsodanak.ca

By mail



Non-Trust Distribution Administrator for Odanak
2640, boulevard Laurier, suite 1700 Quebec (QC) G1V 5C2

Assistance to complete the form

Information

For more information about this distribution, please visit the website:

www.distributionsodanak.ca

Free assistance

For assistance in completing this form or for explanations about the process, contact the Non-Trust Distribution Administrator:

Phone: 514-205-3969 | Toll-free: 1-844-409-3969

Email: ca_distributions_odanak@pwc.com

Part 1: Member identification

Adult member's full legal name **(required)**

First name	Last name
Middle name (if applicable)	Maiden name and/or other name (if applicable)

Date of birth (DD / MM / YYYY) **(required)**

D	D	M	M	Y	Y	Y	Y
Day		Month		Year			

Indian status number **(required if you have status)**

Part 2: Contact information

Mailing address **(required)**

Number	Street	Unit	P.O. Box
City	Postal code	Province / State	Country
Email (required)	Telephone (required)	Preferred method of communication (required)	
		Email ☐	Mail ☐

Part 3: Government-issued identification documents showing date of birth

Please attach legible copies of two valid (non-expired) pieces of government issued identification showing your date of birth **(required)**

- | | |
|---|---|
| ☐ Driver's licence | ☐ Passport |
| ☐ Health insurance card (e.g. RAMQ, OHIP) | ☐ Indian status card |
| ☐ National identity card (outside of Canada) | ☐ Other |

Part 4: Payment method

Please choose only one of the following payment methods **(required)** :

- ☐ Cheque — payments will be sent to the mailing address provided in Part 2.
- ☐ Direct deposit (EFT) — Canada only — **complete Part 4.1**
- ☐ Wire transfer — recommended outside of Canada — **complete Part 4.2**

Part 4.1: Direct deposit (EFT) **(required if you selected this method)**

Please attach a voided cheque or a direct deposit form from your financial institution for a Canadian bank account in your name and complete the following information:

Transit (5 digits)	Institution (3 digits)	Account (7-12 digits)
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Part 4.2: Wire transfer **(required if you selected this method)**

Please attach a document from your financial institution showing the bank account number or IBAN, and the SWIFT number and complete the following information:

Name of financial institution	Address of the financial institution		
	Postal code	Province / State	Country
Account number or IBAN	SWIFT number	Conversion currency	

Part 5: Release

By submitting this claim form:

1. I confirm that I was a member of Odanak and was aged 18 or older as of March 13, 2026 and that I am still a member of Odanak.
2. I authorize and direct PricewaterhouseCoopers ("PwC") to make the payment of my share of the distribution to Odanak members (the "Payment") according to the method I have identified above.
3. I understand that banking fees may be applied and deducted from my Payment.
4. If my financial institution is located outside Canada, I understand that currency conversion fees may apply in addition to banking fees, and that these are not the responsibility of the Abenaki of Odanak First Nation (the "First Nation"), nor of the Council of the Abenakis of Odanak (the "Council"), nor of PwC. I understand that any payment made by cheque and sent outside Canada may be subject to clearing delays or additional banking fees imposed by my financial institution. I have had the opportunity to inquire about these fees and delays before selecting this payment method.
5. I confirm that if a problem arises in connection with:
 - a. the remittance of the Payment;
 - b. the execution of this Payment request; or
 - c. the information contained in this form or in a document provided with this form;

neither the First Nation, nor the Council, nor PwC shall be liable. If I file any complaint, claim or action related to the payment of the money or to the manner in which the Payment was made, I shall reimburse the First Nation, the Council and PwC, as well as their respective representatives and employees, for any costs they incurred in responding to it.

6. By receiving the Payment, I confirm that:

- a. I am receiving my share of the distribution to Odanak members from the First Nation through PwC;
- b. the First Nation, the Council and PwC have no further obligations to me with respect to this Payment and I grant them a **complete, final and irrevocable release**. I waive any demand or claim related to this Payment against the First Nation, the Council and PwC (as well as their respective representatives, employees and successors), with the exception of any written confirmation to be provided to me by the Council regarding the nature of the Payment;
- c. if I received a personalized notice in June 2026 requiring me to pay my debt to the Council no later than June 25, 2026, I accept that my debt will be deducted from the Payment (if I have not already repaid it).

7. I understand that if any part of this document is found to be invalid or unenforceable, the remainder of the document remains valid and continues to apply.

8. I agree that any copy of this signed form (paper, scanned or transmitted electronically) shall have the same force and effect as the original. Once a copy is transmitted to PwC, I am unconditionally bound by this document.

Part 6: Declarations and Undertakings

By signing this form, I declare and warrant that **(required; check the box before each statement):**

- ☐ All information provided in this form is true, accurate and complete.
- ☐ I have not assigned or transferred the rights or claims covered herein to anyone.
- ☐ I understand the scope of the release above (Part 5) and I freely and voluntarily agree to it.
- ☐ I undertake to reimburse any amount received in excess if it is determined that my claim was accepted in error or on the basis of inaccurate information.

Claimant member's signature **(required)**

Date (D D / M M / Y Y Y Y) **(required)**

Day		Month		Year			

If the form is completed electronically, the member may type their name as a valid signature.

Part 7: Checklist

- ☐ All **(required)** fields are completed
- ☐ Legible copies of 2 valid identification documents issued by a government authority and showing the date of birth is attached
- ☐ The payment method is selected
- ☐ The required banking documents are attached, if you selected "Direct deposit" or "Wire transfer"