## Nishnawbe-Aski Legal Services Corporation

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8032 magnishs 27.4725/hr

October 29, 2018

Personal & Confidential

**Lenard Comber** C/o 1805 Arthur Street East Thunder Bay, ON P7F 2R6

Congratulations! We are pleased to offer you a full time position as an indigenous Bail Worker for Sloux Lookout at Nishnawbe-Aski Legal Services Corporation.

Upon your acceptance of this offer, you will commence your position on October 30, 2018 at a salary of \$ 50,000 per annum. We offer a benefits package which will be further explained to you. Also, please note, for "Status Indians" this income is currently tax exempt. Your office space is located in Sioux Lookout, ON and your hours of work are between 9:00 a.m. and 5:00 p.m. Monday to Friday.

Karen Cheechoo will be your direct supervisor, and you will be accountable to Jeff Robert, Acting Executive Director, for your overall performance.

We will set up your payroll information therefore please bring your banking information, social insurance number, and your Status Card (if applicable) to our HR Clerk on your first day. The overall conditions of your employment are governed by the Policies of NALSC as they are amended from time to time, as well as any applicable governing legislation. Please be advised that this offer is conditional based on our receipt of a recent Criminal Records Check.

We look forward to working with you and welcome you to the NALSC team!

Dear Lenard Comber,

OFFER OF EMPLOYMENT Emat: Info@nanlegat.on.ca

Webste Http://www.nanlegaLon.ca

Mailing Address: 1805 Arthur Street East Thundar Bay, ON P7E 2R6

Tel (807) 622 1413 Fax: (807) 622-3024



109 Mission Rd. Fort William First Nation, ON P7J 11(7

hnawbe-Aaki Legal Services Corporation

eff Robert

Acting Executive Director

Please confirm your acceptance of employment by providing your signature below.

**ACCEPTANCE OF OFFER** 

i, Lenard Comber, hereby accept this Offer of Employment.

Dated at Thunder Bay this \_\_\_\_\_\_day of October, 2018.

Lenard lomber





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is an indian within the meaning of the Indian Act. chapter 27, Statutes of Genada (1985). ast un Indian au sens de la Loi sur les Indians, chapter 27 des Lois du Canada (1985).



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## Customer Account Information For Payroll, Direct Deposit or Pre-Authorized Payment

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This form provides account information in place of a voided cheque and is disability payments, dividends, government deposits) or pre-authorized payon.  This form should be submitted by the CIBC customer to the employee.	nents.		
authorized payment along with their respective application.  2. Upon receipt of this form, the employer or company should use this in customer's banking information on file			
LENARD COMBER			
48B FIFTH AVE			
SIOUX LOOKOUT ON			_20
CANADA P8T 1L4			
Pay to the order of		\$	
CIBC Canadian Imperial Bank of Commerce	-	/100 Dollars	

00387 010 5459990

## 2018 Personal Tax Credits Return

Protected B when completed

TD1

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions. Fill out this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number	
Address 48-B Fifth Ave.	Postal code	1953-06-29 For non-residents only -	Soci	al insurance number
Slow Lookeaut. ON	POTILL	Country of permanent residence		21/10/5/3/10/7
				41012121011
Basic personal amount – Every resident of Canad payer at the same time in 2018, see "More than one er see "Non-residents" on page 2.	a can claim this amount. If y mployer or payer at the sam	ou will have more than one emp e time" on page 2. If you are a n	loyer or on-resident,	11,809
<ol> <li>Canada caregiver amount for Infirm children und born in 2001 or later, that resides with both parents thr year, the parent who is entitled to claim the "Amount for for that same child who is under age 18.</li> </ol>	oughout the year. If the child	d does not reside with both nere	nts throughout the	
3. Age amount – If you will be 65 or older on Decemb or less, enter \$7,333. If your net income for the year w get Form TD1-WS, Worksheet for the 2018 Personal 7	ill be between \$36,976 and	\$85,863 and you want to calcula	es will be \$36,976 te a partial claim,	
Pension income amount – If you will receive regulary. Quebec Pension Plan, Old Age Security, or Guarannual pension income, whichever is less.	ar pension payments from a ranteed Income Supplemen	pension plan or fund (excluding t payments), enter \$2,000 or you	Canada Pension r estimated	-
5. Tuition (full time and part time) - If you are a stud Employment and Social Development Canada, and yo are enrolled full time or part time, enter the total of the	u will pay more than \$100 p	or college, or an educational inst er institution in tuition fees, filt in	Itution certified by this section. If you	
6. Disability amount – If you will claim the disability at Certificate, enter \$8,235.	mount on your income tax re	atum by using Form T2201, Disa	bility Tax Credit	
7. Spouse or common-law partner amount – If you a whose net income for the year will be less than \$11,80 and his or her estimated net income for the year. If his she is Infirm), you cannot claim this amount. In all cas infirm, go to line 9.	9 (\$13,991 if he or she is In or her net income for the ve	firm), enter the difference between will be \$11,809 or more (\$13.	en this amount	-
8. Amount for an eligible dependent — If you do not who lives with you and whose net income for the year the Canada caregiver amount for children under agher estimated net income. If his or her net income for transcript	will be less than \$11,809 (\$' ge 18 for this dependant), ( he vear will be \$11,809 or m	13,991 if he or she is Infirm and enter the difference between this nore (\$13,991 or more if he or sh	you cannot claim amount and his or	
Canada caregiver amount for eligible dependant an infirm eligible dependant (aged 18 or older) or an i \$23,391 or less, get Form TD1-WS and fill in the appro-	nfirm spouse or common-la	v partner – If, at any time in the w partner whose net income for	year, you support the year will be	
10. Canada caregiver amount for dependent(s) age 18 or older (other than the spouse or common-law phave claimed an amount for if his or her net income anter \$6,986. If his or her net income for the year will be form TD1-WS and fill in the appropriate section. You are sharing this amount with another caregiver who su section.	partner or eligible dependa e were under \$13,991) who be between \$16,405 and \$2; can claim this amount for mo	ant you claimed an amount for ose net income for the year will b 3,391 and you want to calculate one than one infirm decendant ar	on line 9, or could e \$16,405 or less, a partial claim, get	
11. Amounts transferred from your spouse or com- his or her age amount, pension income amount, tuition amount.	mon-law partner – If your s amount, or disability amount	pouse or common-law partner w nt on his or her income tax return	rill not use all of n, enter the unused	
12. Amounts transferred from a dependent – If your income tax return, enter the unused amount. If your or use all of his or her tuition amount on his or her income	your spouse's or common-la	aw partner's dependent child or	n his or her grandchild will not	
13. TOTAL CLAIM AMOUNT - Add lines 1 to 12. Your employer or payer will use this amount to determine	ine the amount of your tax d	eductions.		11,889