The Commonwealth of Massachusetts

(city or town)

ANNUAL REPORT - RAFFLES & BAZAARS

Name and address of Nonprofit Organization:

Expiration Date of Permit:

Number of Raffles and Bazaars Held:

Amount of Money Received: $ __________

Expenses Connected with Raffles Conducted: $ __________

Net Proceeds: $ __________

For What Purposes Were The Proceeds Used?

Names & Addresses of Winners of $25.00 or More:

(Attach Additional Pages as Necessary)

We, the undersigned, do hereby certify that this report is true and complete:

1. __________

2. __________

3. __________

(Accountant)

Report Certified to be in Conformity With C. 810, Acts of 1969:

Signature of Authorized Officer or Member of Organization

City/Town Clerk