



PO Box 310  
Yakutat, AK 99689

# WYPAYMENTS ORDER FORM

Phone: (800) 869-0236  
Fax: (866) 612-5236  
Email: orders@wycomsystems.com  
Web Site: www.wycomsystems.com

## Order Information

RUSH ORDER (Charge Applies)

Manufacturer's Representative \_\_\_\_\_ Contact \_\_\_\_\_ PO # \_\_\_\_\_

**Bill To**  
 Customer  Include first annual License & Support Agreement on invoice  
 Rep

**Billing Address**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Shipping Address**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Customer Status**  
 New  Upgrade

## Customer Information

Name \_\_\_\_\_  
 Contact \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone# \_\_\_\_\_ Ext. \_\_\_\_\_  
 Other \_\_\_\_\_

**Customer Setup**  
 \_\_\_\_\_  
 Operating System  
 \_\_\_\_\_  
 Application Software

**System License**  
 Dot Matrix  
 Standard Laser  
 MICR Laser  
**Optional Features**  
 PDF Check Archive  
 Payment Approval  
 Auto Sense

**Printer Info.**  
 \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Total # of printer licenses

**Wycom Use Only**  
 \_\_\_\_\_  
 Date Received  
 \_\_\_\_\_  
 Order Number  
 \_\_\_\_\_  
 Date Completed

## Customer Programming Information

Application Position #	1	2	3	4	5	6	7	8
APPLICATION NAME								
Signature Placement TOP SIGNATURE # MIDDLE SIGNATURE # BOTTOM SIGNATURE #								
Check Protection? Y/N								
Prefix #? Y/N	#	#	#	#	#	#	#	#
Add Top Signature @ \$	\$	\$	\$	\$	\$	\$	\$	\$
Suppress Top Signature @ \$	\$	\$	\$	\$	\$	\$	\$	\$
Suppress All Signatures @ \$	\$	\$	\$	\$	\$	\$	\$	\$
Void Check @ \$	\$	\$	\$	\$	\$	\$	\$	\$
Print MICR Line? Y/N								
Print Check #? Y/N								
Print Form? Y/N								
Print Extra Copy? Y/N								
Copy Paper Tray								
Special Formatting for Amount?								
Special Formatting for Check #?								

## Customer Signatures

Please sign inside the box for each signature using Black ink. Lines falling outside the box may be lost.

Print Name Signature 1

Print Name Signature 2

Print Name Signature 3