

Please submit completed form and required samples to your Distributor or fax to 905 364 0701

### CUSTOMER INFORMATION

Company Name:

Address 1:

Address 2:

City:

Province:  Postal Code:

Current Customer:  Yes  No

Windows Operating System:  10  8.1  7  Vista  XP

Mac OS  Linux  Other:

32-bit  64-bit

#### Financial Institution:

- Bank of Montréal  Bank of Nova Scotia  CIBC  
 Desjardins  National Bank  Other  
 RBC Royal Bank  TD Canada Trust

Accounting Package:

Version:

Web-based  Windows  Linux  DOS  Unix  A/S400

#### Network:

- Microsoft Server  Terminal Server  Citrix  
 Other:  Are you on a domain?  Yes  No

#### Cable Connection:

- Ethernet  Parallel  Printer  USB  
 Other:

Printer used for cheque printing:

#### Current Cheque Style:

- Pre-printed Stock  Blank/MICR Printed  Combination

Cheque paper size (inches):

Number of signatures:

Number of different cheque styles that will require signing:

### CONTACTS

*Our goal is to provide you with the most efficient service—both in setup and configuration of your software as well as while you use it for your cheque processing requirements. Please provide us with contact details for the following areas of responsibility so that we can ensure a smooth communication flow between Paystation and your organization.*

#### PRIMARY CONTACT

Name:

Title:

Email:

Phone:

#### PRIMARY ACCOUNTING CONTACT

Name:

Title:

Email:

Phone:

#### SYSTEM ADMINISTRATOR

Name:

Title:

Email:

Phone:

Do you require electronic signatures?  
If Yes, please complete a Signature Order Form.  Yes  No

Are you currently using a USB HASP key?  Yes  No

Required Date  
(if applicable):

Please submit completed questionnaire  
to your distributor or fax to 905 364 0701