

Raffle Request

The following information is needed from all organizations requesting to hold a raffle within the City of Spearfish. Please attach any additional information regarding your organization or cause that you wish the Council to review.

Name of Organization: _____

Contact Person: _____

Phone number and email address: _____

Item(s) being raffled:

| |
|--|
| |
|--|

Cost of tickets: _____

Dates of ticket sales: _____

Date of drawing: _____

Proceeds from the raffle to benefit: _____

Your raffle request will be placed on the Raffle Registry list on the City Website. The City Council does not take "official action" unless to deny the raffle request.

Finance Office Use Only:

Date Registered: _____

Date Registry Updated: _____

SAVE your completed form

Send a copy to the Finance Office for your request to be reviewed and registered. Either print and deliver or email your saved form to karla.weber@cityofspearfish.com