

# Group Benefits Materials Re-Order for Manulife Financial c/o Relizon Canada

Please fax completed form to Relizon at: 1-800-230-2520

OR mail to:

Relizon Canada, 80 Ambassador Drive, Mississauga ON L5T 2Y9

For form fulfillment inquiries only, please call Relizon at: 1-877-886-8853

For your convenience, many standard claim and administration forms are available on our Internet Web site at [www.manulife.ca/groupbenefits](http://www.manulife.ca/groupbenefits). Forms pre-filled with plan specific information are available on our Internet Secure Sites for groups with access to these sites.

## 1 Requestor information

|                      |                         |                               |                    |
|----------------------|-------------------------|-------------------------------|--------------------|
| Plan contract number | Division/account number | Plan sponsor                  |                    |
| Order requested by   |                         | Telephone number<br>(       ) | Date (dd/mmm/yyyy) |

## 2 Order information

\* **Important:** Please be sure to include form numbers to ensure your order can be processed quickly and accurately. Form numbers can be found on the front or back bottom right-hand corner of most forms.

\*\*To ensure you always have the most recent version of forms on-hand, we recommend that you order a maximum 6-month supply.

| Form number* | Description of form | Number of forms required** | Relizon Canada use only |           |
|--------------|---------------------|----------------------------|-------------------------|-----------|
|              |                     |                            | Enclosed                | To follow |
|              |                     |                            |                         |           |
|              |                     |                            |                         |           |
|              |                     |                            |                         |           |
|              |                     |                            |                         |           |
|              |                     |                            |                         |           |
|              |                     |                            |                         |           |
|              |                     |                            |                         |           |
|              |                     |                            |                         |           |

**REMINDER:** Do you need to order additional quantities of this Materials Re-Order form? (minimum order quantity: 10)  
This form is also available to be printed from [www.manulife.ca/groupbenefits](http://www.manulife.ca/groupbenefits).

### Benefits booklet

Please be sure to include the Class Code/Description when ordering booklets.

| Benefits Booklet Re-Order |                 |          | Manulife Financial use only |  |
|---------------------------|-----------------|----------|-----------------------------|--|
| Class Code/Description    | Number required | Enclosed | To follow                   |  |
|                           |                 |          |                             |  |
|                           |                 |          |                             |  |
|                           |                 |          |                             |  |

## 3 Shipping information

**Please print clearly - this is your shipping label**

|  |          |             |
|--|----------|-------------|
| Company name                             |          |             |
| Attention                                |          |             |
| Street address (cannot be just a PO Box) |          |             |
| City                                     | Province | Postal code |

### Important



**Please provide the complete address to which your order is to be delivered.**