



Date

Account Holder Name
Account Number

Please use a separate deposit slip for each account.

Complete this deposit ticket, endorse all checks **(do not include any cash or loan or credit card payments)** and mail to:

**PO Box 2100
Beaverton, OR 97075**

F-00024 171019

C H E C K S	CHECK NUMBER	CHECK AMOUNT	
TOTAL DEPOSIT			

Deposits may not be available for immediate withdrawal. All credits for items are provisional until collected.

BANK-BY-MAIL DEPOSIT TICKET



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