

YOUR COMPANY NAME YOUR CITY, STATE ZIP

CHECK NO.

123456

THE KEY TO DOCUMENT SECURITY • ADDITIONAL SECURITY FEATURES INCLUDED. SEE BACKER FOR DETAILS.

YOUR COMPANY NAME

YOUR ADDRESS
YOUR CITY, STATE ZIP
YOUR PHONE NUMBER

BANK NAME
CITY, STATE ZIP

ABA
FRACTION

123456

CHECK NO.

PAY

DATE

AMOUNT

YOUR COMPANY NAME

TO THE
ORDER
OF

AUTHORIZED SIGNATURE

MP

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