NATIONAL FRATERNITY OF THE SECULAR FRANCISCAN ORDER - USA

TO: Jerry Rousseau, OFS

Treasurer, NAFRA-USA 82 Kim St. Blairsville, GA 30512-2345 Please reimburse me for the following expenditures: DESCRIPTION **AMOUNT ACCOUNT** 5. 6 8. 9 TOTAL REIMBURSEMENT REQUESTED \$ >>>>>> **ENCLOSE ALL PERTINENT RECEIPTS SIGNATURE** DATE (Check will be made out to this name unless otherwise stated). FOR TREAS. USE ONLY: CHECK#: Send check to: NAME DATE: **ADDRESS** AMOUNT: CITY ST & ZIP FILE: reimbursement request.xls