

SECULAR FRANCISCAN ORDER, FIVE FRANCISCAN MARTYRS REGION

Payment Request

Mail request to: Larry Bleau OFS, Treasurer - 1509 Contreras Ln., The Villages, FL 32159 301-661-5597

Or email electronic request (with attachments, if any) as a PDF to: treasurer@ffmr-ofs.org

Please pay the following person(s) for the indicated purpose(s):

Item	Description & expenditure purpose (Receipts are required for all non-mileage expenditures)	Qty	Rate	Amount
1.	Miles		0.50	
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
Total Expense				

Current mileage rate: \$0.50/mi

Requestor's Signature:

Printed Name :

Date:

(Check will be addressed to Payee at address below)

Place the notation "/s/" after your name on the above line to indicate you wish your name as typed to be accepted as your electronic signature.

By signing this agreement electronically, the parties agree that their electronic signatures shall be legally binding, as per applicable law.

Minister's Approval: _____

Date: _____

(Minister's Approval required for any single expenditure over \$200.00)

If signed on Minister's behalf, enter by whom and date:

Place the notation "/s/" after your name on the above line to indicate you wish your name as typed to be accepted as your electronic signature.

Payee's name and address:

For Treasurer's Record's only

Check No.:

Date Paid:

Amount Paid:

NOTES

Charge to REC Formation Director Expenses

Posters will contain FFMR name and website