



Special Libraries Association  
BIOMEDICAL AND LIFE SCIENCES DIVISION

**Check Request and Payment Approval Form**

**Use this form to request Division payments to third parties.  
Send to current Chair, Chair-Elect, Past Chair, or Director for approval.**

**Please print:**

Requester Name \_\_\_\_\_ Request Date \_\_\_\_\_

Date Check Needed \_\_\_\_\_

Purpose of Check \_\_\_\_\_

Pay to the Order of \_\_\_\_\_

Amount \_\_\_\_\_

Mail to \_\_\_\_\_

\_\_\_\_\_

Approved by (signature) \_\_\_\_\_

Division Office \_\_\_\_\_

Date Approved \_\_\_\_\_ Date Received by Treasurer \_\_\_\_\_

Paid by Check \_\_\_\_\_ on (date) \_\_\_\_\_ Treasurer's Initials \_\_\_\_\_