

REVENU  
QUÉBEC



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FOR ALL.



# REGISTER AND STATEMENT OF TIPS

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Complete this form if you are a restaurant, bar or hotel employee and you are required to report the tips you received directly or indirectly to your employer in writing at the end of every pay period.

Reporting your tips guarantees that you benefit from social programs such as Employment Insurance and Québec parental insurance based on your total income (wages plus tips).

## Identification

### Employee

Last name

First name

### Employer

Employer's name

Address of establishment

Year

# Tax measures concerning tips

## Your responsibilities

If you work in a regulated establishment, you must report your tips to your employer by giving them Part 2 of the *Register and Statement of Tips* (form TP-1019.4-V) or an equivalent document at the end of every pay period.

“Regulated establishment” means:

- an establishment in Québec that is laid out specifically so that lodging and/or food for consumption on the premises can be provided on a regular basis in return for payment;
- an establishment in Québec where alcoholic beverages are sold for consumption on the premises;
- a train or vessel used by a business carried on entirely or almost entirely (90% or more) in Québec and on which meals or beverages are served; or
- a place situated in Québec where meals for consumption elsewhere than on the premises are sold and delivered or served by your personnel in the context of carrying on your business.

The following **are not** regulated establishments:

- an establishment in Québec that provides mainly lodging and/or food in return for payment on a weekly, monthly or annual basis;
- an establishment operated by an educational institution, a hospital institution, a shelter for needy persons or victims of violence, or any similar establishment;
- an establishment operated by a charity or similar organization where food and beverages are occasionally served;
- a cafeteria; and
- a fast-food outlet where employees do not ordinarily receive tips from the majority of customers.

You **do not have to report** tips you received as mandatory service charges paid by customers.

## **Your employer's responsibilities**

At the end of every pay period, your employer must:

- accept the Statement of Tips (Part 2 of form TP-1019.4-V) or an equivalent document that you give them;
- allocate an amount of tips to you (if applicable); and
- add your tips (the net tips you reported, those your employer allocated to you and those that represent mandatory service charges paid by customers) to your base wages to calculate your source deductions.

At the end of the year, your employer must give you an RL-1 slip that includes your tips.

## **Calculating tips allocated to you by your employer**

Your employer must allocate to you an amount equal to the difference between 8% of your tippable sales and the amount of your actual tips.

However, this is not required if, for example, you are a valet, door attendant, porter, delivery person or cloakroom attendant.

## **Tips of less than 8%**

If your tips are often less than 8% of your tippable sales, your employer can request a reduction in the allocation rate. While it is generally the employer's responsibility to make the request, if they refuse to do so, employees can file it under certain conditions and provided a majority of the establishment's employees or a majority of the employees who make a particular category of sales (such as bartenders) agree that the 8% rate is too high.

To learn more or file a request, see form TP-42.15-V, *Request for a Reduction in the Allocation Rate*.

# Instructions

## Part 1 – Register of Tips

### Column A

Enter your total tippable sales for the day. Include:

- sales (before taxes) where customers left you a tip in cash during the day (regardless of whether the sale was paid in cash or with a credit or debit card);
- sales (before taxes) where customers left you a tip by credit or debit card which you received during the day (for example, a previous sale for which the credit card issuer paid your employer the related amounts during the day); and
- sales (before taxes) where customers did not leave you a tip even though it would have been customary in Québec for them to do so.

**Do not include** sales of food and beverages for consumption elsewhere than on the premises (for example, sales in a food court or deliveries).

If you are the head server in a group of employees waiting on the same table, you **must include** the total tippable sale for the table. That said, we will accept any method of breaking down the sale that is acceptable to us in the circumstances.

### Column B

Enter the total tips you received during the day on the sales in column A. Include:

- tips in cash you received from customers on tippable sales made during the day; and
- tips customers left you by credit or debit card which you received during the day (for example, on a previous tippable sale for which the credit card issuer paid your employer the related amounts during the day).

### Column C

Enter the total of the other tips you received during the day, such as tips for your work as a valet, door attendant, porter, delivery person or cloakroom attendant. **Do not include any tips received under a tip-sharing arrangement.**

### Column D

Enter the total tips you **received** under a tip-sharing arrangement. Include tips received from other employees and from your employer, if the other employees give your employer their tips to be redistributed.

### Column E

Enter the total tips you **remitted** to other employees or to your employer (for redistribution) under a tip-sharing arrangement.

### Column F

Enter the result of the following calculation: add columns B, C and D, and then **subtract** column E.

### “Amounts carried forward (if applicable)” line

If you are **paid every week**, leave this line blank.

If you are **paid every two weeks**, enter the total of each column for the first week of the pay period on this line. Enter the totals for both weeks of the pay period on the “Total” line.

## **Part 2 – Statement of Tips**

At the end of every pay period, enter the total from columns B, C, D and E of Part 1 on the corresponding lines of Part 2, sign the statement and give it to your employer.

If you are paid every two weeks, do not complete Part 2 for the first week. Only give it to your employer at the end of the second week.

Your employer will use the amount on line 1 to calculate the tips to allocate to you (if applicable). This amount and the amount on line 5 will be added to your base wages to calculate your source deductions.

The net tips you report on line 5 and any tips your employer allocates to you will appear on your pay slip.

# Register of Tips

Date M M D D		Tippable sales A		Tips on sales included in column A B		Tips not included in columns B and D C		Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F			
								Tips received from other employees D				Tips remitted to other employees E	
04	10	660	00	106	20	15	10			16	00	105	30
04	12	200	00	38	50			5	25			43	75
04	14	518	00	76	80					10	50	66	30
04	15	598	00	76	20							76	20
04	16	810	00	119	30			10	50	20	30	109	50
Amounts carried forward (if applicable)													
<b>Total</b>		<b>2.786</b>	<b>00</b>	<b>417</b>	<b>00</b>	<b>15</b>	<b>10</b>	<b>15</b>	<b>75</b>	<b>46</b>	<b>80</b>	<b>401</b>	<b>05</b>

Part 1 – Keep this part for your records.

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TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

DAIGLE GUILLAUME

Pay period

from 20200410 to 20200416  
Y Y Y Y M M D D Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales (column B)	1	417	00
Other tips received (column C) +	2	15	10
Tips received from other employees (column D) +	3	15	75
Tips remitted to other employees (column E) -	4	46	80
Net tips (line 1 + line 2 + line 3 - line 4) =	5	401	05

Guillaume Daigle

Employee's signature

20200421  
Y Y Y Y M M D D

waiter

Position

99999999  
Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name  
 \_\_\_\_\_

Pay period  
 from \_\_\_\_\_ to \_\_\_\_\_  
Y Y Y Y M M D D      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
Net tips	(line 1 + line 2 + line 3 - line 4) =	5		

Employee's signature  
 \_\_\_\_\_  
Y Y Y Y M M D D

Position  
 \_\_\_\_\_  
 Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips received from other employees D	Tips remitted to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) –	4		
Net tips	(line 1 + line 2 + line 3 – line 4) =	5		

Employee's signature  Position

Social insurance number

Y Y Y Y M M D D

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
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Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.

REVENU  
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TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
Net tips	(line 1 + line 2 + line 3 - line 4) =	5		

Employee's signature

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Position

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Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
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Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.

**REVENU**  
**QUÉBEC**



TP-1019.4-V (2020-01)

# Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D      Y Y Y Y M M D D

## Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
Net tips	(line 1 + line 2 + line 3 - line 4) =	5		

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.





# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips received from other employees D	Tips remitted to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D                      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1	<input type="text"/>	<input type="text"/>
Other tips received	(column C) +	2	<input type="text"/>	<input type="text"/>
Tips received from other employees	(column D) +	3	<input type="text"/>	<input type="text"/>
Tips remitted to other employees	(column E) –	4	<input type="text"/>	<input type="text"/>
Net tips	(line 1 + line 2 + line 3 – line 4) =	5	<input type="text"/>	<input type="text"/>

Employee's signature:

Position:

Social insurance number:

Y Y Y Y M M D D

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
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Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name \_\_\_\_\_

Pay period  
from \_\_\_\_\_ to \_\_\_\_\_  
Y Y Y Y M M D D Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales (column B)	1	
Other tips received (column C) +	2	
Tips received from other employees (column D) +	3	
Tips remitted to other employees (column E) –	4	
Net tips (line 1 + line 2 + line 3 – line 4) =	5	

\_\_\_\_\_  
Employee's signature  
Y Y Y Y M M D D

\_\_\_\_\_  
Position  
Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

# Statement of Tips

Employee's last name and first name  
 \_\_\_\_\_

Pay period  
 from \_\_\_\_\_ to \_\_\_\_\_  
Y Y Y Y M M D D      Y Y Y Y M M D D

## Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) –	4		
Net tips	(line 1 + line 2 + line 3 – line 4) =	5		

Employee's signature  
 \_\_\_\_\_  
Y Y Y Y M M D D

Position  
 \_\_\_\_\_  
 Social insurance number

Part 2 – Give this part to your employer.



## Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
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Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D                      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales (column B)

1		
---	--	--

Other tips received (column C) +

2		
---	--	--

Tips received from other employees (column D) +

3		
---	--	--

Tips remitted to other employees (column E) –

4		
---	--	--

Net tips (line 1 + line 2 + line 3 – line 4) =

5		
---	--	--

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.





## Register of Tips

Date <small>M M D D</small>	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
<small>Amounts carried forward (if applicable)</small>						
<b>Total</b>						

**Part 1 – Keep this part for your records.**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D	

 to 

Y	Y	Y	Y	M	M	D	D	

### Employee's statement

Tips on tippable sales (column B)	1	
Other tips received (column C) +	2	
Tips received from other employees (column D) +	3	
Tips remitted to other employees (column E) –	4	
<b>Net tips (line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>	

Employee's signature	Position																																																				
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Y	Y	Y	Y	M	M	D	D																																														
Social insurance number																																																					

**Part 2 – Give this part to your employer.**



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1	<input type="text"/>	<input type="text"/>
Other tips received	(column C) +	2	<input type="text"/>	<input type="text"/>
Tips received from other employees	(column D) +	3	<input type="text"/>	<input type="text"/>
Tips remitted to other employees	(column E) -	4	<input type="text"/>	<input type="text"/>
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 - line 4) =</b>	<b>5</b>	<input type="text"/>	<input type="text"/>

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) –	4		
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>		

Employee's signature

Position

Social insurance number

Part 2 – Give this part to your employer.



## Register of Tips

Date	Tippable sales	Tips on sales included in column A	Tips not included in columns B and D	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E)
				Tips <b>received</b> from other employees	Tips <b>remitted</b> to other employees	
M M D D	A	B	C	D	E	F
Amounts carried forward (if applicable)						
<b>Total</b>						

**Part 1 – Keep this part for your records.**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D

 to 

Y	Y	Y	Y	M	M	D	D

### Employee's statement

Tips on tippable sales (column B)

1		
2		
3		
4		
5		

Other tips received (column C) +

Tips received from other employees (column D) +

Tips remitted to other employees (column E) –

Net tips (line 1 + line 2 + line 3 – line 4) =

Employee's signature

Y	Y	Y	Y	M	M	D	D

Position

Social insurance number							

**Part 2 – Give this part to your employer.**





# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



# Statement of Tips

Employee's last name and first name \_\_\_\_\_

Pay period  
from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

## Employee's statement

Tips on tippable sales (column B)	1		
Other tips received (column C) +	2		
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Net tips (line 1 + line 2 + line 3 – line 4) =	5		

\_\_\_\_\_  
Employee's signature

\_\_\_\_\_  
Position

Y	Y	Y	Y	M	M	D	D
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Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.

REVENU  
QUÉBEC



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D

Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales (column B)

1		
2		
3		
4		
5		

Other tips received (column C) +

Tips received from other employees (column D) +

Tips remitted to other employees (column E) –

Net tips (line 1 + line 2 + line 3 – line 4) =

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.



## Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

\_\_\_\_\_

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 - line 4) =</b>	<b>5</b>		

Employee's signature

\_\_\_\_\_

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Position

\_\_\_\_\_

Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to   
Y Y Y Y M M D D                      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1	<input style="width: 60px;" type="text"/>	<input style="width: 60px;" type="text"/>
Other tips received	(column C) +	2	<input style="width: 60px;" type="text"/>	<input style="width: 60px;" type="text"/>
Tips received from other employees	(column D) +	3	<input style="width: 60px;" type="text"/>	<input style="width: 60px;" type="text"/>
Tips remitted to other employees	(column E) -	4	<input style="width: 60px;" type="text"/>	<input style="width: 60px;" type="text"/>
Net tips	(line 1 + line 2 + line 3 - line 4) =	5	<input style="width: 60px;" type="text"/>	<input style="width: 60px;" type="text"/>

Employee's signature

Position

Social insurance number

Part 2 – Give this part to your employer.





# Register of Tips

Date M M D D	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



## Statement of Tips

Employee's last name and first name \_\_\_\_\_

Pay period from \_\_\_\_\_ to \_\_\_\_\_  
Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales (column B)	1	
Other tips received (column C) +	2	
Tips received from other employees (column D) +	3	
Tips remitted to other employees (column E) –	4	
<b>Net tips (line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>	

Employee's signature \_\_\_\_\_ Position \_\_\_\_\_  
Y Y Y Y M M D D Social insurance number \_\_\_\_\_

Part 2 – Give this part to your employer.







## Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips received from other employees D	Tips remitted to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

### Employee's statement

Tips on tippable sales	(column B)	1	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
Other tips received	(column C) +	2	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
Tips received from other employees	(column D) +	3	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
Tips remitted to other employees	(column E) -	4	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 - line 4) =</b>	<b>5</b>	<b><input style="width: 50px; height: 20px;" type="text"/></b>	

Employee's signature

  

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Position

  
 Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D                      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1	<input type="text"/>	<input type="text"/>
Other tips received	(column C) +	2	<input type="text"/>	<input type="text"/>
Tips received from other employees	(column D) +	3	<input type="text"/>	<input type="text"/>
Tips remitted to other employees	(column E) -	4	<input type="text"/>	<input type="text"/>
Net tips	(line 1 + line 2 + line 3 - line 4) =	5	<input type="text"/>	<input type="text"/>

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.





# Register of Tips

Date M M D D	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.

**REVENU**  
**QUÉBEC**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

\_\_\_\_\_

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
Net tips	(line 1 + line 2 + line 3 - line 4) =	5		

\_\_\_\_\_  
Employee's signature

\_\_\_\_\_  
Position

Y	Y	Y	Y	M	M	D	D
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Social insurance number

Part 2 – Give this part to your employer.







## Register of Tips

Date <small>M M D D</small>	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
<small>Amounts carried forward (if applicable)</small>						
<b>Total</b>						

**Part 1 – Keep this part for your records.**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

<small>Y</small>	<small>Y</small>	<small>Y</small>	<small>Y</small>	<small>M</small>	<small>M</small>	<small>D</small>	<small>D</small>		

 to 

<small>Y</small>	<small>Y</small>	<small>Y</small>	<small>Y</small>	<small>M</small>	<small>M</small>	<small>D</small>	<small>D</small>		

### Employee's statement

Tips on tippable sales (column B)	1		
Other tips received (column C) +	2		
Tips received from other employees (column D) +	3		
Tips remitted to other employees (column E) -	4		
<b>Net tips (line 1 + line 2 + line 3 - line 4) =</b>	<b>5</b>		

Employee's signature

Position

Social insurance number

**Part 2 – Give this part to your employer.**



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips received from other employees D	Tips remitted to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
Net tips	(line 1 + line 2 + line 3 - line 4) =	5		

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.





# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips received from other employees D	Tips remitted to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales (column B)

1	
---	--

Other tips received (column C) +

2	
---	--

Tips received from other employees (column D) +

3	
---	--

Tips remitted to other employees (column E) -

4	
---	--

Net tips (line 1 + line 2 + line 3 - line 4) =

5	
---	--

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name  
 \_\_\_\_\_

Pay period  
 from \_\_\_\_\_ to \_\_\_\_\_  
Y Y Y Y M M D D Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) –	4		
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>		

Employee's signature \_\_\_\_\_ Position \_\_\_\_\_  
Y Y Y Y M M D D Social insurance number

Part 2 – Give this part to your employer.



## Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

**Part 1 – Keep this part for your records.**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D		

 to 

Y	Y	Y	Y	M	M	D	D		

### Employee's statement

Tips on tippable sales (column B)	1		
Other tips received (column C) +	2		
Tips received from other employees (column D) +	3		
Tips remitted to other employees (column E) –	4		
Net tips (line 1 + line 2 + line 3 – line 4) =	5		

Employee's signature	Position																																								
<table style="display: inline-table; border-collapse: collapse;"><tr><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td></tr><tr><td style="text-align: center; font-size: 8px;">Y</td><td style="text-align: center; font-size: 8px;">Y</td><td style="text-align: center; font-size: 8px;">Y</td><td style="text-align: center; font-size: 8px;">Y</td><td style="text-align: center; font-size: 8px;">M</td><td style="text-align: center; font-size: 8px;">M</td><td style="text-align: center; font-size: 8px;">D</td><td style="text-align: center; font-size: 8px;">D</td><td></td><td></td></tr></table>											Y	Y	Y	Y	M	M	D	D			<table style="display: inline-table; border-collapse: collapse;"><tr><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td></tr><tr><td style="text-align: center; font-size: 8px;">Social insurance number</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											Social insurance number									
Y	Y	Y	Y	M	M	D	D																																		
Social insurance number																																									

**Part 2 – Give this part to your employer.**



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D

 to 

Y	Y	Y	Y	M	M	D	D

### Employee's statement

Tips on tippable sales	(column B)	1	
Other tips received	(column C) +	2	
Tips received from other employees	(column D) +	3	
Tips remitted to other employees	(column E) –	4	
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>	

Employee's signature

Y	Y	Y	Y	M	M	D	D

Position

Social insurance number							

Part 2 – Give this part to your employer.





# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
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Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to

Y Y Y Y M M D D                      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1	<input type="text"/>	<input type="text"/>
Other tips received	(column C) +	2	<input type="text"/>	<input type="text"/>
Tips received from other employees	(column D) +	3	<input type="text"/>	<input type="text"/>
Tips remitted to other employees	(column E) -	4	<input type="text"/>	<input type="text"/>
Net tips	(line 1 + line 2 + line 3 - line 4) =	5	<input type="text"/>	<input type="text"/>

Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						



# Statement of Tips

Employee's last name and first name \_\_\_\_\_

Pay period  
from \_\_\_\_\_ to \_\_\_\_\_  
Y Y Y Y M M D D      Y Y Y Y M M D D

## Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
Net tips	(line 1 + line 2 + line 3 - line 4) =	5		

Employee's signature \_\_\_\_\_  
\_\_\_\_\_

Position \_\_\_\_\_  
Social insurance number \_\_\_\_\_

Part 1 – Keep this part for your records.

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

# Statement of Tips

Employee's last name and first name

Pay period

from  to

## Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 - line 4) =</b>	<b>5</b>		

\_\_\_\_\_  
Employee's signature

\_\_\_\_\_  
Position



Part 2 – Give this part to your employer.



## Register of Tips

Date	Tippable sales	Tips on sales included in column A	Tips not included in columns B and D	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E)
				Tips received from other employees	Tips remitted to other employees	
M M D D	A	B	C	D	E	F
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M
M	M	D	D	

 to 

Y	Y	Y	Y	M
M	M	D	D	

### Employee's statement

Tips on tippable sales (column B)

1		
2		
3		
4		
5		

Other tips received (column C) +

Tips received from other employees (column D) +

Tips remitted to other employees (column E) –

Net tips (line 1 + line 2 + line 3 – line 4) =

Employee's signature

Y	Y	Y	Y	M
M	M	D	D	

Position


Social insurance number

Part 2 – Give this part to your employer.





## Register of Tips

Date M M D D		Tippable sales A		Tips on sales included in column A B		Tips not included in columns B and D C		Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F	
								Tips received from other employees D			
Amounts carried forward (if applicable)											
<b>Total</b>											

**Part 1 – Keep this part for your records.**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

### Employee's statement

Tips on tippable sales (column B)	1	
Other tips received (column C) +	2	
Tips received from other employees (column D) +	3	
Tips remitted to other employees (column E) –	4	
<b>Net tips (line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>	

Employee's signature

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Position

--	--	--	--	--	--	--	--

Social insurance number

**Part 2 – Give this part to your employer.**







# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
				Tips received from other employees D	Tips remitted to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to   
Y Y Y Y M M D D                      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) –	4		
Net tips	(line 1 + line 2 + line 3 – line 4) =	5		

<p>Employee's signature</p> <p><input style="width: 150px;" type="text"/></p> <p><small>Y Y Y Y M M D D</small></p>	<p>Position</p> <p><input style="width: 150px;" type="text"/></p> <p>Social insurance number</p>
---	--

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D - E) F
				Tips <b>received</b> from other employees D	Tips <b>remitted</b> to other employees E	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.

REVENU  
QUÉBEC



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to   
Y Y Y Y M M D D      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
Tips received from other employees	(column D) +	3		
Tips remitted to other employees	(column E) -	4		
<b>Net tips</b>	<b>(line 1 + line 2 + line 3 - line 4) =</b>	<b>5</b>		

Employee's signature

Position

Social insurance number

Part 2 – Give this part to your employer.



























## Register of Tips

Date M M D D	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) <b>F</b>
				Tips <b>received</b> from other employees <b>D</b>	Tips <b>remitted</b> to other employees <b>E</b>	
Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.

**REVENU**  
**QUÉBEC**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | to   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Y Y Y Y M M D D                      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales (column B)	1		
Other tips received (column C) +	2		
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Employee's signature

Y Y Y Y M M D D

Position

Social insurance number

Part 2 – Give this part to your employer.



# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
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Amounts carried forward (if applicable)						
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Part 1 – Keep this part for your records.

REVENU  
QUÉBEC



TP-1019.4-V (2020-01)

# Statement of Tips

Employee's last name and first name

\_\_\_\_\_

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

## Employee's statement

Tips on tippable sales	(column B)	1		
Other tips received	(column C) +	2		
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<b>Net tips</b>	<b>(line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>		

Employee's signature

\_\_\_\_\_

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Position

\_\_\_\_\_

Social insurance number

Part 2 – Give this part to your employer.



## Register of Tips

Date M M D D	Tippable sales <b>A</b>	Tips on sales included in column A <b>B</b>	Tips not included in columns B and D <b>C</b>	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) <b>F</b>
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Amounts carried forward (if applicable)						
<b>Total</b>						

**Part 1 – Keep this part for your records.**



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name \_\_\_\_\_

Pay period  
 from           to

### Employee's statement

Tips on tippable sales (column B)	1	
Other tips received (column C) +	2	
Tips received from other employees (column D) +	3	
Tips remitted to other employees (column E) –	4	
<b>Net tips (line 1 + line 2 + line 3 – line 4) =</b>	<b>5</b>	

Employee's signature _____	Position _____
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Y Y Y Y M M D D	Social insurance number

**Part 2 – Give this part to your employer.**





# Register of Tips

Date M M D D	Tippable sales A	Tips on sales included in column A B	Tips not included in columns B and D C	Tip-sharing arrangement		Net tips reported to your employer (B + C + D – E) F
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Amounts carried forward (if applicable)						
<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

### Employee's statement

Tips on tippable sales (column B)

1		
2		
3		
4		
5		

Other tips received (column C) +

Tips received from other employees (column D) +

Tips remitted to other employees (column E) –

Net tips (line 1 + line 2 + line 3 – line 4) =

Employee's signature

Position



Social insurance number

Part 2 – Give this part to your employer.



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Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

 to 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

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Tips on tippable sales	(column B)	1		
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Social insurance number

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Part 1 – Keep this part for your records.

REVENU  
QUÉBEC



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from 

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

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Y	Y	Y	Y	M	M	D	D
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Position

Social insurance number

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<b>Total</b>						

Part 1 – Keep this part for your records.



TP-1019.4-V (2020-01)

## Statement of Tips

Employee's last name and first name

Pay period

from  to   
Y Y Y Y M M D D      Y Y Y Y M M D D

### Employee's statement

Tips on tippable sales	(column B)	1	<input type="text"/>	<input type="text"/>
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Tips remitted to other employees	(column E) –	4	<input type="text"/>	<input type="text"/>
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Employee's signature

  
Y Y Y Y M M D D

Position

  
 Social insurance number

Part 2 – Give this part to your employer.



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TP-1019.4-V (2020-01)

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Employee's last name and first name

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from  to

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Employee's signature

Position

Y Y Y Y M M D D

Social insurance number

Part 2 – Give this part to your employer.







# TO CONTACT US

TP-1019.4-V (2020-01)

## Online

revenuquebec.ca



## By telephone

**Individuals and individuals in business**

Monday to Friday: 8:30 a.m. to 4:30 p.m.

Québec City  
418 659-6299

Montréal  
514 864-6299

Elsewhere  
1 800 267-6299 (toll-free)

**Businesses, employers and agents for consumption taxes**

Monday, Tuesday, Thursday and Friday:  
8:30 a.m. to 4:30 p.m.  
Wednesday: 10:00 a.m. to 4:30 p.m.

Québec City  
418 659-4692

Montréal  
514 873-4692

Elsewhere  
1 800 567-4692 (toll-free)

**Complaints** – Bureau de la protection des droits de la clientèle

Monday to Friday:  
8:30 a.m. to 12:00 p.m. and 1:00 p.m. to 4:30 p.m.

Québec City  
418 652-6159

Elsewhere  
1 800 827-6159 (toll-free)

**Individuals with a hearing impairment**

Montréal  
514 873-4455

Elsewhere  
1 800 361-3795 (toll-free)

## By mail

**Individuals and individuals in business**

**Montréal, Laval, Laurentides, Lanaudière and Montérégie**  
Direction principale des relations avec la clientèle des particuliers  
Revenu Québec  
C. P. 3000, succursale Place-Desjardins  
Montréal (Québec) H5B 1A4

**Québec City and other regions**  
Direction principale des relations avec la clientèle des particuliers  
Revenu Québec  
3800, rue de Marly  
Québec (Québec) G1X 4A5

**Businesses, employers and agents for consumption taxes**

**Montréal, Laval, Laurentides, Lanaudière, Montérégie, Estrie and Outaouais**  
Direction principale des relations avec la clientèle des entreprises  
Revenu Québec  
C. P. 3000, succursale Place-Desjardins  
Montréal (Québec) H5B 1A4

**Québec City and other regions**  
Direction principale des relations avec la clientèle des entreprises  
Revenu Québec  
3800, rue de Marly  
Québec (Québec) G1X 4A5

**Complaints** – Bureau de la protection des droits de la clientèle

Revenu Québec  
3800, rue de Marly, secteur 3-4-5  
Québec (Québec) G1X 4A5