

Settlement Checks Unlimited

E-Z ORDER FORM

Contact Name		Date	Phone No. ()							
E-mail Address:		Billing E-mail Address: <input type="checkbox"/> Same								
COMPANY NAME (AS IT APPEARS ON CHECK)										
Subtitle on Check										
Street Address			Suite, Floor, Room							
City		State	Zip Code							
Additional Lines on Check										
BANK NAME:		Bank Routing Number (9 digits):								
Bank 2nd Line:		Account Number:								
Bank 3rd Line:		Bank Fraction Number:								
LASER CHECKS: Software _____		COLORS		SIGN. LINES						
LC-811, Letter	Qty: _____ Starting #: _____	<input type="checkbox"/> Blue	<input type="checkbox"/> Green	<input type="checkbox"/> Tan	<input type="checkbox"/> Violet	<input type="checkbox"/> Maroon	<input type="checkbox"/> Gray	<input type="checkbox"/> Teal	<input type="checkbox"/> 1	<input type="checkbox"/> 2
LC-CVV, Top Ck	Qty: _____ Starting #: _____	<input type="checkbox"/> Blue	<input type="checkbox"/> Green	<input type="checkbox"/> Tan	<input type="checkbox"/> Violet	<input type="checkbox"/> Maroon	<input type="checkbox"/> Gray	<input type="checkbox"/> Teal	<input type="checkbox"/> 1	<input type="checkbox"/> 2
LC-814, Legal	Qty: _____ Starting #: _____	<input type="checkbox"/> Blue	<input type="checkbox"/> Green	<input type="checkbox"/> Tan	<input type="checkbox"/> Violet				<input type="checkbox"/> 1	<input type="checkbox"/> 2
COLLATING: <input type="checkbox"/> Standard Numbering - Low number on top, face up <input type="checkbox"/> Reverse Numbering										
DEPOSITS:		WINDOW ENVELOPES:		ENDORSEMENT STAMP: (Please Provide Copy Below)						
Laser Deposits Qty: _____	<input type="checkbox"/> Landtech <input type="checkbox"/> Quickbooks	<input type="checkbox"/> DW-84, Regular	_____							
(500 per box)	<input type="checkbox"/> Peachtree <input type="checkbox"/> _____	Qty: _____	_____							
Deposit Books Qty: _____	<input type="checkbox"/> 1-Part <input type="checkbox"/> 2-Part <input type="checkbox"/> 3-Part	<input type="checkbox"/> DW-84SS, Self Seal	_____							
(150 per book)		Qty: _____	_____							
RUSH PRINTING SERVICE: <input type="checkbox"/> Same Day-\$125.00 <input type="checkbox"/> 24 Hr.-\$75.00 <input type="checkbox"/> 48 Hr.-\$50.00 DATE REQUIRED: _____										
SHIPPING INFORMATION: <input type="checkbox"/> GROUND <input type="checkbox"/> RUSH (Additional \$40.00 for first 100 checks overnight)										
Deliver To: (Cannot Deliver to a P.O. Box, Signature Required for Delivery) <input type="checkbox"/> Same As Check										
Attention:										
Street Address			Suite, Floor, Room							
City		State	Zip Code							
PAYMENT INFORMATION:										
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover		3 or 4 digit Security Code		Expiration Date						
Credit Card Number:	_____			MONTH _____ YEAR _____						
BILLING ADDRESS: (CARDHOLDER)										
Print Cardholder's Name			Signature							
Street _____			Suite, Floor, Room _____							
City _____		State _____	Zip Code _____							

Sample check or bank spec sheet must be included with your order.

Thank you for your order.

SETTLEMENT CHECKS UNLIMITED • www.ineedchecks.com

Phone: **1-800-503-7949** • Fax: **1-888-483-3277**

Email: **sales.scu@outlook.com**