

REQUEST OR CHANGE ADDITIONAL INCOME TAX

Changes to your income tax deductions can be made online by accessing your My*Pension* account or by completing this form and returning it to ATRF.

Pension Recipient Personal Information	ATRF ID/Pension Number		
(please print)			
	Name Last	First	Initial
		Date of birth	
	Previous Last Name (if applicable)	YYYY	MM DD
		()	
	Address Street	Telephone Home	
		()	
	City	Telephone Alternate	
	Province Postal Code	Personal E-mail Address	
Additional Tax Information	Check one:		
The amount of income tax that is	☐ Increase my additional income tax deductions by \$ / month		
withheld cannot be reduced below the calculated amount that ATRF is required to withhold in accordance with Canada Revenue Agency regulations.	☐ Decrease my additional income tax deductions by \$ / month		
	Effective:		
		Date the Change Will be Effective	
Signature		1	ı
This form must be signed by the pension recipient or a person with signing authority for the	Signature	Date	MM DD
pension recipient.			

The personal information collected through this form is for the purpose of administering benefits under the Teachers' and Independent School Teachers' Pension Plans and will be input into an automated system which generates content. This collection is authorized by sections 4(a) and 4(c) of the *Protection of Privacy Act* and section 25 of the *Teachers' Pension Plans Act*. For questions about the collection of personal information, contact legal@atrf.com or 1-800-661-9582 or by mail to 500 Barnett House, 11010 142 Street NW, Edmonton, AB, T5N 2R1.