



Call toll free 1-866-851-3253 and place your reorder by phone. Fax your order to 1-866-796-2226. Use this convenient order form and attach sample.

1 CUSTOMER: Please complete the following information:

PERSON ORDERING
BUSINESS NAME
PHONE NO. (EXT.)
FAX NO.
EMAIL
STREET ADDRESS
CITY, PROVINCE POSTAL CODE
CHECK ONLY IF THIS IS A NEW ADDRESS <input type="checkbox"/> NEW ADDRESS

2 SHIPPING ADDRESS: Check if same as above Fill in only if different from that appearing in the CUSTOMER block. For prompt delivery, please provide street address.

RECIPIENT NAME
BUSINESS NAME
STREET ADDRESS (FLOOR, ROOM OR SUITE NUMBER)
CITY, PROVINCE, POSTAL CODE

3 PAYMENT OPTIONS / AUTHORIZATION:

Cheque or money order enclosed. Payable to: **EVCO Solutions Inc.** (Applicable taxes and freight are extra)

ON ACCOUNT VISA MASTERCARD

CARDHOLDER NAME	EXP. DATE
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_____ X _____ X _____ X _____

I hereby authorize the printing described on this order form and charging of costs by the payment method indicated above.

_____ Date _____ Authorized Signature

4 SHIPPING METHOD:

Prepaid & Charged Charge Customer Shipping Account

_____ Customer Preferred Carrier _____ Account Number to be Charged

5 PRODUCT ORDER INFORMATION:

DESCRIPTION	QUANTITY		PREVIOUS ORDER NO.	NO. OF PARTS	COLOURS
<input type="checkbox"/> CHEQUES <input type="checkbox"/> FORMS <input type="checkbox"/> MANUAL <input type="checkbox"/> COMPUTER <input type="checkbox"/> LASER	<input type="checkbox"/> 250 <input type="checkbox"/> 500 <input type="checkbox"/> 1000 OTHER _____	<input type="checkbox"/> NEW ORDER <input type="checkbox"/> REPEAT ORDER NO CHANGE <input type="checkbox"/> REPEAT ORDER WITH CHANGES			<input type="checkbox"/> BLUE <input type="checkbox"/> BURGUNDY <input type="checkbox"/> GREEN <input type="checkbox"/> YELLOW <input type="checkbox"/> GREY <input type="checkbox"/> PURPLE <input type="checkbox"/> RED <input type="checkbox"/> TAN <input type="checkbox"/> OTHER _____
<input type="checkbox"/> ENVELOPES <input type="checkbox"/> DOUBLE WINDOW <input type="checkbox"/> SINGLE WINDOW (PRINTED) <input type="checkbox"/> NON-WINDOW (PRINTED)	<input type="checkbox"/> 500 <input type="checkbox"/> 1000 OTHER _____	<input type="checkbox"/> NEW ORDER <input type="checkbox"/> REPEAT ORDER NO CHANGE <input type="checkbox"/> REPEAT ORDER WITH CHANGES			PLEASE CHECK (✓) INFORMATION PRINTED ON SINGLE-WINDOW AND NON-WINDOW ENVELOPES <input type="checkbox"/> COMPANY NAME <input type="checkbox"/> COMPANY LOGO <input type="checkbox"/> COMPANY ADDRESS <input type="checkbox"/> OTHER (PLEASE NOTE IN SPECIAL INSTRUCTIONS)

6 SPECIFICATIONS:

LOGO
 Custom Logo
 Please supply camera ready artwork or electronic file*

LANGUAGE
 English Bilingual

*** Electronic Artwork Requirements**
 QUARKEXPRESS (MAC OR PC) - VERSION 5 OR LESS; ILLUSTRATOR (MAC OR PC) - VERSION 10 OR LESS; CORELDRAW (PC ONLY) - VERSION 10 OR LESS ~ SAVE AS EPS OR TIFF FILES

PROOF POLICY: Proof supplied at no charge. If order cancelled, a \$50.00 charge is applicable.

SIGNATURE LINES
 1 line 2 lines

CHEQUE NUMBERING Yes
 Start sequential numbering at: _____

NUMBERING POSITION
 Cheque Stub MICR
 All orders will include consecutive MICR numbering

SPECIAL INSTRUCTIONS: Please check if fax or email proof required to ensure order accuracy

7 PLEASE MARK ANY CHANGES DESIRED ON ATTACHED SAMPLE

TO REORDER CHEQUES ON-LINE, GO TO: www.evcoCanada.com/cheques/index.php

Email logo, (if applicable), to our Email address info@evcoCanada.com

Please indicate on your order if your logo has been sent via Email.

Thank you for your order!



PLEASE NOTE:

- ALL ORDERS ARE FURNISHED ON THE CONDITION THAT LIABILITY IS LIMITED TO THE REPLACEMENT OF AN INCORRECTLY PRINTED ORDER.
- ALL NEW OR REPEAT ORDERS WITH CHANGES WILL BE PROOFED FOR YOUR APPROVAL PRIOR TO PRODUCTION

Satisfaction guaranteed!