

Employer Information

WCB Account Name		WCB Account Number	
Mailing Address			
City	Province	Postal Code	Phone Number (Include Area Code)

Select a Payment Plan that Works for You

- 4 Equal Pre-Authorized Payments (25%, 25%, 25%, 25%)*
(March 31, June 30, Sept. 30, Dec. 30)
- One payment (100%)
(May 30) Accounts with worker coverage (Jan 31) Personal coverage only accounts

* Four equal payments are **only** available if you sign-up for pre-authorized debit or credit card payments.

Complete this form, along with the appropriate pre-authorized debit **or** credit card form and return them to the WCB. If you choose pre-authorized credit card you **must** return the forms via regular mail – fax or email will not be accepted.

Signature

Position

Date

Choose any one of the following options for sending in your form and VOID cheque or FI information:

Mail or deliver to:

WCB of Manitoba
333 Broadway
Winnipeg, MB R3C 4W3

Fax to:

WCB of Manitoba
Attention: Finance
1-204-954-4840

Scan and email to:

CollectionUnit@wcb.mb.ca

Pre-authorized credit card forms must be returned via regular mail – fax or email will not be accepted.