EzSigner Signature Digitization Order Request

1. Company information:

Company _____
Contact _____
Phone _____
Fax _____
Email _____

2. Using a black pen, please sign within the following boxes.

Signature #1

Print name _____

Signature #2

Print name _____

Signature #3

Print name _____

Signature #4

Print name _____

To insure the best signature quality please do not sign outside of the signature box.

Once you have completed steps 1-2, please mail this form and an original voided check sample to the address below. The check sample will be used to properly size your signatures and will be returned with your order. Please do not remove any stubs on the check sample. Your check samples will be returned with your order. Please contact us if you have any questions concerning completion of this form.

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1393 Duncan Lane, Suite 600
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Attn: Graphics Department
Phone: (800) 359-0364
Fax: (770) 868-0022
Email: sales@pbsoffice.com

PROGRESSIVE BUSINESS SYSTEMS, INC.
Optimizing Today's Office Operations