

MAXIMUM SALES \$2000 OR \$300 TO YOU

MAZZIO'S NIGHT FUNDRAISER



MAZZIO'S NIGHT

THIS FORM MAY BE COPIED

Date of Event: _____

Group Name: _____

Make Check Payable to: _____

Contact Person: _____

Mailing Address: _____

City/State/Zip: _____

Phone # or e-mail address: _____

MZ Location _____

MZ Street Address /City/State _____

MINIMUM OF \$135 IN RECEIPTS OR \$20.25 TO YOU PER MONTH

MAXIMUM DOLLARS: \$2,000 IN RECEIPTS PER MONTH OR \$300 TO YOU

RECEIPT #	DATE	RECEIPT TOTAL	MZ NITE 15%
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
TOTAL			

MAIL COMPLETED FORMS & RECEIPTS TO:
 MAZZIO'S FUNDRAISERS
 4441 S. 72ND E. AVE
 TULSA, OK 74115

If you have questions, call 918-641-1252 or email gettogether@mazzios.com

RECEIPT TOTAL MAXIMUM DOLLARS: \$2,000 IN RECEIPTS PER MONTH

THIS TALLY FORM MAY BE COPIED FOR YOUR USE