

## OPT-OUT FORM

**This is NOT a Claim Form. This form EXCLUDES you from participating in the Settlement Agreement. DO NOT fill out this form if you wish to participate in the Settlement Agreement.**

A class action lawsuit was commenced in Manitoba alleging that the Defendants' negligence caused damage by way of causing a flood in 2011 to Lake St. Martin, Dauphin River, Little Saskatchewan, and Pinaymootang First Nations (the "2011 Flooding").

The Manitoba Court of Appeal certified this class action for the following class:

All Members of the listed First Nations:

- i. whose property on Reserve, real or personal, was flooded in 2011; or
- ii. who were evacuated, displaced or were unable to reside on Reserve because of the flooding on Reserve in 2011; or
- iii. who were unable to work and thereby earn income because of the flooding on Reserve in 2011.

If you want to opt-out of the Class, meaning, it means you will not be entitled to any payment under the Settlement Agreement, if the Court approves it. But, you keep your legal rights to sue on your own about the same legal claims made in this lawsuit (subject to any limitation periods that may apply).

If you want to opt-out of the Class, this Opt-Out Form must be completed, signed, sent, and post-marked by regular mail or fax **no later than November 30, 2017** to the Opt-Out Notice Administrator at the address listed at the end of this Opt-Out Form. No further opportunity to opt-out will be provided.

No person may opt-out a minor or a mentally incompetent or vulnerable individual without permission of the Court and after notice to the Public Guardian and Trustee of Manitoba.

**Please read the entire form and follow the instructions carefully.**

1. **Personal Information:** Please provide the following information about yourself, or if you are filing this Opt-Out Form as the legal representative of a Class Member, please provide the following information about the Class Member.

Current name and other names (ie. maiden names, married names) used by the Class Member for the past ten years (last name first, following by first name and middle initial):

Prefix:  Mr.  Mrs.  Miss  Ms.  Dr.

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First Name

Middle Name

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Last Name

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Prior Last Name

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Relationship to Class Member (*i.e.*, spouse or child)

Date of Birth (Day/Month/Year)

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Street Address

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City

Province /Territory

Postal Code

( )

( )

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Daytime Phone Number

Evening Phone Number

e-mail address

Language Preference:

English

Ojibwa

- 2. Legal Representative Information (if applicable):** If you are filing this Opt-Out Form as the legal representative of a Class Member (ie. as the executor of his/her estate), please provide the following information about **yourself** and attach a copy of your Court approval or other authorization to represent the Class Member.

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Last Name	First Name	Middle Initial
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Street Address

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City	Province /Territory	Postal Code
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( )

( )

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Daytime Phone Number

Evening Phone Number

e-mail address

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Type of Legal Representative (e.g. executor, guardian)

Please attach a copy of a court order or other official document(s) demonstrating that you are the duly authorized legal representative of the Class Member and check the box below describing the Class Member's status:

- minor (court order appointing guardian or property or custody order, if any, or sworn affidavit of the person with custody of the minor);
  
- a mentally incompetent or vulnerable person (copy of an enduring power of attorney for property, or a court order appointing a committee of property, or appointment of substitute decision maker over property);
  
- Grant of Probate, Administration Order or Letters of Administration.

**3. Lawyer Information (if applicable):** If you or the Class Member have hired a lawyer in connection with a claim arising from the 2011 Flooding, please provide the following information about the lawyer:

Law Firm Name \_\_\_\_\_

Lawyer's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Law Society Number \_\_\_\_\_

**4. Acceptance and Acknowledgement**

**I have read the foregoing and understand that by opting out, I will never be eligible to receive any compensation pursuant to the Settlement Agreement with the Defendants.**

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Signature

(Class Member or Executor, Administrator, or Personal Representative)

\_\_\_\_\_  
Print Name

If you have questions about using or completing this Form, contact your lawyer or call the Opt-Out Notice Administrator's Information Line at: 1-866-934-0509

**2011 Manitoba Flood Class Action**

PO Box 4454, Toronto Station A

25 The Esplanade

Toronto, ON M5W 4B1

THE INFORMATION CONTAINED IN THIS FORM WILL REMAIN CONFIDENTIAL