

CheckWriter Associates

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(314) 731-3335 / (877) 551-1697 / Fax: (314) 731-2921
Email: info@checkwriters.com | website: www.checkwriters.com

The following information is needed to process your custom accessory order. Please complete all fields and fax back to (314) 731-2921. Call or Email us with any questions.

Fax Date: _____

Signature Plate Order Form

Order # _____ Date Ordered: _____
Company: _____
Address: _____
Address2: _____
City, State, Zip: _____
Fax No: _____ Email: _____
1: Manufacturer: _____ 2: Model No: _____

3. Background Preference

No Background Background-Fingerprint Background-Dot
4. Logo - New Style(thin plate) Old Style(thick Plate)

(Black & White of logo is required)

5. Titles - yes no Limit Line - yes no

(Circle yes or no for both options above)

6. Signature Samples - **Note: Signatures must be within the confines of the box provided for that signature**

Print Name Here

Print Name Here

Print Name Here

Top Signature:

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Middle Signature:

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Bottom Signature:

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7. Mounting Option:

Regular:
Reverse Mount(upside down)

8. Important. In adjacent box illustrate the Exact arrangement of signature(s) as they are to appear. If logos, titles or limit line are desired, insert in appropriate location.

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Quantity Ordered: _____

9. Please provide a sample of imprint or a voided check for sizing purposes.