

McLeckie Insurance Group

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YOU MAY NOW SEND YOUR PAYMENT BY FAX TO 903-897-0062

PLEASE INDICATE THE ITEMS YOU ARE PAYING BELOW

Do not mail original check to us.

CHECK MUST BE PAYABLE TO **McLeckie Insurance Group**

Please write "FAX CHECK" on the face of the check and keep the original for your records to avoid duplicate posting.

AFTER YOU FAX THE CHECK, WE WILL SEND A CONFIRMATION BY FAX AND MAIL.

I hereby authorize McLeckie Insurance Group to use this faxed copy of my check and/or the information provided below as an actual check for payment on the above account. I am an authorized signer on this account and have signed below to certify this transaction.

Agency Name: _____
Bank of Account and address: _____ _____
Check # _____ Payable to: McLeckie Insurance Group Amount \$ _____
* The following two numbers are generally listed at the top right of your check and are in the following format. XX-XXX/XXXX
Fed Number #1: _____ Fed Number #2 : _____
Transit Number : _____ Checking Account Number _____

Signature of Authorized Signer on Checking Account

Date