FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB Number: | 3235-0287 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address GLENN T MIC | | | 2. Issuer Name and Ticker or Trading Symbol DELUXE CORP [DLX] | (Check | ionship of Reporting Person(s) all applicable) | | |
|------------------------------------|---------|----------|---|-----------|--|---------------------|--|
| | | | | X | Director | 10% Owner | |
| | | | | | Officer (give title | Other (specify | |
| (Last) (First) (Middle) | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | below) | below) | |
| 042 C CHADV C | DOVE | | 04/27/2005 | | | | |
| 942 S. SHADY GROVE | | | | | | | |
| , | | | | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi | dual or Joint/Group Filing (Che | ck Applicable Line) | |
| MEMPHIS | TN | 38120 | | X | X Form filed by One Reporting Person | | |
| WILWII IIIO | 111 | 30120 | | | Form filed by More than One | Poporting Porson | |
| | | | | | Form filed by More than One | Reporting Ferson | |
| (City) | (State) | (Zip) | | | | | |
| | | | | <u> </u> | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Ye | 2A. Deemed Execution Date, if any (Month/Day/Year | 3. Transa Code (I 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Securities | Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|---|--|-------------------------------|---|--|---------------|-------|----------------------|------------------|---|
| | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (111501.4) |
| Common Stock | | | | | | | | 1,540 ⁽¹⁾ | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (Ir 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | Following Reported | Form: Direct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|---|--|---|---------------------------------|---|-------|-----|--|--------------------|--|-------------------------------------|---|------------------------------|---------------------|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Common Stock Option | \$39.63 | 04/27/2005 | | A | | 1,000 | | 04/27/2006 ⁽²⁾ | 04/27/2012 | Common Stock | 1,000 | \$0 | 1,000 | D | |

Explanation of Responses:

- Includes 667 shares of restricted stock.
- 2. Options vest in three equal installments on the three succeeding anniversary dates of the date of grant, provided the holder remains a director of the Company. Date entered reflects date on which first installment vests(ed).

Remarks:

Anthony C. Scarfone as Power of
Attorney for T. Michael Glenn

** Signature of Reporting Person

Date

04/29/2005

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.