

## CREE NATION OF WASKAGANISH BAND OFFICE 70, Waskaganish Road Waskaganish, QC J0M 1R0

## **Letter of Confirmation of Residence**

(Voter's first name and last name)	
Resides at: (insert full name and add information listed on letterhead ]	lress of First Nation/Band office below OR check box for same
Band administrator or designated Ba	and authority's full name, title, address and phone number:
	nd authority's full name, title, address and phone number: Title:
Full name:	
Full name:	Title:heck box for same address on letterhead)