

evoPro Solutions
Check
Order Form



New Order Reorder

Contact Information


Ordering Contact:		Phone:
Fax (Required!):	Email:	

Pre-Printed Check Information

Bank Account #:
Bank Routing # (9 digits):
Starting Check #:
Color Fade: Blue to Green

Shipping Address

Name:	
Address 1:	
Address 2:	
City, State, Zip:	Phone:

evoPro Solutions Checks 			Double Window Envelopes		Samples
Qty	Cost	Each	Standard	Self-Seal	If you are only ordering samples its not necessary to fill out the payment information on page 2.
Sample	FREE <small>Order</small>	.00	FREE <small>Order</small>	FREE <small>Order</small>	
250	\$40.00 <input type="checkbox"/>	.16	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/> Ground
500	\$60.00 <input type="checkbox"/>	.12	\$20.00 <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/> FedEx 2 Day
1,000	\$80.00 <input type="checkbox"/>	.08	\$40.00 <input type="checkbox"/>	\$65.00 <input type="checkbox"/>	<input type="checkbox"/> FedEx Priority (1 Day)
2,000	\$140.00 <input type="checkbox"/>	.07	\$80.00 <input type="checkbox"/>	\$130.00 <input type="checkbox"/>	Shipping billed at FedEx published rates
3,000	\$210.00 <input type="checkbox"/>	.07	\$120.00 <input type="checkbox"/>	\$195.00 <input type="checkbox"/>	Your Order
5,000+	\$350.00 <input type="checkbox"/>	.07	\$200.00 <input type="checkbox"/>	\$325.00 <input type="checkbox"/>	Total \$ Amount

Fax to: 800-871-3305 or 404-351-0911

Payment Information

(Samples only do not require payment information)

Payment: Visa/Mastercard AMEX Discover Bill My Account Debit this Account

Credit Card #:

Expiration Date:

Credit Card Billing Address is the same as on the check (otherwise complete address below)

Billing Name:

Billing Address 1:

Billing Address 2:

Billing City, State, Zip:

Signature: **X**

Send Proof Via:

Email

Fax

U.S. Mail

If you are printing a check
Tape a check here
(From the account we are printing the check from)

If you are printing a deposit slip
If the deposit information is different than your check
attach a copy of your deposit slip as well.

Directions:

1. Print out this page.
2. Fill out the form below *exactly* like you want your checks printed.
3. If you wish for only a sample, simply write SAMPLE in the billing section.
4. Tape a check from the account we are printing from in the area provided.
5. Fax your order to 404-351-0911 or 800-871-3305, or call 404-351-2700 or 800-722-2804.
6. Your order will be processed within 24 hours, we will then fax a proof and once your proof is approved, the order will ship in 1-2 business days.
7. Order will be shipped to the address on the check, unless otherwise specified.