

## PREMIER CHECK COLORS

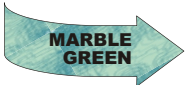
NO EXTRA COST



**AMERICAN SPIRIT** symbolic American Flag and American Eagle background



**MARBLE BLUE** light blue at top merging into light grey at bottom - marble background with light scroll image over signature line



**MARBLE GREEN** light green at top merging into light tan at bottom - marble background with a light scroll image over signature line



**MONTEREY** aqua blue parchment paper design



**ANTIQUE** cream color parchment paper design



**GENTRY** grey color with green/gold horizontal line at top ( laser only)



**SAFETY PINK** embedded diagonal lines pink ( laser only)



**SAFETY BLUE** embedded diagonal lines light blue ( laser only)

## STANDARD LINEN



**BLUE** light blue linen



**PURPLE** light purple linen ( laser only )



**GREEN** light green linen



**ROSE** light rose linen



**TAN** light tan linen



**GREY** light grey linen ( laser only )



**YELLOW** light yellow linen

**SHIPPING COST:**  
**ORDERING MORE THAN ONE PRODUCT?**  
 USE THIS CHART FOR CALCULATION OF SHIPPING.

ADD THE TOTAL COST OF YOUR ORDER WITHOUT SHIPPING THEN REFER TO THE CHART BELOW:  
 DID YOU ORDER **BLANK LASER CHECKS**? PLEASE USE THE **DOLLAR AMOUNT OF THE IMPRINTED CHECKS**. SHIPPING IS CHARGED BY APPROXIMATE WEIGHT.

\$ 00. TO \$ 71. = \$ 7.00	\$201. TO \$300. = \$17.
\$ 72. TO \$120. = \$11.00	\$301. TO \$500. = \$21.
\$121. TO \$200. = \$14.00	OVER \$500. = \$24.

CHECKS ARE DESIGNED WITH YOUR SECURITY IN MIND. MICRO PROCESSING AND INK MARKS ARE INTEGRATED INTO THE DESIGN. ALSO, YOUR LOGOS ARE FREE

### ORDER SUMMARY DOLLAR AMOUNT:

CHECKS: \$ \_\_\_\_\_ . \_\_\_\_

DEPOSIT SLIPS: \$ \_\_\_\_\_ . \_\_\_\_

ENVELOPES: \$ \_\_\_\_\_ . \_\_\_\_

SUB TOTAL: \$ \_\_\_\_\_ . \_\_\_\_

SHIPPING COST: \$ \_\_\_\_\_ . \_\_\_\_

Florida Resident Sales Tax @7% \$ \_\_\_\_\_ . \_\_\_\_

**TOTAL AMOUNT** \$ \_\_\_\_\_ . \_\_\_\_

### SHIP TO:

ATTN: \_\_\_\_\_

COMPANY: \_\_\_\_\_

STREET \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

FAX : \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PLEASE USE MY CREDIT CARD FOR PAYMENT.

CREDIT CARD #: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

NAME/ADDRESS OF CARDHOLDER: \_\_\_\_\_

I HAVE ATTACHED A CHECK TO THIS ORDER.

PLEASE INVOICE ME.

**PC SOFTWARE ACCOUNTING, INC.**

P O BOX 670  
SARASOTA, FL 34230-0670

FAX 941-366-6618  
941-365-1162 for questions