

**COMPLETION INSTRUCTIONS FOR PERSON REQUIRED TO PAY**

1. This form calculates the amount payable to the Maintenance Enforcement Program (MEP) under a support deduction notice, and provides MEP with contact and income information about the debtor.
2. Please ensure that all information is completed fully and accurately and that your payroll clerk completes and signs Part 3.
3. If the support deduction notice requires you to send a percentage of the debtor's gross pay, you must complete and return Part 1 and 3 of this form for each pay period.
4. Complete Part 2 only the first time you send MEP a payment.

5. If you have sent funds to MEP by Internet or telephone banking or direct deposit, you can fax this form to (780) 401-7575. If you are instead sending a cheque, this form can be mailed with the payment to Maintenance Enforcement Program, 7th Flr. J.E. Brownlee Building, 10365-97 Street, Edmonton, AB, T5J 3W7.
6. For additional copies of this form or more information, see [www.justice.gov.ab.ca/mep](http://www.justice.gov.ab.ca/mep). You may also contact MEP in Edmonton at (780) 422-5555 (dial 310-0000 first for toll-free access anywhere within Alberta). You will hear prompts to be routed to our Employer Line for faster service.



## Support Deduction Notice Calculation of Payment Worksheet

Debtor's Name

MEP Account No.

**Part 1** - To be completed each pay period if the support deduction notice asks you to send a percentage of the debtor's gross wages.

Employer/Company Name

Pay Period

From \_\_\_\_\_  
Day Month Year  
to \_\_\_\_\_  
Day Month Year

**GROSS WAGES OR OTHER INCOME FOR PAY PERIOD** • put amount in box A.

**A** \$

**AMOUNT IN BOX A MULTIPLIED BY** • put amount in box B.

40% **OR**  Other percentage directed by MEP, being \_\_\_\_\_%

**B** \$

**The amount in Box B is the amount payable to the Alberta Maintenance Enforcement Program**

**Part 2** - To be completed **ONLY** if this is the **first time** you are sending funds to MEP under the support deduction notice.

**Debtor's Information**

Birthdate Day /Month/Year

Social Insurance No.

Address

Phone Number

**How much is the debtor paid?** (check and complete all applicable boxes)

- a salary of \$ \_\_\_\_\_ gross per \_\_\_\_\_  
week / two weeks / month
- \$ \_\_\_\_\_ per hour
- varies - the debtor receives commissions

**The debtor may also receive:**

- vacation pay  overtime pay
- bonuses or incentive pay
- other (explain) \_\_\_\_\_

**When is the debtor paid?**

- monthly on the \_\_\_\_\_ day of each month  every two weeks on \_\_\_\_\_ day
- monthly, with a mid-month advance of \$ \_\_\_\_\_  weekly on \_\_\_\_\_ day
- other (explain) \_\_\_\_\_

**Part 3** - To be completed **ANY TIME** Part 1 or 2 is required.

I, \_\_\_\_\_, certify that the information and calculations contained on this worksheet are accurate and complete to the best of my knowledge. The required payment to MEP has been

- paid by direct deposit  paid by Internet banking  paid by telephone banking  enclosed with this worksheet

Date

Signature

**Note: Debtors may contact MEP to make payment arrangements. If these arrangements result in an adjustment in the amount you are required to send under the support deduction notice, MEP will notify you in writing.**