



West Gate Bank Business Check Order Form

Account Number _____ Type of Ckg Acct _____

Customer Name _____ Start # _____

CUSTOMER CONTACT NUMBER _____

Branch Pickup I would like to pick up my order at the _____ branch.

OR

Mail Out I would like WGB to mail my checks to _____

Please provide my new checks with the SAME information as the last order.

OR

Please provide my new checks with the following information
(please fill out the information below as you would like it to appear on your checks)

Name _____ Phone # _____ - _____ - _____

_____ Other _____

Address _____

City, State, Zip _____

		PICK UP		MAIL OUT	
<u>3 ON-A-PAGE CHECKS</u>					
\$ _____	WGB Green	Originals	_____201 _____300	_____201 _____300	
			\$30.00 \$35.00	\$40.00 \$45.00	
		Duplicates	_____201 _____300	_____201 _____300	
			\$35.00 \$39.00	\$45.00 \$49.00	
\$ _____	Yellow	Originals	_____201 _____300	_____201 _____300	
			\$34.00 \$39.00	\$44.00 \$49.00	
		Duplicates	_____201 _____300	_____201 _____300	

BANK USE ONLY
Received by _____

Programmed by _____

