

## WSA Fraternal Life Mission Statement: To provide charitable and benevolent benefits to its members and the communities in which they reside.

## WSA Fraternal Life provides LAIP Funding to assist WSA's subordinate lodges with the promotion and furtherance of WSA's mission statement.

Lodge Name:\_\_\_\_\_

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

Please complete the blank with the amount requested. This request must be submitted no later than 30 days after the quarter in which the event occurred.

\$ Lodge .	Administration (Available	\$30/month)		
1 <sup>st</sup> Q	uarter 2 <sup>nd</sup> Quarter 3 <sup>n</sup>	<sup>d</sup> Quarter 4 <sup>th</sup> Quarter		
(\$100 p Please	es, and Description of activ	e event which includes th	vent per month) ne following information: Date, Number s benefitted. (Please use reverse of form	
1				
(\$10 pe	-up of charitable event to H r event – funds available fo le if photographs suitable	or a maximum of one eve	ent per month) aternal Voice are provided with this req	juest
\$ Total Re	equested			
Lodge President:			Date:	
Lodge Secretary:			Date:	
		Home Office Use		
Reviewed by:	Date:	Approved by:	Date:	
Amount paid:	Check #	Date:	Ledger Code:	