

## DIRECT PAYMENT FORM

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						Olou.					7.0	
PAYEE:			REQUE	STOR:								
NAME	REAL (Regina Exhibition Association LTD)		DEPARTMENT		Financial Services							
ADDRESS	1700 Elphinstone St Regina SK. S4P 2Z6		NAME PHONE		Lovely Valenzuela							
					306 271 1866			DATE REQUIRED		05.0.46	DD-MMM-YYYY 25-Oct-2022	
DESCRIP	TION INVOICE NO.	AMOUNT (EXCL. TAX)	FUND	ORG	ACTV	ACCOUNT	PROJECT	LOC	WAM/M5	WORK ORDER	TASK	
Regina Tourism Funding Reallocation 426,450.00		17(1)(b)										
									]			
TOTAL 426,450.00				* Two signatures required (A different requestor and authorizer)								
				REQUESTOR								
SPECIAL INSTRUCTIONS			Lvalenzuela DD-MMM-YYYY									
Please process ASAP			* SIGNATURE 25-Oct-2022									
no GST and PST			DEPARTMENT AUTHORIZATION									
Please send invoice by email to payables@regina.ca				NAME (PRINT) Kim Krywulak PHONE: 306 510 1720								
				ı	Director	, Financial S	Services			DD-MMM-YY	ľΥ	
				Kim Krywulak Digitally signed by Kim Krywulak Date: 2022.11.09 17:35:39 -06'00'								
				* SIGNATURE								