



Winter Fest Raffle Procurement Form

Date: Saturday, November 2, 2024

Location: To be determined

Time: 9:00 am – 3:00 pm

Business Name:

Business Address:

Street

City

State

Zip

Primary Contact:

First

Last

Phone #: (____) _____ - _____ Email: _____

Item description:

Value: _____

Please select one:

- I will drop the item off at the Lacey South Sound Chamber office by **10/25/24**
- Please pick up from my office by **10/25/24**
- Item included with form at time of turn in