

Stelco Inc. - Pickle Line

Manulife Savings Plan - Plan # RS103569
Voluntary TFSA Deduction Authorization

Employee Name: _____

Employee ID: _____

Note: It is your responsibility to be aware of your TFSA contribution limit.

Note: If you were hired on or after July 7, 2011 your TFSA plan number is different than your RRSP plan number.

Bi-Weekly Pays

\$ _____
No change

(Put an amount or \$0)

Bi-Weekly Pay - One Time

\$ _____

Pay Period End Date: _____

I have enrolled for a TFSA with Manulife - Plan # RS103569

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: June 2023