SELF-EMPLOYED PERSON CONTRIBUTION REMITTANCE FORM  For:	D 198 COLUMN TO THE COLUMN TO	NATIONAL INSURANCE SERVICES	
Name:	SELF-EMP	LOYED PERSON CONTRIBUTION REMITTANCE FO	ORM
N.I.S. #: To The Director, National Insurance Services  With this statement is a cheque and/or cash for Income Category:  Total Contribution:  Signature  Receipt #: 20	For:	20	
To The Director, National Insurance Services  With this statement is a cheque and/or cash  for Income Category:  Total Contribution:  Signature  Receipt #: 20  Stamp	Name :		
With this statement is a cheque and/or cash  for Income Category:  Total Contribution:  Signature  Receipt #:20  Stamp	N.I.S. # :		
Income Category :     Total Contribution:     Signature     Receipt # :             Stamp	To The Director, Na	tional Insurance Services	
Total Contribution:   Signature	With this statemen	t is a cheque and/or cash	
Signature  Receipt #:	for	Income Category :	
		Total Contribution:	
	Signature		
Stamp		Receipt # :	
		20	
Cashier's Signature :	Stamp		
Cashier's Signature :			
Cashier's Signature :			
		Cashier's Signature :	

## NATIONAL INSURANCE SERVICES NATIONAL INSURANCE SERVICES SELF-EMPLOYED PERSON CONTRIBUTION REMITTANCE FORM N.I.S. #:\_\_\_\_\_ To The Director, National Insurance Services With this statement is a cheque and/or cash for \_\_\_\_\_\_ Income Category :\_\_\_\_\_ Total Contribution:\_\_\_\_\_ Signature Receipt # :\_\_\_\_\_ \_\_\_\_\_20\_\_\_

Cashier's Signature :\_\_\_\_\_