



2008

SESOSTRIS SPORTSMAN'S GIVEAWAY
CORPORATE ADVERTISING PACKAGE

Business name _____

Address _____

City _____ State _____ Zip code _____

Name as listed on website _____

Website address _____

Billing name (if different) _____

Address _____

City _____ State _____ Zip code _____

Package 1--\$300 _____ Package 2--\$500 _____ Package 3--\$1000 _____

Method of Payment: Cash _____ Check # _____ Bill me due 6/1/2008 _____

Signature of purchaser _____ Date _____

Salesman name _____ Membership # _____

CUSTOMER RECEIPT



2008

SESOSTRIS SPORTSMAN'S GIVEAWAY SPONSORSHIP
ADVERTISING PACKAGE

Package # _____ Payment Options: Cash _____ Check # _____ Bill sponsor due 6/10/2008 _____

Signature of Salesman _____ Membership # _____ Date _____

Any questions or inquiries may be directed to the Sesostris Shrine office located at 1050 Saltillo,
Roca, NE 68430 or call 402-474-6890