

MASSACHUSETTS STATE COUNCIL KNIGHTS OF COLUMBUS

ANNUAL RAFFLE – REPORT OF TICKETS SOLD

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**1. COUNCIL INFORMATION:**

Name: \_\_\_\_\_ Number: \_\_\_\_\_

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2. Reporting Period: \_\_\_\_\_ to \_\_\_\_\_ Type of Report: \_\_\_ Interim \_\_\_ Final

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**3. TICKET RECEIPTS:**

Check Number: \_\_\_\_\_ Check Date: \_\_\_\_\_ Check Amount: \$ \_\_\_\_\_

Full Books Sold: \_\_\_\_\_

Partial Sold Books Included: \_\_\_ Yes \_\_\_ No  
*If No, Go to Item 4*

Books 13 Tickets Sold: \_\_\_\_\_

Books 12 Tickets Sold: \_\_\_\_\_

Books 11 Tickets Sold: \_\_\_\_\_

Books 10 Tickets Sold: \_\_\_\_\_

Books 9 Tickets Sold: \_\_\_\_\_

Books 8 Tickets Sold: \_\_\_\_\_

Books 7 Tickets Sold: \_\_\_\_\_

Books 6 Tickets Sold: \_\_\_\_\_

Books 5 Tickets Sold: \_\_\_\_\_

Books 4 Tickets Sold: \_\_\_\_\_

Books 3 Tickets Sold: \_\_\_\_\_

Books 2 Tickets Sold: \_\_\_\_\_

Books 1 Tickets Sold: \_\_\_\_\_

Full Books Returned \_\_\_\_\_

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**4. RECEIPTS RETAINED BY COUNCIL & PAID TO SELLERS**

**For all ticket sales reported in Item 3, please specify:**

Total Amount Retained by Council: \$ \_\_\_\_\_ Total Amount Retained By Sellers: \$ \_\_\_\_\_

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**5. CERTIFICATION: (This item must be completed by the Grand Knight or Annual Raffle Chairman)**

I certify that all information contained herein, including any supplements attached hereto, is true and correct to the best of my knowledge and belief..

By: \_\_\_\_\_  
(Signature)

Date: \_\_\_\_\_

\_\_\_\_\_  
(Title)

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**STATE COUNCIL USE ONLY:**

Council check is for the correct amount \_\_\_ Yes \_\_\_ No

Amount retained by the Council is Correct: \_\_\_ Yes \_\_\_ No

Ticket stubs returned match report \_\_\_ Yes \_\_\_ No

Amount retained by the Seller is Correct: \_\_\_ Yes \_\_\_ No