

**REMITTANCE FORM for Contributions to EMCC**

Registered Retirement Savings Plan (RSP)

Registered Pension Plan (RPP)

Tax-free Savings Account (TFSA)

Church Name:

For the Month(s) of:

Please make Cheque Payable to: Evangelical Missionary Church of Canada

Send to: 202 - 3907 3A Street NE, Calgary, AB T2E 6S7

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EMPLOYEE NAME** |  | **EMPLOYEE** **RSP**(All Employees) |  | **CHURCH****RPP**(Licensed/Ordained Pastors) |  | **CHURCH****RSP**(Non-credentialed Employees) |  | **EMPLOYEE** **TFSA**(All Employees) |
|   |  |  $ |  | $ |  |  $ |  |  $ |
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**TOTAL REMITTANCE:** $

**SALARY CHANGES** (Including Housing) should be reported promptly as LIFE & DISABILITY are based on salary.

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| --- | --- | --- | --- | --- | --- | --- |
| **EMPLOYEE NAME** |  | **Previous Salary**  |  | **New Salary**  |  | **Date of Change** |
|   |  |   |  |   |  |   |
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