

Agent's Cheque Deposit Summary

Please complete cheque details below and attach cheques to a copy of this sheet before mailing to:

PO Box 106-664, Auckland City Post Shop, Auckland 1030

Name:	Agency Area:				
Buyer's Account No	Seller's	Account No	Cheque	e Date	Cheque Amount
					_
					_
Number of cheques attac	hed		Total amo	unt of cheque	es
Signature:				e:	
PO Box 106-664, Auckland City Auckland 1030	Post Shop	NZ Bus N Tel: +64 9 Fax: +64 9		Email: h	q@nz.ebanctrade.com