

Available in alternative format upon request

Special Brokers Licensed Under *The Insurance Act* of Manitoba Monthly Activity Report

Date:S	submitted for Mon	th of:					
Brokers Name: Agency Name:							
Insured's Name/Address		Name/Address of Unlicensed Insurer	Type of Policy	Amount of Insurance	Premium Paid		
NO UNLICENSED ACTIVITY TO REPORT:							
Print Name	Signature	of Special Broker	Licence Number				

IMPORTANT: THIS FORM IS TO BE SIGNED <u>ONLY</u> BY THOSE INDIVIDUALS WHO HOLD A VALID MANITOBA SPECIAL BROKER'S LICENCE. FORMS MAY BE SUBMITTED ELECTRONICALLY TO: FIRBINSURANCE@GOV.MB.CA

The Manitoba Financial Services Agency
500-400 St. Mary Avenue, Winnipeg Manitoba R3L 4K5 Canada
204-945-2542 themfsa.ca

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