



SEASON'S GREETINGS & HAPPY NEW YEAR!

Lake Babine Nation (LBN) Chief & Council would like to thank you and wish you a joyous holiday with peace and prosperity in the New Year! Due to the rising inflation rates, Lake Babine Nation Council approves a One-Time Inflation Relief Financial Distribution to all Lake Babine Nation registered members.

- **All registered LBN Members:**
 - **Ages sixteen (16) and older will receive \$1,000.00**
 - **Age fifteen (15) & under will receive \$500.00**
 - (or children who are eligible to be registered as of November 12, 2024) will be payable to their parent(s) or legal guardian (or person(s) whom the minor has been living with for the past 30 days.
 - Children-in-Care may take longer to process, as legal custody documents need to be provided.
 - **OUT OF COUNTRY LBN Members must provide:** ABA routing # OR SWIFT, Account & Transit, provide bank's full address. **IMPORTANT: Bank address MUST match SWIFT, or the bank WILL NOT send.**
- **LBN Finance Department will be depositing these funds by direct deposit ONLY (no cheques will be issued). Please fill out the information completely, attach a void cheque or a bank printed & stamped direct deposit form.**
- **Any LBN member's that do not have bank accounts complete a waiver along with the application and forward the to the email address below. Handwritten deposit information will not be accepted, finance MUST see full void cheque or bank deposit form.**

Deadline to submit this form and direct deposit information: December 11, 2024.
Forms received after this date; payment will be processed in the new calendar year.

FULL LEGAL NAME		LBN STATUS #	
		6 0 7 _ _ _ _ _	
MAILING ADDRESS			
PHONE:		EMAIL:	

DEPENDENTS AGE 15 & UNDER		
FULL LEGAL NAME	AGE	LBN STATUS #
		6 0 7 _ _ _ _ _
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To avoid any delay in payment, please be sure to send your information only to the email listed below.
Email completed form & banking to: community@lakebabine.com



FULL LEGAL NAME OF LAKE BABINE NATION MEMBER		LBN STATUS #
		6 0 7 _ _ _ _ _
DATE OF BIRTH (YYYY-MM-DD)	<i>as the "LBN Member", understand and agrees that they are not able to access banking, have valid photo ID, have a valid mailing address, and/or phone/email contact information providing individual stated below to apply for the Lake Babine Nation Inflation Relief Fund on their behalf</i>	

would like to **DESIGNATE** the following individual to receive the Lake Babine Nation (LBN) Inflation Relief Fund on behalf of mentioned above

FULL LEGAL NAME OF DESIGNATED INDIVIDUAL		STATUS # (if applicable)	
		_ _ _ _ _	
MAILING ADDRESS			
DATE OF BIRTH (YYYY-MM-DD)		PHONE:	
<i>as the "Designated Individual" I agree to provide full contact information and accurate banking information to Lake Babine Nation Finance Department and agrees to provide above stated Lake Babine Nation member their FULL amount of the Inflation Relief Fund.</i>			

LBN Member Signature

Date

Designated Individual Signature

Date

Witness Full Name (Please Print)

Witness Signature

Date