



P.O. Box 2764 ★ Davenport, Iowa 52809 ★ (563) 355-3400 ★ 1-800-364-7794 ★ Fax: (563) 355-5064

This letter authorizes \_\_\_\_\_ Bank to mail all checks that have been given to us by customers and returned not paid by their bank to: **TRAC-A-CHEC, INC., P.O. BOX 2489, Davenport, Iowa 52809.**

The \_\_\_\_\_ Bank is released from any further liability of guaranteeing delivery of returned checks to

\_\_\_\_\_  
(Customer)

This agreement is in effect from this date until written notice of cancellation of agreement has been received by the fore-mentioned bank.

Please run checks through once daily.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

By: \_\_\_\_\_  
(Authorized Signature)

\_\_\_\_\_  
(Firm)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Account Number)