

Lansing Christian School
3405 Belle Chase Way
Lansing, MI 48911

CHECK REQUEST

Payable to: _____ Date: _____

Street: _____ City: _____

State: _____ Zip: _____

Amount: \$ _____ Charge to: _____

Reason for check: _____

Requested by: _____ Approved by: _____

Return to: _____ or mail to above address _____

PLEASE ATTACH RECEIPTS TO THIS FORM