

RAI

City of Aurora, Illinois
Raffle Audit Form (Due within 30 days of raffle drawing.)



ALL INFORMATION ON THIS FORM MUST BE COMPLETED IN BLACK INK, PRINTED OR TYPED AND SUBMITTED TO THE CITY CLERK'S OFFICE, 44 E. DOWNER PLACE, AURORA, IL.

AUDIT INFORMATION

The information below is required and must be filed with the City Clerk's Office no later than 30 days upon completion of the Raffle.

Name of Organization: _____

Telephone #: _____

Email: _____

Raffle Name: _____

Date of Raffle: _____

Gross Receipts: \$ _____ Net Proceeds: \$ _____

Please Attach the Following three (3) items when you submit this page to the City Clerk's Office:

- ◇ Itemized List of Operating Expenses
- ◇ Itemized List of the Distribution of the Net Proceeds
- ◇ List of Prize Winners

Treasurer's Name: _____

Address: _____ Zip: _____

Telephone #: _____ Email: _____

Treasurer's Signature: _____

Subscribed and sworn to me before this ___ day of _____, 20__.

(Notary Seal)

Notary Public