



# DC Lambda Squares

PO Box 77782  
Washington, DC 20013  
(202) 332-4782

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Check Number / Date

## Check Request Form

<b>Requested By</b>	<b>Payee</b>
<b>Requestor Address (Optional)</b>	<b>Payee Address (Optional)</b>
<b>Date Requested</b>	<b>Date Due</b>
<b>Disposition</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Hand Carry to Requester</li> <li><input type="checkbox"/> Mail to Requester</li> <li><input type="checkbox"/> Hand Carry to Payee</li> <li><input type="checkbox"/> Mail to Payee</li> <li><input type="checkbox"/> Direct Debit</li> </ul>	<b>Special Processing</b>

Description	G/L Account	Amount
<b>Date Processed:</b>	<b>Total Amount:</b>	