

FOR OFFICE USE ONLY

Sponsor # _____

Ticket #s: _____

Seller Tkt #: _____

Invoice #: _____



**CORPORATE ADVERTISING SPONSORSHIP
SESOSTRIS SHRINE SPORTSMAN'S RAFFLE
OCTOBER 19, 2019**

SESOSTRIS SHRINE CENTER / 1050 SALTILLO ROAD / ROCA NE 68430

Business Name: _____ Individual Name _____

Address: _____

City: _____ State _____ Zip Code _____

Web Site Address _____ Phone Number: _____

Billing Name _____ Email Address _____

Address: _____

City: _____ State _____ Zip Code _____

Package 1 - \$2500 _____ Package 2 - \$1000 _____ Package 3 - \$500 _____ Package 4 - \$300 _____

Payment Options After July 22, 2019: Cash _____ Check # _____ Bill me _____

Signature of Purchaser _____ Date _____

Seller Name _____ Membership _____

Payments are not deductible as charitable contributions.
Proceeds are for the benefit of Sesostris Shriners

CUSTOMER RECEIPT

**CORPORATE ADVERTISING SPONSORSHIP
SESOSTRIS SHRINE SPORTSMAN'S RAFFLE
OCTOBER 19, 2019**

Package # _____ Payment Option after 7/22/2019: Cash _____ Check # _____ Bill Sponsor _____

Signature of Seller _____ Membership # _____ Date _____

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

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