# Bank Supply Order Form

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Checks, Deposit Slips and Endorsement Stamps View [www.superior-press.com/Products.asp](http://www.superior-press.com/Products.asp) for product offerings

\*NOTE: Orders will be placed by the Office of Investments and Banking [OIB], not the individual department.

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| **Requestor’s Name: Phone #:**  Please Print  **Requestor’s Mailing address:** | |
| **Allow 7-10 business days for normal service\*\*Additional time is required for Custom Orders** | |
| **ITEM REQUEST** | |
| CHECKS | * Quantity of checks being ordered: Starting Ck#: * Are Duplicates Needed?: Yes No * If Yes, how many copies are needed? (1 to 3) * Color Desired: Blue Green Pink Tan Yellow |
|  | |
| DEPOSIT SLIPS | * Quantity to order: Duplicates Needed?: Yes No * If Yes, how many copies are needed? (1 to 5): |
| **To place a check or deposit slip order please provide the following** | |
| **Dept. or Study Name on Account** |  |
| **Street Address** |  |
| **City, State, Zip Code** |  |
| **Location # (Aux. Field)** |  |
|  | |
| Pre-Inked Endorsement Stamps | Department Name: Budget # for returned checks (Fund/Dept ID):  Name of Deposit Bank: \_ Quantity of Stamps to order: |
| **PURCHASING CARD PAYMENT INFORMATION** | |
| Purchasing Card #: Expiration Date:  Name on Card: Security # on back (last 3 digits): | |
| Signature: | |