

LTP In-Kind Reporting Form

To be completed by designated LTP representative and submitted to <u>accounts-payable@laso.org</u> by the 15 th of the following month.	
Date of Submission:	Агеа:
Donated Item Description:	Donated Value
Donor Name:	Donation Date:
Company:	
Address:	
City, State, Zip:	Phone:
Email Address:	
Donated Item Description:	Donated Value
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Donor Name:	Donation Date:
Company:	
Address:	
City, State, Zip:	Phone:
Email Address:	
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Donor Name:	Donation Date:
Company:	
Address:	
City, State, Zip:	Phone:
Email Address:	