



# JONES TRUCK INSURANCE

**Date** \_\_\_\_\_

Authorization is hereby granted to Jones Truck Insurance Agency, Inc. to reproduce and deposit the following copy of my check as legal tender by use of their Check by Fax Systems, CHAX.

Drivers Licence Number: \_\_\_\_\_

State: \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Copy of Check:**

FAX: 254-836-8555

**DO NOT** mail your check. Write "CHECK FAX" across it and retain it for your records.