

Stelco Inc. - Lake Erie Works

U.S.W. District Six CIBC Savings Plan Voluntary R.R.S.P. Deduction Authorization

Employee Name: _____

Employee ID: _____

**PLEASE FILL IN ALL OPTIONS
(THIS FORM REPLACES ALL PREVIOUS FORMS IN THEIR ENTIRETY)**

P.S.P. Payments - Quarterly

ALL (100% to RRSPs)
Nothing (0% to RRSPs)

P.S.P. Payment - Annual

ALL (100% to RRSPs)
Nothing (0% to RRSPs)

Fund Payments

ALL (100% to RRSPs)
Nothing (0% to RRSPs)

S.P.P. Payments

ALL (100% to RRSPs)
Nothing (0% to RRSPs)

Bi-Weekly Pays

\$ _____ (Put an amount or \$0)
No change

***Note: It is your responsibility to be aware of your RRSP contribution limit.
This information can be found on your most recent Notice of Assessment from the CRA.***

I authorize the payroll department to make the deductions as indicated above:

Date: _____

Employee Signature: _____

Please return this form to:
Sara Vacar - Payroll
Email: Sara.Vacar@stelco.com
Revision Date: March 2023