



## **Retirement and Annuity Income**

This form is to be completed by any person who is required to file RL-2 slips.

On or before the last day of February of the year following the year covered by the RL-2 slips (as indicated in the box marked "Année"), you must

- submit copy 1 of the RL-2 slips to Revenu Québec (unless you submit the RL-2 data on magnetic media or by Internet); also submit the RL-2 summary and, where source deductions were made, form RLZ-1.S-V (Summary of Source Deductions and Employer Contributions); and
- remit copies 2 and 3 of the slips to the beneficiaries.

If you wish to amend or cancel an RL-2 slip that you have already filed with Revenu Québec, refer to the section entitled "Amendment or Cancellation" in Chapter 2 of the *Guide to Filing the RL-2 Slip* (RL-2.G-V).

Identification							Year covered	
Name of the payer or iss								
riame or the payer or los	40.							
Identification number		Québec e	nterprise number (NEQ)	Tran	smitter number, if applicable			
Address	RS							
Address								
							Postal code	
Summary								
Number of RL-2 slips submitted to Revenu Québec:		On	On paper		On magnetic media Via the Internet		Via the Internet	
							T	
Α	В		С		D		E	
F	G		Н		I		J*	
K	L		M		0			
The amount ente	ered in box J of this fo	rm must be ca	rried to the appro	priate	space on your RLZ-1.S-	-V forn	n.	
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certify that all the	information provided of	on this form an	d in the attached d	ocumer	nts is accurate and com	plete.		
						1		
Signature of authorized person			Title or position Dat			_ L Area	code Telephone	