



ADDITIONAL INCOME TAX DEDUCTION

Pension and Group Insurance Administration Division
Human Resource Secretariat - Executive Council
P.O. Box 8700, St. John's, NL, Canada A1B 4J6
Fax (709) 729-6790

NAME: _____

ADDRESS: _____

TELEPHONE: ____ (____) _____

SOCIAL INSURANCE NUMBER: _____

Please deduct an amount of \$ _____ Income Tax from each of my Government of Newfoundland and Labrador pension cheques. **This is in addition to the amount of Income Tax already being deducted.**

SIGNATURE: _____

DATE: _____

The personal information collected or provided as part of the application process will only be used for purposes relating to the operation of the relevant pension programs and for statistical reports. All information will be kept confidential and will not be disclosed to third parties without your consent unless required or authorized by law. If you have any questions or concerns please contact the Pensions Administration Division.