

PAYEE NAME

STREET ADDRESS

CITY/PROVIDENCE

STATE

ZIPCODE

COUNTRY

IN THE AMOUNT OF \$

CURRENCY

BANK ACCOUNT

REASON FOR REQUEST/JUSTIFICATION/CONTRACT TERM (If applicable)

DATE OF REQUEST

TYPE OF PAYMENT

REQUESTED BY

SERVICE/GOODS STATUS

BUDGET MEMO/CONTRACT DATE (If applicable)

CONTRACT NUMBER

CONTRACT/BM AMOUNT

CONTRACT/BM BALANCE (*after this payment*)BENEFICIARY BANK NAME & ADDRESS (*Wire Transfer Only*)

ACCOUNT NUMBER

TARGET/INTERMEDIARY BANK

ABA/SWIFT #

IBAN #

DIRECTOR/CONTRACT MANAGER (\$0 - \$1,000)_____
DATE*I certify that all contract requirements for this payment have been met.**_____
VICE PRESIDENT/SENIOR DIRECTOR (\$0 - \$2,500)_____
DATE_____
SENIOR VICE PRESIDENT (\$0 - \$5,000)_____
DATE_____
PRESIDENT/CEO/ EVP/ COO/CONTROLLER (Unlimited)_____
DATE**ACCOUNTING USE ONLY**VENDOR CODE
_____G/L CODE
_____EVENT ID
_____VOUCHER #

*Enterprise Florida requires that EFI's President/CEO or Executive Vice President/COO must authorize any contract commitment and any changes in consideration. The Contract Manager is administering the contract under the authorization of either the President /CEO or the Executive VP/COO

 MINORITY VENDOR CONFLICT OF INTEREST 1099 VENDOR