

Claim Form for General Compensation for Damages Caused by the Phoenix Pay System

Eligibility

This form is for **former employees/RCMP reservists** to make claims for general compensation for damages caused by the Phoenix pay system. Such claims are provided for in the following damages agreement.

- <u>The Phoenix Damages Agreement</u> (2019) the Agreement between the Treasury Board of Canada and the CPA Bargaining Agents and similar agreements signed with separate agencies
- <u>The Phoenix Damages Agreement</u> (2020) the Agreement between the Treasury Board of Canada and the Public Service Alliance of Canada (PSAC)) and similar agreements signed with separate agencies
- Memorandum of agreement Catch-up Clause (2021) the Agreement between the Treasury Board of Canada and the CPA Bargaining Agents with regard to the Catch-Up Clauses in the Phoenix Damages Agreement (2019) and similar agreements signed with separate agencies
- The Agreement between the National Police Federation (NPF) and The Treasury Board of Canada (applies to RCMP reservists only)

The amount you receive will be calculated based on your eligibility for general compensation for:

- payments equivalent to up to 5 days of leave for general compensation (under the 2019 Agreement)
- lump-sum payments for general compensation (under the 2020 Agreement and NPF Agreement). Note: For RCMP reservists, fiscal Year 2019-2020 does not apply.
- catch-up payments to achieve parity between the payment equivalent to leave (under the Catch-up Agreement)
- Additional payments (top-up) to achieve parity between the payment equivalent to leave under 2019 Agreement with similar provisions under the 2020 Agreement
- payments for late implementation of the 2014 collective agreements (under the 2020 and Catch-up Agreements)

You will receive a breakdown of your compensation payment once your claim has been evaluated. This claim form is for the purposes of applying for damages under the aforementioned Agreements and is governed by those Agreements' terms and conditions.

Claims on behalf of the estate of a deceased employee or a former employee who is not capable of making a claim themselves may be filed by a legal representative. Documentation verifying eligibility to act on a claimant's or estate's behalf must be provided.

Important information for claimants

- In order to be eligible to file a claim, you must have worked as a federal public servant at least one day in fiscal year 2016/2017, 2017/2018, 2018/2019 and/or 2019/2020 in a position that is covered by at least one of the damages Agreements. Note: For RCMP reservists, the agreement covers damages for reservists who were paid out of the Phoenix Pay System in fiscal years 2016/17, 2017/18 and/or 2018/19 Therefore, fiscal year 2019-2020 does not apply.
- Where compensation is based on salary, claim payments will be calculated using the last rate
 of pay shown in the Phoenix pay system at the time your claim is processed. Therefore, if you
 have any outstanding pay increases that are owed to you, you may wish to wait until the
 increases have been processed in Phoenix and paid out before submitting your claim.
 This only applies to claims submitted by individuals covered under the 2019 Agreement.
- These claims will be paid through the Government of Canada pay system so you should ensure your banking and mailing address information is accurate in that system. If necessary, you can update this information by contacting your last department's human resources team or the <u>Client Contact Centre</u> if your organization was serviced by the Pay Centre. For RCMP reservist, you can provide your updated information to RCMP Compensation Services at RCMP.PhoenixComm-PhenixComm.GRC@rcmp-grc.gc.ca. If you are unsure whether your organization was serviced by the pay centre, check the list of Departments and agencies served by the Public Service Pay Centre.
- Compensation from this claim is taxable, as confirmed by the Canada Revenue Agency. Tax slips will to be issued to you at the end of the tax year.
- Inaccurate information provided in this form may delay the processing of your claim.

Privacy notice statement

The personal information requested in this form is collected under the authority of the *Financial Administration Act*. The information submitted via this form will be combined with pay information in a database of pay information held within the Treasury Board of Canada Secretariat (TBS) and with the Government of Canada pay system in order to:

- · determine eligibility
- assess your payment amount in accordance with the damages Agreements

Refusal to provide the requested personal information will result in TBS not being able to process the claim.

The personal information you provide is being collected by the TBS Claims Office and will be protected, used and disclosed in accordance with the *Privacy Act* and as described in Personal Information Bank TBS PCE 742 (Claims and Compensation for damages related to the Phoenix Pay System) and Personal Information Bank PSE 904 (Pay and Benefits). Your information may also be used or disclosed for financial reporting and program evaluation. Under the *Privacy Act*, individuals have a right to access and correct their personal information. If you wish to avail yourself of these rights or require clarification about this privacy notice statement, please contact the TBS Access to Information and Privacy Coordinator by email at atip.aiprp@tbs-sct.gc.ca. If you are not satisfied with the response to your privacy concern, you may wish to communicate with the Office of the Privacy Commissioner by telephone at 1-800-282-1376 or by email at info@priv.gc.ca.

I certify that I have read and understood this privacy notice statement

Claim Form

Please select the status that represents you:

A former employee making a claim

A legal representative making a claim on behalf of a former employee or the estate of a deceased employee (documentation verifying eligibility to act on behalf of the employee or the estate must be provided to the Claims Office with your claim form)

Note that an asterisk (*) denotes a mandatory field

Claimant information

For administrative use only

*Personal Record Identifier (PRI):

Claim No.:

Note: Your PRI is available on your pay stub and on your Pension and Insurance Benefits Statement. The Client Contact Centre can assist in retrieving your PRI. Call 1-855-686-4729 (in Canada or the United States) or 1-506-424-4330 (outside Canada and the United States) for more information. For RCMP reservist, contact RCMP Compensation Services at RCMP.PhoenixComm-PhenixComm.GRC@rcmp-grc.gc.ca.

*Surname:
*Given name:
*Date of Birth (yyyy-mm-dd):
*Address (street number and name, unit number)

*Telephone number:

Email address:

Note: if no email is provided, correspondence will take place by mail/courier, which could result in delays

*Current or last organization worked:

*City, province/territory, postal code:

Current or last occupational group and bargaining agent (union):

Note: To determine bargaining agent: https://www.canada.ca/en/treasury-board-secretariat/services/collective-agreements/occupational-groups-bargaining-agent-representation.html

Have you filed a grievance for damages due to the Phoenix pay system or regarding claims for expenses and financial losses due to Phoenix?

Yes No

If yes, please provide the grievance reference number or enter "unknown" if you do not remember it:

Note: Data is collected to ensure that grievances are processed at the departmental level, pursuant to the Phoenix Damages Agreement. You may file a claim even if you have filed a grievance.

Claim

I claim any eligible payment related to integrated general compensation as described in *any* of the following:

- The Phoenix Damages Agreement (2019) the Agreement between the Treasury Board of Canada and the CPA Bargaining Agents and similar agreements signed with separate agencies
- The Phoenix Damages Agreement (2020) the Agreement between the Treasury Board of Canada and the Public Service Alliance of Canada (PSAC)) and similar agreements signed with separate agencies
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I agree to this claim

Certification of claim

I certify that the information provided in this form is true and complete.

I acknowledge that if I, another person on my behalf, or another person who is also a federal public servant, has previously received compensation respecting the same pay issues or damages reported on this form, part or all of that compensation may be deducted from the present claim.

Suspected fraudulent claims may be referred to the appropriate authorities within your organization, including its Departmental Security Officer and/or its Chief Financial Officer, for further examination in accordance with pertinent legislation.

Date (yyyy-mm-dd):

Claimant's signature: