

Dylan, I extend a very warm welcome to you. I hope you find your employment with the organization challenging and rewarding and look forward to a mutually successful future together.

Yours truly,

Colette Shwetz
HR Manager

I hereby accept the position I have been offered and agree to abide to all the terms and conditions outlined in the letter of employment.

D. Benjamin
Employee Signature

July 12, 2023
Date



2023 Ontario Personal Tax Credits Return

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your provincial tax deductions.

Fill out this form based on the best estimate of your circumstances.

Last name Bourgon	First name and initial(s) Dylan R	Date of birth (YYYY/MM/DD) 1999/09/11	Employee number
Address 270-5 Cedar W. Timmins ON	Postal code R1Y1W/6S18	For non-residents only Country of permanent residence	Social insurance number 5 810 810 2478

1. Basic personal amount – Every person employed in Ontario and every pensioner residing in Ontario can claim this amount. If you will have more than one employer or payer at the same time in 2023, see "More than one employer or payer at the same time" on page 2. **11,865**

2. Age amount – If you will be 65 or older on December 31, 2023, and your net income will be \$43,127 or less, enter \$5,793. You may enter a partial amount if your net income for the year will be between \$43,127 and \$81,747. To calculate a partial amount, fill out the line 2 section of Form TD1ON-WS, Worksheet for the 2023 Ontario Personal Tax Credits Return.

3. Pension income amount – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, Old Age Security, or Guaranteed Income Supplement payments), enter **whichever is less**: \$1,641 or your estimated annual pension.

4. Disability amount – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$9,586.

5. Spouse or common-law partner amount – Enter \$10,075 if you are supporting your spouse or common-law partner and **both** of the following conditions apply:

- Your spouse or common-law partner lives with you
- Your spouse or common-law partner's net income for the year will be \$1,007 or less

You may enter a partial amount if your spouse's or common-law partner's net income for the year will be between \$1,007 and \$11,082. To calculate a partial amount, fill out the line 5 section of Form TD1ON-WS.

6. Amount for an eligible dependant – Enter \$10,075 if you are supporting an eligible dependant and **all** of the following conditions apply:

- You do **not** have a spouse or common-law partner, or you **have** a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- The dependant is related to you and lives with you
- The dependant's net income for the year will be \$1,007 or less

You may enter a partial amount if the eligible dependant's net income for the year will be between \$1,007 and \$11,082. To calculate a partial amount, fill out the line 6 section of Form TD1ON-WS.

7. Ontario caregiver amount – You may claim this amount if you are supporting an eligible infirm dependant aged 18 or older who is your or your spouse's or common-law partner's:

- child or grandchild
- parent, grandparent, brother, sister, aunt, uncle, niece or nephew who is resident in Canada

To calculate this amount, fill out the line 7 section of Form TD1ON-WS.

8. Amounts transferred from your spouse or common-law partner – If your spouse or common-law partner will not use all of their age amount, pension income amount, or disability amount on their income tax and benefit return, enter the unused amount.

9. Amounts transferred from a dependant – If your dependant will not use all of their disability amount on their income tax and benefit return, enter the unused amount.

10. TOTAL CLAIM AMOUNT – Add lines 1 to 9.
Your employer or payer will use this amount to determine the amount of your provincial tax deductions. **11,865**

Please complete and submit this form to your employer to have your paycheque automatically deposited into your Scotiabank account.

To: Nishnawbe - Aski Legal Services
(INSERT NAME OF YOUR EMPLOYER)

Please accept these instructions to automatically deposit my paycheque into my bank account as outlined below:

Employee Information

EMPLOYEE NAME MISS KASHINA CASTONGUAY		TEL. NO. (705) 221-4410
ADDRESS 270 CEDAR ST N UNIT 5		
CITY TIMMINS	PROVINCE ON	POSTAL CODE P4N6J8
EMPLOYEE NUMBER (IF APPLICABLE)	DEPARTMENT (IF APPLICABLE)	

Employee Bank Account Information

INSTITUTION THE BANK OF NOVA SCOTIA	NUMBER 002	12 DIGIT ACCOUNT NUMBER	
		70292	0129283
Company Processing Instructions ▶		Enter as TRANSIT No.	Enter as ACCOUNT No.
BRANCH ADDRESS			

I am advising the Company to change my payroll direct deposit as indicated above. I understand that Scotiabank is not responsible for verifying these payments to my account. I will notify the Company promptly in writing if I close or make other changes to my account.

Authorized by:

Kashina Castonguay
SIGNATURE

2023-JUL-12
DATE

Please forward the completed request to the appropriate department in your company. Some employers may also ask you to attach a voided cheque. You may wish to keep a copy of the completed form for your records.