

phone. 800.825.8649
fax. 707.547.4541
2321 Circadian Way
Santa Rosa, CA 95407

Mailing Address:
PO Box 7789
Santa Rosa, CA 95407



We are the
VIEWPOINT
Forms Provider

VIEWPOINT CONSTRUCTION SOFTWARE ORDER INFORMATION SHEET

Software Format (Circle One)

Accounts Payable **Payroll** **General Purpose (blank stub)**
Accounts Receivable Statement **Material Sales Invoice** **Perforated Check Stock**

Check Style (Circle One)

Limited **Economy**

Quantity

Heading Information

*Please supply original artwork
for logos and color separations
for multi-color logos.

Parts (number of copies)

1-Part (White) **2-Part** (White/Canary)

Ink Color(s)

Pantograph Option

Signature Lines (Circle One)

Single **Double**

Co. Name Above Signature Line

YES **NO**

ARABIC IN RED or BLACK (Circle One)

RED **BLACK**

Packaging Option (Check One)

Standard Ascending (Face Up/Low to High)
Standard Descending (Face Up/High to Low)
Reverse Ascending (Face Down/Low to High)
Reverse Descending (Face Down/High to Low)

Beginning Check Number

Bank Information

*Please fax or send a MICR spec
sheet from your bank or a copy
of a current check you are using.

Routing #: _____ Account #: _____

Fractional Routing Code: _____/_____

Bank Name: _____

Bank City/ST: _____

MATCHING ENVELOPES (Circle One)

CSE-11 **CSE-11SS** **CSE-35** **CSE-35SS** **QUANTITY** _____

Special Instructions

PLEASE FAX THE COMPLETED FORM TO: 707.547.4541