



2024 Cash for a Cause Official Entry Form

CONTACT INFORMATION

Name: _____ Address: _____
 Date: _____ City, State & Zip: _____
 Email: _____ Phone Number: _____

2024 CASH FOR A CAUSE OPPORTUNITY DRAWING TICKET DETAIL

Quantity	Quantity – one person may enter no more than five times.	Amount
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<input type="checkbox"/>	Individual Ticket: _____ @ \$100.00	Total: _____
<input type="checkbox"/>	Donation: \$ _____	Total: _____

How did you hear about Cash for a Cause: Mailing, Online, Parish Bulletin, Email, CCNWFL Staff, or CCNWFL Board Member?
 If it was Staff or a Board Member, please identify them. _____

TOTAL AMOUNT: _____

Signature _____ Date _____

PAYMENT PREFERENCE

Credit Card Number: _____ Exp. Date: _____
 Card Type: _____ Amount: _____
 Check #: _____ Amount: _____ Date Received: _____
 Received by: _____ Initials: _____ Initials: _____

CCNWFL ONLY

TICKET PURCHASE DETAILS ENTERED INTO THE SPREADSHEET _____	DATE RECEIVED IN OFFICE: _____
Ticket Numbers Assigned to Purchase: _____	ENTRY FORM RECEIVED BY: _____
TICKET(S) SOLD BY: _____	