Clear Form

Secured Futures
Compassion - Service - Dedication

TO SUBMIT YOUR REQUEST
FAX: 215-358-2291
EMAIL: disbursements@SecuredFutures.org
MAIL: Secured Futures Processing Center
PO Box 51600 · Phoenix, AZ 85076

REQUEST TO ORDER ITEMS

DATE _____ **Secured Futures Account Number** _____

BENEFICIARY (PLEASE PRINT) _____

Phone Number _____ **Email Address** _____

SIGNATURE of Beneficiary|POA|Guardian _____

Store Name _____

Store Website Address _____

Total Amount Requested _____ *(Tax and shipping cost will be added)*

☐ **SHIP ITEMS TO** _____

_____

Shipping Preference: ☐ Standard ☐ Expedited ☐ Signature required *(if not offered, items will still be shipped)*

☐ **STORE PICKUP ADDRESS** *(if applicable)* _____

_____

Name of person who will pick up items (ID will be required at the store) _____

If some items are not available, *the remainder of the items will still be ordered. You may resubmit for missing items on a new request form.*

BE SPECIFIC with Item Descriptions: INCLUDE Item number, model number, color, size, etc.	**Cost of Item**

ATTACH SEPARATE PAPER FOR ADDITIONAL ITEMS AND/OR A PRINTED WEBSITE SHOPPING CART

Please allow 5-8 business days for processing. Incomplete forms will be returned to the beneficiary.

YOU MAY MAKE COPIES OF THIS FORM OR DOWNLOAD FROM OUR WEBSITE: www.SecuredFutures.org/forms