



Used Lockbox Check Request Form

Date _____

Center/Location _____

Member # (GAMLS will enter this field) _____

Customer Name _____

Address _____

City, State, Zip _____

Check # (GAMLS will enter this field) _____

Total Used Lockboxes Turned In _____ X \$59 = _____

Please provide Ibox BT LE serial numbers below or print an inventory report
