

DGTS OF THE PA STATE ASSOCIATION

I. B. P. O. ELKS of the WORLD

CHECK REQUEST

DEPARTMENT _____

CHECKS WILL NOT BE ISSUED IF DIRECTRESS AND DAUGHTER STATE PRESIDENT HAVE NOT SIGNED THIS FORM.

NO.	DATE	NAME	ADDRESS-CITY-STATE-ZIP	FOR	AMT.
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
TOTAL					

APPROVALS:

DGT. STATE PRESIDENT

DIRECTRESS

STATE FIN. SEC.