

Literacy Volunteers of Illinois
641 W. Lake Street - Suite 200
Chicago, IL 60660
312-857-1582
312/857-1586 (fax)

Lost Check Requisition

Date of Request _____

Requested by _____

Issue Check to _____

Address _____

| Date | Reason | Class* | Account* | Amount |
|------|--------|--------|----------|--------|
| | | | | |

Approved by _____

Check No. _____

Date _____

Date Issued _____

Original check # _____

Stop Payment Date _____

*** LVI Use Only**