CHEQUE ORDER FORM - CUSTOM

Fill out all information and return by fax to 800.251.2108. PRINT CLEARLY!!!

You will receive a graphic proof via fax or email within approximately 48 hours from receipt of complete order

Contact:	P.O.#:
Company:	
Email:	
ling Address	Shipping Address (Only fill in if different than Billing information)
reet	Street
ty Prov/State PC/Zip	p City Prov/State PC/Zip
none () Ext.	Phone () Ext.
·× ()	Fax ()
PRODU	JCT INFORMATION
· ·	
Quantity: Format: 8½" x 11" 9½" x 7" - 1 Choose one Laser Inkjet/Bubblejet Continuous Dot Matrix	1 Copy
Background colour of Cheque: Dark Blue Burgundy Red Green	☐ Light Blue ☐ Black ☐ Tan ☐ Other pms#
Dark blue	Light Blue Black Brain Bother phis#
Background style of Cheque: Standard OR	See www.actionforms.ca for choices #
Colour of type/logo: ☐Same as background (N/C) ☐Blackground (N/C)	Other standard Colour (add \$45) Other non-standard Colour (add \$50)
Include Telephone Number on Cheque:	Yes - Use the number in billing info or OTHER: () -
Include Fax Number on Cheque:	Yes - Use the number in billing info or OTHER: () -
Company Name & Address to Appear on Cheque:	Use Billing Use Shipping Use Sample Address Supplied
Signature Lines: 1 Line 2 Line	es
Starting Number: (i.e. 000501)	
IMPORTANT: A void cheque with all correct bank	& account information must be faxed with this order form.
Bank Name and Address: Please print the bank nam	me and address as it appears on your current cheque clearly.
	11 2 2 2 7 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Bank Name	
Address	
City	Prov/State PC/Zip
Transit / Bank / Account Info.	

<u> </u>	OGO INFORMATION		
Add our Company Logo (No Charge). OR Should you choose to add your company logo to The following is a list of what is acceptable for s Please note: By adding your logo, you will rece	the cheque, you may either e-mail the logo, or mail/courier a copy of it. upplied artwork.		
Scannable quality artworkPhotographsNo fax copies of any logo will be accepted	igital Files Acceptable file formats are .tif / .eps / .ai / .bmp / .pdf (.pdf files must have all fonts embedded and be accompanied by a black & white printout .pdf files must also be rendered unalterable or they will not be used) Action Forms runs on a PC platform, Mac files will not be accepted When supplying digital artwork, fax a copy with your order for comparison		
Logo sent by: Mail/Courier e-mail -	file name is:		
No incomplete orders will be produced by the process of the proces	ressed • All orders are subject to +/- 10% over/under run restake approx. 2 weeks (10 working days) to complete. with an order. Should you choose not to proceed with the order once the charges are \$65/hour with a minimum of ½ hour. or freight • Terms are Net 30 Days from Invoice date Standard Ground Service; shipping cost will be added to your invoice.		
I/We certify that all information supplied is correct	ct & that I/We have read, understand & accept the above terms & conditions		
Authorized Signature	Date		
<u>PA</u>	YMENT INFORMATION		
Payment Method: Bill Me (Net 30 Days)	□VISA □ Master Card □ American Express		
Name on Card:	Card Expiry Date (mm/yy):		
Card Number:	Credit Card will be billed with your order, applicable shipping & taxes on date of shipment. A receipt will be faxed or emailed. Original invoice will be mailed.		
ADDITIONAL INFORMATION			
INCLUDE WITH MY ORDER:			
2 Window Security Cheque Envelope	AF75 Self Inking Denosit Stamp		

2 Window Security Cheque Envelope AF75 8-3/4" x 3-3/4" ☐ 100 Envelopes \$23	Self Inking I	Deposit Stamp	
Security Lined Envelope Security Lined Envelope 500 Envelopes \$38 1000 Envelopes \$38 1000 Envelopes \$60 1000 Envelopes \$99 2000 Envelopes \$163	For Deposit Only Your Company Name 12345-123 1234-567-8	2-1/2" x 13/16" Choose Your Ink Colo Black Red Bl	