

Head Office  
520 Heritage Way  
North Battleford, SK S9A 0P2

Sub Office  
Unit 820 – 606 Spadina Cres E  
Saskatoon, SK S7K 3H1

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

To Whom It May Concern,

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_  
to pick up and receive my PCD payment on my behalf.

I am unable to collect the payment personally and grant permission for the above-named individual to act on my behalf for this purpose. I understand that it is not the responsibility of Lucky Man Cree Nation to reissue lost or stolen PCD Payments.

Please release the payment to the authorized person upon presentation of valid identification.

Thank you for your assistance.

Sincerely,

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**SIGNATURE**

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