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FEE PAYMENT FORM - FOR SPONSORS OF PARENTS AND GRANDPARENTS

This form must accompany your sponsorship application.

Applications submitted with incorrect payments will be returned.

CALCULATE YOUR FEES: Calculate the applicable fees by referring to the table below.

	Processing Fee		persons	Amount per person	Amount due \$ CAD	
	Sponsor		1	x \$ 75		
	Principal applicant		1	x \$ 475		
	Spouse or common-law partner			x \$ 550		
	Dependent child under 19, unmarried and not in a comn relationship	non-law		x \$ 150		
	Dependent child aged 19 or older who has been unable to be financially self-supporting since before the age of 19 due to a physical or mental condition			x \$ 150		
				Total paym	ent	
	Do not include the Right of Permanent Residence Fee in	n your payme	ent at this stage.	CIC will request the fee at a late	er date in the process.	
ME	THOD OF PAYMENT OPTIONS					
	Certified cheque* (enclosed and complete section A belo *Certified cheques must be made payable to the RECEIVER GENERAL	OR	Credit card (complete section	is A and B below)		
SEC	TION A - PAYER INFORMATION					
Name of payer						
Surname			Given name(s)			
Nor	as of anonaar if different from nover					
Name of sponsor, if different from payer Surname			Given name(s)			
Name of principal applicant			1			
Surname			Given name(s)			
Ada						
Address of payer No. and Street				1	Apt./Unit	
					Apt./Onit	
City Province				Postal code		
SEC	TION B - CREDIT CARD PAYMENT AUTHORIZATIO	ON	1			
I agree to pay the Receiver General for Canada			(Please indicate the type of credit card with an "X")			
	CAD\$ on my credit card for fees related to an application		Credit card number			
for permanent residence.						
Note: The amount authorized must be equal to a single fee or a multiple of a single fee. Authorizations for other amounts are incorrect.			Expiry date of the		Year	
			Card security/card verification value code (CVV) A three (3) or four (4) digit number usually found on the			
			back or front of the credit card.			
Name of cardholder (please print)			Note: The conditioned must be valid for at least size (0) must be from the state of			

t) Note: The credit card must be valid for at least nine (9) months from the date of submission of your application. Otherwise your application will be returned.

Date (YYYY-MM-DD)

FOR OFFICIAL

Signature of cardholder

IMM 5770 (08-2014) E



►

Authorization number

