



HAND STAMP SIGNATURE PLATE ORDER FORM

ORDERS CANNOT BE PROCESSED WITHOUT ALL OF THE FOLLOWING INFORMATION

SERIAL# _____ QUANTITY: _____

"VOIDED" LIVE CHECK IS NEEDED TO PLACE ORDER

OFFICIAL TO WHOM PLATE(S) SHOULD BE SENT: _____

COMPANY: _____ PHONE NO: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PRINT TITLES ONLY IF NEEDED: _____

Print signature (s) here:

FAX AND MAIL ORIGINAL COMPLETED FORM TO:

F & E Check Pro's

PO Box 670289; Northfield, Ohio 44067

Fax: 330-468-0696

AUTOMATED BUSINESS EQUIPMENT CORP.

F & E Check Protector Co. | P.O. Box 670289 | Northfield, Ohio 44067

office 330.468.2004 | 800.852.6301 | fax 330.468.0696 | web: fecheckpros.com | email: ServiceSales@fecheckpros.com

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