



RAFFLE DONATION FORM

CONTACT Information

Sponsor Name
EXACTLY as it should appear

Contact Name

Address

City, State

Zip

Phone Number

Email

DONATION Information

Item Description:

Special Restrictions (available dates or expiration):

Estimated Retail Value: \$

*Items must be received by October 3, 2025:

- ☐ Item is enclosed
☐ Item will be sent on _____
☐ Please contact me about picking up the item

Please mail Raffle Donation Form to:

Rosey Gonzalez, FSMV, 430 North Canal Street, Lawrence, MA 01840
Questions? Call Rosey Gonzalez, 978-327-6608 or email: Rgonzalez@fsmv.org