

To place an order, complete this form and send it by fax to **416.599.3925** or post it to **ChequeDirect Co., 2-2 Tall Grass Trail, Vaughan, ON L4L 3Y9**.
Please note: incomplete forms take longer to process. Please make sure all mandatory fields marked with an * asterisk are completed.

Contact information

Your Name* _____
 Day Tel. No.* _____ - _____ - _____ Evening Tel. No. _____ - _____ - _____
 eMail Address* _____

Business info as it will appear on cheques

Business Name* _____
 Street Address Line 1* _____
 Street Address Line 2 _____
 City* _____
 Province* _____ Postal Code* _____
 eMail Address* _____
 Web Page Address _____

Bank info as it will appear on cheques

Bank Name* _____
 Street Address Line 1* _____
 Street Address Line 2* _____
 City* _____
 Province* _____ Postal Code* _____

Transit Number* (5 or more digits) _____
 Bank Number* (3 or more digits) _____
 Account Number* _____

Bank Subcode* (4 digits – TD accounts only) _____

To locate these numbers on your existing cheques, see our web page under New Order and the "Show me where to find these numbers (?)" button, bottom right.

Cheque order details

Cheque Style	Cheque Colour	Quantity
<input type="checkbox"/> Manual 2-up	<input type="checkbox"/> Blue	<input type="checkbox"/> 100
<input type="checkbox"/> Voucher - Cheque on Top	<input type="checkbox"/> Green	<input type="checkbox"/> 250
<input type="checkbox"/> Voucher - Cheque in Middle	<input type="checkbox"/> Beige	<input type="checkbox"/> 500
<input type="checkbox"/> Voucher - Cheque on Bottom		<input type="checkbox"/> 1000
<input type="checkbox"/> Blank Stock		<input type="checkbox"/> 1000+ _____

Signature Lines

1
 2

Title Lines

(above Signature lines)

1
 2

Cheque Double Window Security Envelopes

Top-middle style
 Bottom style

Quantity

100
 250
 500
 1000
 1000+ _____

Custom logo/graphic

Add my custom graphic which I will send in PC TIFF format by email to sales@chequedirect.com. I understand there is an additional setup fee of \$50 for a black and white image / or you will send me a quote if I send a colour logo.

Shipping information

Complete this section only if delivery address is different from address on cheques.

Street Address Line 1* _____
 Street Address Line 2 _____
 City* _____
 Province* _____ Postal Code* _____

Payment information

Credit Card Type* Name on Card* _____
 MasterCard Card Number* (16 digits, no spaces) _____
 VISA Expiry Date* (MM/YY) _____ / _____