ELCIC Group Services Inc.805-177 Lombard Ave. Winnipeg, MB R3B 0W5 **T:** 204-984-9181 **F:** 204-984-9179 **Toll Free:** 1-877-ELCICGS (352-4247) **Email:** info@elcicgsi.ca **Website:** www.elcicgsi.ca

Employee Voluntary Pension Contributions

If your employees would like voluntary pension contributions to be included on your monthly invoice please complete this form.

Employer I	nformation									
Employer Name:						Employer Number:				
Employer Address:	Address		City & Province				Posta	Postal Code		
Employer Telephone:		E-mail Address:								
Employee I	information:									
Employee Name	2:	Employee Certificate			icate Nur	nber:				
Employee Voluntary Pension Contributions Dollar Amount:				, , ,		1				
Start Date of Co	ontributions DD/MM/YY:		End Date of Contribu DD/MM/YY:			ns				
receive, by pays with CRA's guid	roll deduction, a total yea	to Pension- The ELCIC Pensionly contribution of 18% of a RSP contributions. It is each	in employee's	cordance with the n salary. Voluntary e	employee	contribution	ns must als	so be in	accordance	
Authoriza	ition									
As the Employer	r and Employee, I authori	ize ELCIC Group Services In	c. to add volu	ntary pension contri	ibutions t	o the month	nly invoice	·.		
The Employer a contribution end		this authorization at any tir	me, subject to	providing notice of	30 days.	Please con	nplete this	form in	idicating	
Signature of Employer					Date					
Name (Pleas	se Print)					Day	Мог	1th	Year	
Signature of	Employee				Date					
Name (Please Print)						Day	Moi	nth	Year	
Haine (Ficas	- · · · · · · · · · · · · · · · · · · ·									