



First Name _____ Last Name _____

Manitoba Blue Cross Certificate Number _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Email _____

Phone Number _____ / _____

Home Cell

Financial Institution Name			
Financial Institution Information	Transit Number	Institution Number	Account Number

www.bankofcanada.com 1-877-303-3666
 888 3-CHEQUE (888 324 2743)

DATE

D	D	M	M	Y	Y	Y	Y
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PAY TO THE ORDER OF _____ \$ _____

_____ / 100 DOLLARS

Your Financial Institution
 200 Finance Avenue
 Your City, Your Province A1B 2C3

MEMO _____

⑈ 20 1111 123456789 ⑈

Transit Institution Account

Financial Institution