



## LXLSC Welfare Audit Sheet

Please return to [laughlinxlspouses.charitable@gmail.com](mailto:laughlinxlspouses.charitable@gmail.com)

Organization: \_\_\_\_\_

Date: \_\_\_\_\_

For auditing purposes, please state how the donated funds were used for your event/program, to include itemized expenditures, and return no later than 60 days after the date of the event/program. When relevant, please provide scanned copies of receipts. Failure to do so will disqualify your organization from future donations until the required paperwork is received. If you have any questions, please feel free to contact us.

Funds Usage:

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Phone#: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Thank you,  
LXLSC Charitable Chair